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### **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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▶ 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.

|                              |            | dar year 2014 or tax year beginning                                    | , 2014                       | 1, and e                                         |                                       | 7/30                                             | ڪا 20 ,                                 |
|------------------------------|------------|------------------------------------------------------------------------|------------------------------|--------------------------------------------------|---------------------------------------|--------------------------------------------------|-----------------------------------------|
| Nar                          | ne of for  | undation                                                               | <del></del>                  |                                                  | A Employe                             | f identification number                          | _                                       |
| 77                           | <u>\</u> 2 | Macharlane tourida                                                     | elion                        |                                                  | 44.                                   | -17015                                           | <u>68</u>                               |
|                              |            | d street or P.O box number if mail is not delivered to street address) | Room                         | /surte                                           |                                       | e number (see instruct                           | ions)                                   |
| _                            | 37         | 80 Selby Ave                                                           |                              |                                                  | 48c                                   | <u> -575-</u>                                    | 7529                                    |
| City                         | or town    | n, state or province, country, and ZIP or foreign postal code          | `                            |                                                  | C If exempt                           | tion application is pend                         | ing, check here                         |
|                              | Lc         | es Angeles. CA                                                         | 10034                        |                                                  |                                       |                                                  | _                                       |
| G                            |            |                                                                        | of a former public           | charity                                          | D 1. Foreigi                          | n organizations, check                           | here ▶ 🗌                                |
|                              |            | ☐ Final return ☐ Amended r                                             |                              | - 1                                              | _                                     | •                                                |                                         |
|                              |            | Address change   Name char                                             | nge                          |                                                  |                                       | n organizations meeting<br>here and attach compl |                                         |
| Н                            | Check      | type of organization: Section 501(c)(3) exempt p                       | rivate foundation            |                                                  | E If private                          | foundation status was                            | terminated under                        |
|                              |            | n 4947(a)(1) nonexempt charitable trust  Other tax                     |                              | lation                                           | section 5                             | 07(b)(1)(A), check here                          | ▶⊔                                      |
|                              |            | arket value of all assets at J Accounting method                       |                              | ccrual                                           | E If the four                         | ndation is in a 60-mont                          | h tormination                           |
|                              |            | f year (from Part II, col. (c), Other (specify)                        |                              |                                                  |                                       | ction 507(b)(1)(B), chec                         |                                         |
|                              |            | (Part I, column (d) must be                                            | on cash basis.)              |                                                  |                                       |                                                  |                                         |
|                              | art I      | Analysis of Revenue and Expenses (The total of                         |                              |                                                  |                                       |                                                  | (d) Disbursements                       |
|                              |            | amounts in columns (b), (c), and (d) may not necessarily equal         | (a) Revenue and expenses per |                                                  | investment<br>icome                   | (c) Adjusted net income                          | for chantable purposes                  |
|                              |            | the amounts in column (a) (see instructions).)                         | books                        | .,,                                              | COMO                                  | i iloonio                                        | (cash basis only)                       |
|                              | 1          | Contributions, gifts, grants, etc., received (attach schedule)         | 4 000                        |                                                  | · ···                                 |                                                  |                                         |
|                              | 2          | Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B    |                              |                                                  | ····                                  | ····                                             |                                         |
|                              | 3          | Interest on savings and temporary cash investments                     | Ω                            | 8                                                |                                       |                                                  |                                         |
|                              | 4          | Dividends and interest from securities                                 | 20,623                       | 20                                               | 623                                   |                                                  |                                         |
|                              | 5a         | Gross rents                                                            | 20,000                       | - <del>20</del>                                  | · · · · ·                             |                                                  |                                         |
|                              | b          | Net rental income or (loss)                                            |                              | <del></del>                                      | ·. ·· ··· ·                           |                                                  |                                         |
| a)                           | 6a         | Net gain or (loss) from sale of assets not on line 10                  | 0                            |                                                  | · · · · · · · · · · · · · · · · · · · |                                                  |                                         |
| Ž                            | b          | Gross sales price for all assets on line 6a                            |                              |                                                  |                                       | <u> </u>                                         |                                         |
| ē                            | 7          | Capital gain net income (from Part IV, line 2)                         |                              |                                                  | <u> </u>                              |                                                  |                                         |
| Revenue                      | 8          | Net short-term capital gain                                            |                              |                                                  | <u> </u>                              |                                                  |                                         |
|                              | 9          | Income modifications                                                   |                              |                                                  |                                       |                                                  |                                         |
|                              | 10a        | Gross sales less returns and allowances                                |                              | <del></del>                                      |                                       |                                                  |                                         |
|                              | b          | Less: Cost of goods sold                                               |                              |                                                  |                                       |                                                  |                                         |
|                              | C          | Gross profit or (loss) (attach schedule)                               |                              | -                                                | <del></del>                           |                                                  |                                         |
|                              | 11         | Other income (attach schedule)                                         |                              | <del></del>                                      | <del></del>                           |                                                  |                                         |
|                              | 12         | Total. Add lines 1 through 11                                          | 24.631                       | 20,                                              | 6.31                                  |                                                  |                                         |
|                              | 13         | Compensation of officers, directors, trustees, etc.                    | 41,00.                       | 7                                                | البياري                               |                                                  |                                         |
| Expenses                     | 14         | Other employee salaries and wages                                      |                              |                                                  | <del></del>                           | <u> </u>                                         |                                         |
| SE SE                        | 15         | Pension plans, employee benefits                                       |                              | <del></del>                                      |                                       |                                                  | · · · · · ·                             |
| ğ                            | 16a        |                                                                        |                              |                                                  |                                       | <b></b>                                          |                                         |
| -                            | b          | Accounting fees (attach schedule)                                      |                              |                                                  | ···············                       |                                                  |                                         |
| Ş                            | c          | Other professional fees (attach schedule) (2)                          |                              |                                                  |                                       | <u> </u>                                         |                                         |
| ä                            | 17         |                                                                        |                              |                                                  |                                       | <u> </u>                                         | ļ — — — — — — — — — — — — — — — — — — — |
| str                          | 18         | Taxes (attach schedule) (see instructions)                             | 363                          | 36                                               | 33                                    |                                                  |                                         |
| Ξ.                           | 19         | Depreciation (attach schedule) and depletion                           |                              |                                                  | <del></del>                           | <u></u>                                          | 1                                       |
| 톥                            | 20         | Occupancy + phone                                                      | 130                          | 13                                               |                                       |                                                  | 130                                     |
| ĕ                            | 21         | Travel, conferences, and meetings                                      | 2311                         | 23                                               |                                       |                                                  | 2311                                    |
| 핕                            | 22         | Printing and publications +. writer                                    | 1876                         | 1                                                | 16                                    |                                                  | 1876                                    |
| a                            | 23         | Other expenses (attach schedule)                                       |                              |                                                  |                                       |                                                  |                                         |
| Ę                            | 24         | Total operating and administrative expenses.                           |                              | ,                                                | <del> </del>                          | <u> </u>                                         |                                         |
| ਭ                            | [          | Add lines 13 through 23                                                | 4.680                        | 14,6                                             | 580                                   |                                                  |                                         |
| Operating and Administrative | 25         | Contributions, gifts, grants paid                                      | 29,400                       |                                                  | <del></del> -                         | <del>                                     </del> | 29,400                                  |
| 0                            | 26         | Total expenses and disbursements. Add lines 24 and 25                  | 34,080                       | 46                                               | ×80                                   |                                                  | 33,717                                  |
|                              | 27         | Subtract line 26 from line 12:                                         |                              | <del>                                     </del> |                                       |                                                  |                                         |
|                              | 1          | Excess of revenue over expenses and disbursements                      | (9,449)                      | 1                                                |                                       |                                                  |                                         |
|                              | a<br>b     | Net investment income (if negative, enter -0-) .                       |                              | 15                                               | 951                                   |                                                  |                                         |
|                              |            | Adjusted net income (if negative, enter -0-)                           | <del></del>                  | ردر                                              |                                       | <del> </del>                                     | 1                                       |

| Cash - non-interest-bearing   2 Savings and temporary cash investments   3 154 821 32.037 32.037                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Pa       | rt II  | Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) |                        |               |             |                          |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------|-------------|--------------------------|--|
| Savings and temporary cash investments  3 Accounts receivable ► Less: allowance for doubtful accounts ► Piedges receivable ← Less: allowance for doubtful accounts ► Grants receivable Receivable due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)  7 Other notes and lears receivable (attach schedule) ← Less: allowance for doubtful accounts ► Si Inventories for sale or use Prepaid expenses and deferred charges Prepaid expenses and deferred charges Investments—Corporate stock (attach schedule) Investments—Corporate stock (attach schedule) Less: accumulated depreciation (attach schedule) Total assets (doctor be → Less: accumulated depreciation (attach schedule) L | _        |        | Balance Sneets should be for end-of-year amounts only. (See instructions.)                                                           | (a) Book Value         |               | е           | (c) Fair Market Value    |  |
| 3 Accounts receivable ► Less: allowance for doubtful accounts ► 4 Piedges receivable ← Less: allowance for doubtful accounts ► 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loss receivable (attach schedule) Less: allowance for doubtful accounts ► 8 Prepaid expenses and deferred charges 10 investments—US, and state government obligations (attach schedule) 1 investments—corporate bonds (attach schedule) 1 investments—corporate bonds (attach schedule) 1 investments—corporate bonds (attach schedule) 1 investments—orbor (attach schedule) 2 investments—orbor (att | - !      | 1      | <del>-</del>                                                                                                                         | 3.794                  |               |             |                          |  |
| 3 Accounts receivable ► Less: allowance for doubtful accounts ► 4 Piedges receivable ← Less: allowance for doubtful accounts ► 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loss receivable (attach schedule) Less: allowance for doubtful accounts ► 8 Prepaid expenses and deferred charges 10 investments—US, and state government obligations (attach schedule) 1 investments—corporate bonds (attach schedule) 1 investments—corporate bonds (attach schedule) 1 investments—corporate bonds (attach schedule) 1 investments—orbor (attach schedule) 2 investments—orbor (att | -        | 2      | Savings and temporary cash investments                                                                                               | 32,096                 | 32,23         | >7_         | 32,237                   |  |
| Less: allowance for doubtful accounts ▶  A Pledges receivable Less: allowance for doubtful accounts ▶  Grants receivable  Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) [see instructions]  7 Other notes and loans receivable (attach schedule) [see instructions]  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  9 Investments—Osnorate stock (attach schedule)  10 Investments—Osnorate stock (attach schedule)  11 Investments—Corporate stock (attach schedule)  12 Investments—Corporate stock (attach schedule)  13 Investments—Corporate stock (attach schedule)  14 Land, buildings, and equipment: basis ▶  Less: accumulated depreciation (attach schedule)  15 Other assets (descorptable)  16 Other assets (descorptable)  17 Total assets (fo be completed by all filers—see the instructions. Also, see page 1, flem 1)  18 Grants payable  19 Deferred reverue  20 Leas from officers, directors, trustees, and other disqualified persons  19 Mortgages and other notes payable (attach schedule)  20 Loss from officers, directors, trustees, and other disqualified persons  10 Mortgages and other notes payable (attach schedule)  21 Unrestricted  22 Other liabilities (describe ▶  23 Total liabilities (add lines 17 through 22)  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Total liabilities (add lines 27 through 31.  28 Padd-in or capital surplus, or land, bidg, and equipment fund  29 Pater deemings, accumulated income, endowment, or other funds  20 Permanently restricted  20 Total read earnings, accumulated income, endowment, or other funds  28 Padd-in or capital surplus, or land, bidg, and equipment fund  29 Pater and earnings, accumulated income, endowment, or other funds  20 Total in liabilities (add lines 17 through 31.  21 Total liabilities (add lines 32 through 32.  22 Total liabilities (add lines 32 through 32.  23 Total read earnings, accumulated income, endowment, or other funds  29 Pater and earnings, accumulated income, endowme | - 1      | 3      | Accounts receivable ▶                                                                                                                |                        |               |             |                          |  |
| Less: allowance for doubiful accounts ▶  6 Grants receivable  7 Other notes and loars receivable (attach schedule)   Less: allowance for doubiful accounts ▶  8 Inventroies for sale or use  9 Prepaid expenses and deferred charges  10a Investments—Corporate stock (attach schedule)   10a Investments—Corporate stock (attach schedule)   11 Investments—Corporate stock (attach schedule)   12 Investments—Corporate stock (attach schedule)   13 Investments—Other (attach schedule)   14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule)   15 Investments—Other (attach schedule)   16 Other assets (describe ▶  17 Accounts payable and accrued expenses   18 Grants payable and accrued expenses   19 Deferred revenue   19 Deferred revenue   10 Loars from officers, directors, trustees, and other disqualified persons   10 Cher liabilities (describe ▶ 10 Total lassifies (add lines 17 through 22) 17 Condidations that do not follow SFAS 117, check here   18 Deferred revenue   19 Deferred revenue   10 Capital stock, trust principal, or current funds   10 Payable   11 Capital state   12 Capital stock, trust principal, or current funds   13 Total lasses   14 Capital state   15 Temporarily restricted   16 Temporarily restricted   17 Capital state   18 Payable   19 Deferred revenue   19 Deferred revenue   10 Deferred revenue   10 Deferred revenue   11 Deferred revenue   12 Capital stock, trust principal, or current funds   13 Total lassifities and lines 21 through 31   15 Total lassifities and energy   15 Total lassifities and energy   16 Total red assets or fund balances (see instructions)   17 Total red assets or fund balances (see instructions)   18 Total lassifities and net assets/fund balances (see instructions)   18 Total lassifities and net assets/fund balances (see instructions)   19 Deferred evenue, accomulated encome, endowment, or other funds   10 Deferred evenue, accomulated encome, endowment, or other funds   10 Deferred evenue, accomulated encome, endowment, or other funds   10 Deferred e |          |        | Less: allowance for doubtful accounts ▶                                                                                              |                        |               |             |                          |  |
| Sequence of the control of the cont | ļ        | 4      | Pledges receivable ▶                                                                                                                 |                        |               |             |                          |  |
| Sequence of the control of the cont |          |        | Less: allowance for doubtful accounts ▶                                                                                              |                        |               |             |                          |  |
| disqualified persons (attach schedule) (see instructions)  7 Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubfful accounts ▶ 8 Inventories for sale or use 9 Prepared expenses and deferred charges 10 Investments—U.S. and state government obligations (attach schedule) 10 Investments—corporate stock (attach schedule) 11 Investments—and, buildings, and equipment basis ▶ Less: accumulated depreciation (attach schedule) 12 Investments—mortgage loans 13 Investments—mortgage loans 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶ 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grats payable 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Contre liabilities (describe ▶ 23 Total liabilities (attach schedule) 24 Unrestricted 25 Permanentity restricted 26 Permanentity restricted 27 Temporarily restricted 28 Permanentity restricted 29 Permanentity restricted 20 Permanentity restricted 20 Permanentity restricted 21 Temporarily restricted 22 Permanentity restricted 23 Permanentity restricted 24 Permanentity restricted 25 Permanentity restricted 26 Permanentity restricted 27 Total net assets or fund balances (see instructions) 28 Pad-in or capital surplus, or land blog, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 29 Permanentity restricted on prior year of the see that the see  | - 1      | 5      | Grants receivable                                                                                                                    |                        |               |             |                          |  |
| 7 Other notes and loans receivable (attach schedule) ► Less: allowance for doubtiful accounts ► 8 Inventrories for sale or use 9 Prepard expenses and deferred charges 10a Investments—Us and state government obligations (attach schedule) 1 Investments—Corporate bonds (attach schedule) 1 Investments—Corporate bonds (attach schedule) 2 Investments—Corporate bonds (attach schedule) 1 Investments—Gorporate bonds (attach schedule) 1 Investments—Fortingape loans 1 Investments—Torpingape loans 1 Investments—T |          | 6      | · · · · · · · · · · · · · · · · · · ·                                                                                                |                        |               |             |                          |  |
| Less: allowance for doubtful accounts ▶ 8 Inventrories for sale or use 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10 Investments—Los. and state government obligations (attach schedule) b investments—corporate stock (attach schedule) c investments—corporate stock (attach schedule) 11 Investments—oroporate stock (attach schedule) 12 Investments—oroporate stock (attach schedule) 13 Investments—oroporate stock (attach schedule) 14 Land, buildings, and equipment: basis ▶ Less: accumulated deprecation (attach schedule) ▶ 15 Other assets (describe ▶ 16 Total assets (for be completed by all filers—see the instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Loan from officers, directors, trustees, and other disqualified persons 21 Total liabilities (describe ▶ 22 Total liabilities (describe ▶ 23 Total liabilities (add lines 17 through 22) 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Permanently restricted 28 Paid-in or capital surplus, or land, bidg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Paid-in or capital surplus, or land, bidg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Paid-in or capital surplus, or land, bidg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total liabilities and net assets/fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total liabilities and net assets/fund balances 31 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances and of year (line 4 minus line 5)—Part II | - [      |        |                                                                                                                                      |                        |               |             |                          |  |
| Inventories for sale or use                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          | 7      | Other notes and loans receivable (attach schedule) ▶                                                                                 | ·                      |               |             |                          |  |
| b Investments—corporate stock (attach schedule) c Investments—corporate bonds (attach schedule) 11 Investments—and, buildings, and equipment basis ► Less accumulated deprecation (attach schedule) ► 12 Investments—orther (attach schedule) ► 13 Investments—orther (attach schedule) ► 14 Land, buildings, and equipment: basis ► Less accumulated deprecation (attach schedule) ► 15 Other assets (describe ► 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item f) 17 Accounts payable and accrued expenses 18 Grants payable 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ► 23 Total labilities (add lines 17 through 22) 24 Unvestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 4 Total retails of the page of the pa |          |        | Less: allowance for doubtful accounts ▶                                                                                              |                        |               |             |                          |  |
| b Investments—corporate stock (attach schedule) c Investments—corporate bonds (attach schedule) 11 Investments—and, buildings, and equipment basis ► Less accumulated deprecation (attach schedule) ► 12 Investments—orther (attach schedule) ► 13 Investments—orther (attach schedule) ► 14 Land, buildings, and equipment: basis ► Less accumulated deprecation (attach schedule) ► 15 Other assets (describe ► 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item f) 17 Accounts payable and accrued expenses 18 Grants payable 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ► 23 Total labilities (add lines 17 through 22) 24 Unvestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 4 Total retails of the page of the pa | ş        | 8      | Inventories for sale or use                                                                                                          |                        |               |             | <u> </u>                 |  |
| b Investments—corporate stock (attach schedule) c Investments—corporate bonds (attach schedule) 11 Investments—and, buildings, and equipment basis ► Less accumulated deprecation (attach schedule) ► 12 Investments—orther (attach schedule) ► 13 Investments—orther (attach schedule) ► 14 Land, buildings, and equipment: basis ► Less accumulated deprecation (attach schedule) ► 15 Other assets (describe ► 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item f) 17 Accounts payable and accrued expenses 18 Grants payable 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ► 23 Total labilities (add lines 17 through 22) 24 Unvestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 4 Total retails of the page of the pa | 8        | 9      | Prepaid expenses and deferred charges                                                                                                |                        | L             |             |                          |  |
| c Investments—corporate bonds (attach schedule)  11 Investments—land, buildings, and equipment basis ▶  Less: accumulated depreciation (attach schedule) ▶  12 Investments—other (attach schedule) ▶  13 Investments—other (attach schedule) ▶  14 Land, buildings, and equipment: basis ▶  Less: accumulated depreciation (attach schedule) ▶  15 Other assets (descoribe ▶  16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1)  17 Accounts payable and accrued expenses  18 Grants payable and accrued expenses  19 Deferred revenue  20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule)  21 Corpic liabilities (add lines 17 through 22)  22 Other liabilities (add lines 17 through 22)  31 Total liabilities (add lines 17 through 25 and lines 30 and 31.  24 Unrestricted  25 Permanently restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds.  28 Paid-in or capital surplus, or land, bldg., and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  31 Total liabilities and net assets/fund balances (see instructions)  31 Total liabilities and net assets/fund balances (see instructions)  31 Total liabilities and net assets/fund balances (see instructions)  31 Total liabilities (and balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances  | 2        | 10a    | Investments—U.S. and state government obligations (attach schedule)                                                                  |                        |               |             |                          |  |
| c Investments—corporate bonds (attach schedule) Investments—land, buildings, and equipment basis ▶ Less: accumulated depreciation (attach schedule) ▶  12 Investments—mortgage loans 13 Investments—mortgage loans 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶ 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item i) 17 Accounts payable and accrued expenses 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule) 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule) 21 Total liabilities (describe ▶ 22 Other liabilities (describe ▶ 23 Total liabilities (describe ▶ 24 Unrestricted 25 Permanently restricted 26 Permanently restricted 27 Tomoratily restricted 28 Permanently restricted 29 Retained earnings, accumulated income, endowment, or other funds 30 Total liabilities and net assets/fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total liabilities and net assets/fund balances 4 Total net assets or fund balances is teginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 3 477, 035 3 Other increases not included in line 2 (itemize) ▶ 3 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 5 Total net assets or fund balances at end of year  |          | b      | Investments – corporate stock (attach schedule)                                                                                      | 292,613                | 278,03        | 9           | 555.602                  |  |
| Less: accumulated deprecation (attach schedule) ►  12 Investments — other (attach schedule) ■  13 Investments — other (attach schedule) ■  14 Land, buildings, and equipment: basis ►  Less: accumulated depreciation (attach schedule) ►  15 Other assets (describe ►  16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)  17 Accounts payable and accrued expenses  18 Grants payable.  19 Deferred revenue  20 Loans from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other liabilities (describe ►  23 Total liabilities (describe ►  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  29 Retained earnings, accumulated income, endowment, or other funds  20 Total net assets or fund balances (see instructions)  31 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 1) in the fired fired 1) in the fired 1 in the fired 1 in the fired 1 in th |          | C      |                                                                                                                                      |                        |               |             |                          |  |
| Less: accumulated deprecation (attach schedule) ►  12 Investments — other (attach schedule) ■  13 Investments — other (attach schedule) ■  14 Land, buildings, and equipment: basis ►  Less: accumulated depreciation (attach schedule) ►  15 Other assets (describe ►  16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)  17 Accounts payable and accrued expenses  18 Grants payable.  19 Deferred revenue  20 Loans from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other liabilities (describe ►  23 Total liabilities (describe ►  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  29 Retained earnings, accumulated income, endowment, or other funds  20 Total net assets or fund balances (see instructions)  31 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 4 minus line 5)—Part II, column (b), line 30  6 Total net assets or fund balances at end of year (fired 1) in the fired fired 1) in the fired 1 in the fired 1 in the fired 1 in th |          | 11     | Investments—land, buildings, and equipment: basis ▶                                                                                  |                        |               |             |                          |  |
| 12   Investments — mortgage loans   18   Investments — mortgage loans   19,532   19,099   20,014   14   Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) ►   15   Other assets (describe ►   16   Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1)   347,035   337,586   6   6   6   6   6   6   6   6   6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |        |                                                                                                                                      |                        |               |             |                          |  |
| Less: accumulated depreciation (attach schedule) ►  16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1)  17 Accounts payable and accrued expenses  18 Grants payable and accrued expenses  18 Grants payable and accrued expenses  19 Deferred revenue  20 Loars from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other liabilities (add lines 17 through 22)  37 Total liabilities (add lines 17 through 22)  4 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Pard-In or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  31 Total liabilities and net assets/fund balances (see instructions)  31 Total liabilities and ret assets/fund balances  10 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ►  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ►  5 Total ret assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30  6 337, 586                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ĺ        | 12     |                                                                                                                                      |                        |               |             |                          |  |
| Less: accumulated depreciation (attach schedule) ►  15 Other assets (describe ►  16 Instructions, Also, see page 1, item I)  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Loss from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other ilabilities (add lines 17 through 22)  37 Total liabilities (add lines 17 through 22)  4 Unrestricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Pard-in or capital surplus, or land, bldg, and equipment fund  29 Retained earnings, accumulated moome, endowment, or other funds  31 Total liabilities and net assets/fund balances (see instructions).  31 Total leabilities and net assets/fund balances  347,035 337,586  47,035 337,586  47,035 337,586  47,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586  57,035 337,586                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |          | 13     | Investments—other (attach schedule)                                                                                                  | 18,532                 | 19,090        | 7           | 20,014                   |  |
| Less: accumulated depreciation (attach schedule) ▶  15 Other assets (describe ▶  16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Loans from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other liabilities (describe ▶  23 Total liabilities (add lines 17 through 22)  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Temporarily restricted  28 Pard-in or capital surplus, or land, bldg., and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total liabilities and net assets/fund balances (see instructions)  17 Total liabilities and net assets/fund balances (see instructions)  18 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (iternize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (iternize) ▶  6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30  6 3337, 586                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |          | 14     |                                                                                                                                      |                        |               |             |                          |  |
| 15 Other assets (describe ► 10 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1) 347, 035 337, 586 6 1616,064 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ► 22 Other liabilities (describe ► 23 Other liabilities (describe ► 24 Hrough 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Enemporarily restricted 27 Enemporarily restricted 28 Pard-in or capital surplus, or land, bldg., and equipment fund 28 Pad-in or capital surplus, or land, bldg., and equipment fund 347, 035 337, 586 17 total liabilities and net assets/fund balances (see instructions) 347, 035 337, 586 17 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 2 4, 449 3 3 Other increases not included in line 2 (itemize) ► 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 6 337, 586 17 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 6 337, 586 17 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 6 1337, 586 17 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 6 1337, 586 17 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 6 1337, 586 17 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 6 1337, 586 17 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 6 1337, 586 17 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30 1 |          |        | Less: accumulated depreciation (attach schedule) ▶                                                                                   |                        |               |             |                          |  |
| Instructions. Also, see page 1, item I)  17 Accounts payable and accrued expenses  18 Grants payable .  19 Deferred revenue  20 Loans from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other liabilities (describe ▶  23 Total liabilities (add lines 17 through 22)  50 Foundations that follow SFAS 117, check here □ and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg., and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances (see instructions)  31 Total liabilities and net assets/fund balances (see instructions)  29 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  20 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part III, column (b), line 30  6 337, 586                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |          | 15     |                                                                                                                                      |                        |               |             |                          |  |
| 17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Loans from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other iliabilities (describe ▶  23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg., and equipment fund  29 Paid-in or capital surplus, or land, bldg., and equipment fund  29 Paid-in or capital surplus, or land, bldg., and equipment fund  29 Paid-in or capital surplus, or land, bldg., and equipment fund  29 Paid-in or capital surplus, or land, bldg., and equipment fund  20 Statill Analysis of Changes in Net Assets or Fund Balances  10 Total liabilities and net assets/fund balances (see instructions)  20 Total liabilities and net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  20 Enter amount from Part I, line 27a  30 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30  6 3371,586                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |          | 16     |                                                                                                                                      |                        |               | ,           | 1 1 - (1)                |  |
| 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ▶ 23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here ▶ □ 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances 32 Total liabilities of Changes in Net Assets or Fund Balances 33 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 3 3 7 5 8 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |          |        | ınstructions. Also, see page 1, item I)                                                                                              | 347,035                | 337,580       | 0           | 616,069                  |  |
| 19 Deferred revenue . 20 Loans from officers, directors, trustees, and other disqualified persons . 21 Mortgages and other notes payable (attach schedule) . 22 Other liabilities (describe ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          | 17     | Accounts payable and accrued expenses                                                                                                |                        |               |             |                          |  |
| Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted  Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  Capital stock, trust principal, or current funds.  Part III Analysis of Changes in Net Assets or Fund Balances (see instructions).  Total liabilities and net assets/fund balances (see instructions).  Analysis of Changes in Net Assets or Fund Balances  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at least of year line 2 (itemize) and column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at least of year (line 4 minus line 5)—Part III, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | S        | 18     | Grants payable                                                                                                                       |                        |               |             |                          |  |
| Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted  Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  Capital stock, trust principal, or current funds.  Part III Analysis of Changes in Net Assets or Fund Balances (see instructions).  Total liabilities and net assets/fund balances (see instructions).  Analysis of Changes in Net Assets or Fund Balances  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at least of year line 2 (itemize) and column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at least of year (line 4 minus line 5)—Part III, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ë.       | 19     | Deferred revenue                                                                                                                     |                        |               |             |                          |  |
| Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted  Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  Capital stock, trust principal, or current funds.  Part III Analysis of Changes in Net Assets or Fund Balances (see instructions).  Total liabilities and net assets/fund balances (see instructions).  Analysis of Changes in Net Assets or Fund Balances  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at least of year line 2 (itemize) and column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at least of year (line 4 minus line 5)—Part III, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 賣        | 20     | Loans from officers, directors, trustees, and other disqualified persons                                                             |                        |               |             |                          |  |
| Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted  Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  Capital stock, trust principal, or current funds.  Part III Analysis of Changes in Net Assets or Fund Balances (see instructions).  Total liabilities and net assets/fund balances (see instructions).  Analysis of Changes in Net Assets or Fund Balances  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at least of year line 2 (itemize) and column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Total net assets or fund balances at least of year (line 4 minus line 5)—Part III, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.  Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ā        | 21     | Mortgages and other notes payable (attach schedule)                                                                                  |                        |               |             |                          |  |
| Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize)  6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 3 37 5 86                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | 22     |                                                                                                                                      |                        |               |             |                          |  |
| and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |          | 23     | Total liabilities (add lines 17 through 22)                                                                                          |                        |               |             |                          |  |
| Formanentry restricted  Foundations that do not follow SFAS 117, check here  and complete lines 27 through 31.  Capital stock, trust principal, or current funds.  Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances (see instructions).  Total liabilities and net assets/fund balances (see instructions).  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Enter amount from Part I, line 27a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 8        |        | Foundations that follow SFAS 117, check here >                                                                                       |                        | 1             |             |                          |  |
| Formanentry restricted  Foundations that do not follow SFAS 117, check here  and complete lines 27 through 31.  Capital stock, trust principal, or current funds.  Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances (see instructions).  Total liabilities and net assets/fund balances (see instructions).  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Enter amount from Part I, line 27a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ë        |        | and complete lines 24 through 26 and lines 30 and 31.                                                                                |                        |               |             |                          |  |
| Formanentry restricted  Foundations that do not follow SFAS 117, check here  and complete lines 27 through 31.  Capital stock, trust principal, or current funds.  Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances (see instructions).  Total liabilities and net assets/fund balances (see instructions).  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Enter amount from Part I, line 27a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ä        | 24     | Unrestricted                                                                                                                         |                        |               |             |                          |  |
| Formanentry restricted  Foundations that do not follow SFAS 117, check here  and complete lines 27 through 31.  Capital stock, trust principal, or current funds.  Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances (see instructions).  Total liabilities and net assets/fund balances (see instructions).  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return).  Enter amount from Part I, line 27a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ğ        | 25     | Temporarily restricted                                                                                                               |                        |               |             |                          |  |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |          | 26     | Permanently restricted                                                                                                               |                        |               |             |                          |  |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Ŝ        |        | Foundations that do not follow SFAS 117, check here ▶ □                                                                              |                        |               |             |                          |  |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <u> </u> |        | and complete lines 27 through 31.                                                                                                    |                        |               |             |                          |  |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 9.0      | 27     | · · · · · · · · · · · · · · · · · · ·                                                                                                |                        |               |             |                          |  |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Ę        |        |                                                                                                                                      | 347,035                | 337,58        | 6           |                          |  |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | SS       | 1      |                                                                                                                                      |                        | 00000         | <del></del> | 1                        |  |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | t A      |        |                                                                                                                                      | 347,035                | 1357,58       | صاد         |                          |  |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Se       | 31     | •                                                                                                                                    | 2117                   | 227 10        | · Co        |                          |  |
| 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |          |        |                                                                                                                                      | 1211032                | 1221,20       |             | <u> </u>                 |  |
| end-of-year figure reported on prior year's return)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |          |        |                                                                                                                                      | mn (a) line 20 /       | et agree with |             | r                        |  |
| 2 Enter amount from Part I, line 27a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1        |        |                                                                                                                                      |                        |               | 4           | 247 205                  |  |
| 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | _        |        |                                                                                                                                      |                        |               |             | 37,030                   |  |
| 4 Add lines 1, 2, and 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | _        |        | •                                                                                                                                    |                        |               |             | (7,444)                  |  |
| 5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 337 686                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | _        |        |                                                                                                                                      |                        |               |             | 227 500                  |  |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 337.686                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | _        | _      |                                                                                                                                      |                        |               |             | 331,200                  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 2        | Dec    | reases not included in line 2 (itemize)                                                                                              | Part II column (b) ti  | ine 30        |             | 227 106                  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |          | , 1018 | a not assets or fund balances at end of year (line 4 minus line 3)—                                                                  | · arch, column (b), ii |               | 0_          | Form <b>990-PF</b> (2014 |  |

| Part          | V Capital Gains and                                          | Losses for Tax on Investm                                                                | ent income                          |                                        |                            | <u></u>                                                       |
|---------------|--------------------------------------------------------------|------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------|----------------------------|---------------------------------------------------------------|
|               |                                                              | kind(s) of property sold (e.g., real estate<br>e; or common stock, 200 shs. MLC Co.)     |                                     | (b) How acquired P—Purchase D—Donation | (c) Date acq<br>(mo., day, |                                                               |
| 1a            | 372-162-                                                     | Vanguard mo                                                                              | MARIO                               | 7                                      | 7/1/20                     | 010 5/4/15                                                    |
| <u>b</u>      | (Graz                                                        | <del></del>                                                                              |                                     |                                        |                            |                                                               |
| <u>C</u>      | 260.485-                                                     | VAnguard Wi                                                                              | vasous II                           | P                                      | 11120                      | 12 514115                                                     |
| <u>d</u>      | 100 Shares-                                                  | Banner Corp                                                                              | ·                                   | <u>D</u>                               | 7/1/20                     | 12/10/14                                                      |
|               |                                                              | (f) Depreciation allowed                                                                 | (a) Cost or                         | r other basis                          | 111120                     | (h) Gain or (loss)                                            |
|               | (e) Gross sales price                                        | (or allowable)                                                                           |                                     | ense of sale                           |                            | (e) plus (f) minus (g)                                        |
| <u>a</u><br>b | 10,000                                                       | <u></u>                                                                                  | 5,90                                | 70                                     |                            | <del>, , 4</del> 010                                          |
| <u>_</u>      | 10,000                                                       |                                                                                          | 7,62                                | 5                                      |                            | 375                                                           |
| d             | 10,000                                                       |                                                                                          |                                     | <u> </u>                               |                            | 7                                                             |
| е             | 8.660                                                        |                                                                                          | 15,4                                | 66                                     | 46                         | ,806>                                                         |
|               | Complete only for assets show                                | ring gain in column (h) and owned b                                                      | y the foundation                    | on 12/31/69                            | (n) G                      | ains (Col. (h) gain minus                                     |
|               | (i) F.M.V. as of 12/31/69                                    | (j) Adjusted basis<br>as of 12/31/69                                                     |                                     | ss of col. (i)<br>l. (j), rf any       |                            | ), but not less than -0-) <b>or</b><br>.osses (from col. (h)) |
| а             |                                                              |                                                                                          |                                     |                                        |                            | · · · · · · · · · · · · · · · · · · ·                         |
| <u>b</u>      |                                                              |                                                                                          |                                     |                                        |                            |                                                               |
| <u> </u>      |                                                              |                                                                                          |                                     |                                        |                            |                                                               |
| <u>d</u>      |                                                              |                                                                                          |                                     |                                        | <u> </u>                   | <del></del>                                                   |
| <u>ө</u><br>2 | Capital gain net income or                                   | (not canital loce) /                                                                     | also enter in Pa<br>enter -0- in Pa |                                        |                            | (421)                                                         |
| 3             | Net short-term capital gain                                  | or (loss) as defined in sections                                                         |                                     |                                        | 2                          | 121/                                                          |
| Ū             |                                                              | line 8, column (c) (see instruc                                                          |                                     |                                        |                            |                                                               |
|               |                                                              |                                                                                          |                                     |                                        | 3                          |                                                               |
| Part          | V Qualification Unde                                         | r Section 4940(e) for Redu                                                               | ced Tax on N                        | let Investment                         | Income                     |                                                               |
| Was t         |                                                              | this part blank.<br>ection 4942 tax on the distribut<br>qualify under section 4940(e). D |                                     |                                        | base period                | ? Yes [] !                                                    |
| 1             | Enter the appropriate amou                                   | ınt in each column for each yea                                                          | ır; see the instri                  | uctions before m                       | aking any ei               | ntries.                                                       |
| Cale          | (a)  Base period years endar year (or tax year beginning in) | (b) Adjusted qualifying distributions                                                    | Net value o                         | (c)<br>of noncharitable-use a          | ssets                      | (d) Distribution ratio (col. (b) divided by col. (c))         |
|               | 2013                                                         | 33,717                                                                                   | 651                                 | 6.329                                  |                            | 05137                                                         |
|               | 2012                                                         | 31,090                                                                                   | 642                                 | ,962                                   |                            | 04991                                                         |
|               | 2011                                                         | 78,086                                                                                   | 549                                 |                                        |                            | 25107                                                         |
|               | 2010                                                         | 25, 770                                                                                  | 483                                 |                                        |                            | <u> </u>                                                      |
|               | 2009                                                         | 1 21,700                                                                                 |                                     | 6,027                                  | <del></del>                | 04977                                                         |
| 2             | Total of line 1, column (d)                                  |                                                                                          |                                     |                                        | . 2                        | 25541                                                         |
| 3             |                                                              | or the 5-year base period—divid                                                          |                                     |                                        |                            |                                                               |
|               | number of years the founda                                   | ation has been in existence if le                                                        | ss than 5 years                     |                                        | . 3                        | 5108                                                          |
| 4             | Enter the net value of nonc                                  | haritable-use assets for 2014 fr                                                         | om Part X, line                     | 5 . ,                                  | . 4                        | 656,329                                                       |
| 5             | Multiply line 4 by line 3 .                                  |                                                                                          |                                     |                                        | . 5                        | 33, 527                                                       |
| 6             | Enter 1% of net investmen                                    | t income (1% of Part I, line 27b)                                                        |                                     |                                        | . 6                        | 468                                                           |
| 7             | Add lines 5 and 6                                            |                                                                                          |                                     |                                        | . 7                        | 33,995                                                        |
| 8             | Enter qualifying distribution                                | ns from Part XII, line 4 🛩                                                               |                                     |                                        | . 8                        | 33,717                                                        |
|               | If line 8 is equal to or great Part VI instructions.         | ter than line 7, check the box in                                                        | Part VI, line 1t                    | b, and complete                        | that part us               | ing a 1% tax rate. See                                        |

| Part     | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in                                                                                                                                                            | 113616      | CLIUI    | 10/                     |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------|-------------------------|
| 1a       | Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.                                                                                                                                             |             |          |                         |
|          | Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)                                                                                                                                                       |             |          |                         |
| b        | Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b                                                                                                                          | 31          | 7        |                         |
| С        | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).                                                                                                                            |             |          |                         |
| 2        | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                                           |             |          |                         |
| 3        | Add lines 1 and 2                                                                                                                                                                                                                                   |             |          |                         |
| 4        | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                                         |             |          |                         |
| 5        | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0                                                                                                                                                              | <u>3 1</u>  | 9        |                         |
| 6        | Credits/Payments:                                                                                                                                                                                                                                   |             |          |                         |
| а        | 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a                                                                                                                                                                             |             |          | . }                     |
| b        | Exempt foreign organizations—tax withheld at source 6b                                                                                                                                                                                              |             |          | .                       |
| C        | Tax paid with application for extension of time to file (Form 8868) . 6c 6c                                                                                                                                                                         |             |          | .                       |
| d        | Backup withholding erroneously withheld                                                                                                                                                                                                             |             |          |                         |
| 7        | Total credits and payments. Add lines 6a through 6d                                                                                                                                                                                                 | 1           |          |                         |
| 8        | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached                                                                                                                                                            | <del></del> | 9        |                         |
| 9        | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                                                       | 2           | 7        |                         |
| 10<br>11 | Enter the amount of line 10 to be: Credited to 2015 estimated tax   Refunded   11                                                                                                                                                                   | <del></del> |          |                         |
|          | 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                                                                                                                                    | Γ           | Yes      | No /                    |
|          | participate or intervene in any political campaign?                                                                                                                                                                                                 | 1a          |          | $\overline{\mathbf{V}}$ |
| b        | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?                                                                                                          | 1b          |          | 1                       |
|          | 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          |          | V                       |
| d        | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$                                                                                                                     |             |          | <br>                    |
| ө        | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$                                                                                                          |             |          |                         |
| 2        | Has the foundation engaged in any activities that have not previously been reported to the IRS?                                                                                                                                                     | 2           |          |                         |
| 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           |          | 1                       |
| 4a       | Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                         | 4a          |          | 1                       |
| b        | If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                    | 4b          |          | MA                      |
| 5        | Was there a liquidation, termination, dissolution, or substantial contraction during the year?                                                                                                                                                      | 5           |          | <b>'</b>                |
| 6        | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:                                                                                                                                                   |             |          |                         |
|          | <ul> <li>By language in the governing instrument, or</li> <li>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?</li> </ul> |             |          |                         |
| 7        | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV                                                                                                                   | 7           | <b>V</b> | <del></del>             |
| 7<br>8a  | Enter the states to which the foundation reports or with which it is registered (see instructions)                                                                                                                                                  | <b>-</b>    | _        | $\vdash$                |
| Va       | CALP                                                                                                                                                                                                                                                | 1           |          |                         |
| 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          | -        | i'                      |
| 9        | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or                                                                                                                                     | <del></del> |          |                         |
| •        | 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           |          |                         |
| 10       | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                  | 10          |          |                         |

| Part | VII-A Statements Regarding Activities (continued)                                                                                                                                                                                               |    |          |                |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----------|----------------|
| 11   | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)                                                         | 11 |          | <b>/</b>       |
| 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 |          | /              |
| 13   | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                                                                                                             | 13 | <b>V</b> |                |
| 44   | Website address ►                                                                                                                                                                                                                               |    | -0       |                |
| 14   | The books are in care of ▶ Robert 5 MACFARLANC Telephone no. ▶ 480-5  Located at ▶ 8049 E. COREFREE DR. CAREFREE, AZ ZIP+4 > 853                                                                                                                |    |          | 247            |
| 15   | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here.  and enter the amount of tax-exempt interest received or accrued during the year                                                             |    | •        | <b>&gt;</b> [] |
| 16   | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority                                                                                                                                 |    | Yes      | No             |
|      | over a bank, securities, or other financial account in a foreign country?                                                                                                                                                                       | 16 |          | /              |
|      | See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If                                                                                                                                    |    |          |                |
|      | "Yes," enter the name of the foreign country                                                                                                                                                                                                    |    |          | <u> </u>       |
| Part | VII-B Statements Regarding Activities for Which Form 4720 May Be Required                                                                                                                                                                       |    | Yes      | No             |
| 1a   | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  Dunng the year did the foundation (either directly or indirectly):                                                                                     |    | 163      | 110            |
| ıa   | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?   Yes No                                                                                                                                                 |    |          |                |
|      | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?                                                                                                                                  |    |          |                |
|      | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   Yes                                                                                                                                                |    |          |                |
|      | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                                                                                                                                            |    |          |                |
|      | (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.) |    |          |                |
| b    | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations                                                                                                                          |    |          |                |
|      | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?                                                                                                                                                   | 1b |          | V              |
|      | Organizations relying on a current notice regarding disaster assistance check here                                                                                                                                                              |    |          |                |
| С    | 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 |          | ~              |
| 2    | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):                                                                  |    |          |                |
| а    | 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 ▶ 20 , 20 , 20 , 20                                                                                                                                                                                                    |    |          |                |
| b    | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to        |    |          | ,              |
|      | all years listed, answer "No" and attach statement—see instructions.)                                                                                                                                                                           | 2b | N        | A              |
| С    | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20, 20, 20, 20                                                                                                       |    |          |                |
| 3a   | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?                                                                                                                      |    |          |                |
| b    | If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or                                                                                                                                     |    |          |                |
|      | disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of                    |    |          |                |
|      | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the                                                                                                                                            |    |          |                |
|      | foundation had excess business holdings in 2014.)                                                                                                                                                                                               | 3b | N        | A              |
| 4a   | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                 | 4a |          | V              |
| b    | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its                                                                                                                                  |    |          |                |
|      | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?                                                                                                                              | 4b |          | 1              |

| -orm | 990-PF | (2014) |  |
|------|--------|--------|--|
|      |        |        |  |

| ao | е | 6 |
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| Part         | VII-B Statements Regarding Activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | for W     | /hich Form                    | 4720 I                                | May Be R               | equire         | d (contii                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | nued)       |                |             |       |
|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------|---------------------------------------|------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------|-------------|-------|
| 5a           | During the year did the foundation pay or incur a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ny amo    | ount to:                      |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
|              | (1) Carry on propaganda, or otherwise attempt to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | o influe  | nce legislatio                | n (sect                               | ion 4945(e)            | )? .           | ☐ Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ☑ No        |                |             | - {   |
|              | (2) Influence the outcome of any specific public election (see section 4955); or to carry on,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                               |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
|              | directly or indirectly, any voter registration drive?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |                               |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
|              | (3) Provide a grant to an individual for travel, stu-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | • •       |                               | •                                     |                        |                | ☐ Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ☑ No        |                |             | j     |
|              | (4) Provide a grant to an organization other than                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |                               | -                                     |                        |                | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | _/          |                |             |       |
|              | section 4945(d)(4)(A)? (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |                               |                                       |                        |                | ☐ Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ☑ No        | 1              |             |       |
|              | (5) Provide for any purpose other than religious,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |                               |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | _/          |                |             |       |
| _            | purposes, or for the prevention of cruelty to c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                               |                                       |                        |                | ∐Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>₩</b> No |                |             | 1     |
| þ            | If any answer is "Yes" to 5a(1)-(5), did any of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           |                               |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ibed in     |                |             |       |
|              | Regulations section 53.4945 or in a current notice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | •         | •                             |                                       | •                      | uctions        | <i>.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |             | 5b             |             |       |
| _            | Organizations relying on a current notice regarding                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | _         |                               |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ▶⊔          |                |             |       |
| С            | If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |                               | -                                     |                        |                | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | P 184-      |                |             |       |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           | =                             |                                       |                        | • •            | Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ∐ No        | 1              |             |       |
| 6a           | If "Yes," attach the statement required by Regula<br>Did the foundation, during the year, receive any                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |                               |                                       |                        | miume          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
| va           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                               | in ectiy,                             | to pay pre             |                | □Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | No No       | 1 .            | 1           |       |
| b            | Did the foundation, during the year, pay premiun                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |                               | atly, on                              | a personal             | benefit        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             | 6b             |             |       |
| _            | If "Yes" to 6b, file Form 8870.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ,         | 01.9 0700                     | , , , , , , , , , , , , , , , , , , , | a portoria             | 20110111       | · OOME GO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             | 1-3-           |             |       |
| 7a           | At any time during the tax year, was the foundation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | a party 1 | to a prohibited               | I tax she                             | elter transac          | tion?          | Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☑ No        |                |             |       |
|              | If "Yes," did the foundation receive any proceeds                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |                               |                                       |                        |                | ansaction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | n? .        | 7b             |             |       |
| Par          | VIII Information About Officers, Direc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | tors, 1   | rustees, F                    | ounda                                 | tion Mana              | agers,         | Highly F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Paid E      | mploy          | ees,        |       |
|              | and Contractors                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                               | _                                     |                        |                | · _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                |             |       |
| _1_          | List all officers, directors, trustees, foundation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           | <del></del>                   |                                       | <del></del>            | <del>, `</del> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
|              | (a) Name and address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | hou       | e, and average<br>rs per week | (lf n                                 | mpensation<br>ot paid, | emplo          | Contribution<br>yee benefit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | plans       | (e) Expe       | nse acco    |       |
| 70           | /a T 5 10 0 C 10 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           | ed to position                | en                                    | ter -0-)               | and defe       | erred compe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ensation    | ou lor t       | 2.0114.10   |       |
| <del> </del> | Box5926                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | •         | esident                       | ,                                     | 0—                     | ~              | -0-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | - i         |                | 0-          |       |
| 10           | 18025726<br>4Refree, AZ 85377                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           | AS<br>eded                    |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | -           |                |             |       |
| 1            | TIVE TICE, IT CO SOLIT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 70 =      | -G-C                          |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
|              | anet C. MacParlANC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Sec       | cetaxy/                       |                                       | <del></del>            |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
|              | Box 5926                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           | reasurer                      | -                                     | · 6—                   |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                | 0           |       |
| C            | AREfree AZ 85377                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           | As                            |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
|              | , <u></u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           | eded                          |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |             |       |
| 2            | Compensation of five highest-paid employed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | s (oth    | er than thos                  | se incli                              | uded on li             | ne 1:          | see instr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | uction      | s). If n       | one, e      | nter  |
|              | "NONE."                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                               |                                       |                        |                | <del>,</del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |             |                |             |       |
|              | and the second s |           | (b) Title, and a              |                                       | (-) ()                 | a:             | (d) Contribution (d) Co |             | (e) Expe       | nse acco    | ount. |
|              | (a) Name and address of each employee paid more than \$50,00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Ю         | hours per v<br>devoted to p   |                                       | (c) Compe              | nsation        | plans and compen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | deferred    |                | allowanc    |       |
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| <del></del>  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           | L                             |                                       | l                      |                | L                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                | <del></del> |       |
| rotal        | number of other employees paid over \$50,000 .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | • •       |                               |                                       | <u> </u>               | • • •          | <del></del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | . ▶         |                | 0 PF        |       |
|              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                               |                                       |                        |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             | Form <b>99</b> | ~~~ (       | 2014) |

| Information About Officers, Directors, and Contractors (continued)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Trustees, Foundation Managers, Highly Pald Em             | ployees,           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|--------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | essional services (see instructions). If none, enter "NON | E."                |
| (a) Name and address of each person paid more than \$5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                           | (c) Compensation   |
| $\Lambda$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                           |                    |
| IVONE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                           |                    |
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| The second secon |                                                           |                    |
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| Total number of others receiving over \$50,000 for profession                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | nal services                                              |                    |
| Part IX-A Summary of Direct Charitable Activiti                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ies                                                       |                    |
| List the foundation's four largest direct charitable activities during the ta<br>organizations and other beneficiaries served, conferences convened, rese                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                           | Expenses           |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |                    |
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| D. L.V. D. Common of Drogon Balanci Investor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                           |                    |
| Part IX-B Summary of Program-Related Investor  Describe the two largest program-related investments made by the found                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <del></del>                                               | Amount             |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | audit during the tax you on mos r and z.                  | 70.00.             |
| ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |                    |
| NONE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                           |                    |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ······································                    |                    |
| All other program-related investments. See instructions.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                           |                    |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |                    |
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| Total. Add lines 1 through 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                           |                    |
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| Part      | Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)                                                                                                          | gn fo                                            | undations,                |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------|
| 1         | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,                                                                                                               |                                                  |                           |
| •         | purposes:                                                                                                                                                                                                       |                                                  |                           |
| а         | Average monthly fair market value of securities                                                                                                                                                                 | 1a                                               | 619,185                   |
| b         | Average of monthly cash balances                                                                                                                                                                                | 1b                                               | 47,139                    |
| С         | Fair market value of all other assets (see instructions)                                                                                                                                                        | 1c                                               | 0                         |
| d         | <b>Total</b> (add lines 1a, b, and c)                                                                                                                                                                           | 1d                                               | 666, 324                  |
| е         | Reduction claimed for blockage or other factors reported on lines 1a and                                                                                                                                        |                                                  | ,                         |
|           | 1c (attach detailed explanation)                                                                                                                                                                                |                                                  |                           |
| 2         | Acquisition indebtedness applicable to line 1 assets                                                                                                                                                            | 2                                                |                           |
| 3         | Subtract line 2 from line 1d                                                                                                                                                                                    | 3                                                | 666,324                   |
| 4         | Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see                                                                                                                    |                                                  | 0.00                      |
|           | instructions)                                                                                                                                                                                                   | 4                                                | 9,995                     |
| 5         | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4                                                                                                            | 5                                                | 656,329                   |
| 6         | Minimum investment return. Enter 5% of line 5                                                                                                                                                                   | 6                                                | 32,817                    |
| Part      | XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ► ☐ and do not complete this part.)                                | ouna:                                            | ations                    |
| 1         | Minimum investment return from Part X, line 6                                                                                                                                                                   | 1                                                | 32817                     |
| <b>2a</b> | Tax on investment income for 2014 from Part VI, line 5                                                                                                                                                          | 1                                                |                           |
| b         | Income tax for 2014. (This does not include the tax from Part VI.)                                                                                                                                              |                                                  |                           |
| C         | Add lines 2a and 2b                                                                                                                                                                                             | 2c                                               | 319                       |
| 3         | Distributable amount before adjustments. Subtract line 2c from line 1                                                                                                                                           | 3                                                | 32,498                    |
| 4         | Recoveries of amounts treated as qualifying distributions                                                                                                                                                       | 4                                                | <u>න '</u>                |
| 5         | Add lines 3 and 4                                                                                                                                                                                               | 5                                                | 32,49B                    |
| 6         | Deduction from distributable amount (see instructions)                                                                                                                                                          | 6                                                |                           |
| 7         | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,                                                                                                                     |                                                  | 20 1100                   |
|           | line 1                                                                                                                                                                                                          | 7                                                | 32,498                    |
| Part      |                                                                                                                                                                                                                 |                                                  |                           |
| 1         | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                                                                                                      |                                                  | 20                        |
| а         | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26                                                                                                                                     | 1a                                               | 33,717                    |
| b         | Program-related investments—total from Part IX-B                                                                                                                                                                | 1b                                               |                           |
| 2         | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,                                                                                                                |                                                  | _                         |
| _         | purposes                                                                                                                                                                                                        | 2                                                | 0                         |
| 3         | Amounts set aside for specific charitable projects that satisfy the:                                                                                                                                            |                                                  |                           |
| a         | Suitability test (prior IRS approval required)                                                                                                                                                                  | 3a                                               | 0                         |
| b         | Cash distribution test (attach the required schedule)                                                                                                                                                           | 3b                                               | 22 717                    |
| 4         | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | <del>                                     </del> | 33,717                    |
| 5         | Enter 1% of Part I, line 27b (see instructions)                                                                                                                                                                 | 5                                                |                           |
| e         | Adjusted qualifying distributions. Subtract line 5 from line 4                                                                                                                                                  | 6                                                | 33.717                    |
| 6         | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating                                                                                                             |                                                  | <del></del>               |
|           | qualifies for the section 4940(e) reduction of tax in those years.                                                                                                                                              | 9 44116                                          | and the foundation        |
|           |                                                                                                                                                                                                                 |                                                  | Form <b>990-PF</b> (2014) |

| <sup>p</sup> art | Undistributed Income (see instruction                                       | ons)          |                            |                    | · · · · · · · · · · · · · · · · · · · |
|------------------|-----------------------------------------------------------------------------|---------------|----------------------------|--------------------|---------------------------------------|
| 1                | Distributable amount for 2014 from Part XI,                                 | (a)<br>Corpus | (b)<br>Years prior to 2013 | <b>(c)</b><br>2013 | (d)<br>2014                           |
|                  | line 7                                                                      |               |                            |                    | 32,498                                |
| 2                | Undistributed income, if any, as of the end of 2014:                        |               |                            |                    | Ì                                     |
| а                | Enter amount for 2013 only                                                  |               |                            |                    |                                       |
| b                | Total for prior years: 20,20,20                                             |               | 0                          |                    |                                       |
| 3                | Excess distributions carryover, if any, to 2014:                            |               |                            |                    |                                       |
| а                | From 2009                                                                   |               |                            |                    |                                       |
| b                | From 2010 928                                                               |               | 1                          |                    |                                       |
| C                | From 2011 1.7 86                                                            |               | i                          |                    |                                       |
| d                | From 2012 1,069                                                             |               |                            |                    | <u>l</u>                              |
| ө                | From 2013                                                                   |               |                            |                    | 1                                     |
| f                | Total of lines 3a through e                                                 | 4535          |                            |                    |                                       |
| 4                | Qualifying distributions for 2014 from Part XII,                            |               |                            |                    |                                       |
|                  | line 4: ▶ \$ 33,717                                                         |               |                            |                    | i                                     |
| а                | Applied to 2013, but not more than line 2a .                                |               |                            | 0                  | ]                                     |
| 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             | ·                          |                    | İ                                     |
| d                | Applied to 2014 distributable amount                                        |               |                            |                    | 32,498                                |
| Θ                | Remaining amount distributed out of corpus                                  | 0             |                            |                    |                                       |
| 5                | Excess distributions carryover applied to 2014                              | 0             |                            |                    |                                       |
|                  | (If an amount appears in column (d), the same                               |               |                            |                    |                                       |
|                  | amount must be shown in column (a).)                                        |               |                            |                    |                                       |
| 6                | Enter the net total of each column as indicated below:                      |               |                            |                    |                                       |
| а                | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5                           | 4 535         |                            |                    |                                       |
| b                | Prior years' undistributed income. Subtract                                 |               |                            |                    |                                       |
|                  | line 4b from line 2b                                                        |               | 0                          |                    |                                       |
| С                | Enter the amount of prior years' undistributed                              |               |                            |                    |                                       |
|                  | income for which a notice of deficiency has                                 |               |                            |                    | i                                     |
|                  | 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                          |                    |                                       |
| 0                | Undistributed income for 2013. Subtract line                                |               |                            | -                  |                                       |
|                  | 4a from line 2a. Taxable amount-see                                         |               |                            | 0                  |                                       |
|                  | instructions                                                                |               |                            |                    |                                       |
| f                | Undistributed income for 2014. Subtract lines                               |               |                            |                    |                                       |
|                  | 4d and 5 from line 1. This amount must be                                   |               |                            |                    | 0                                     |
|                  | distributed in 2015                                                         |               |                            |                    | ļ                                     |
| 7                | Amounts treated as distributions out of corpus                              |               |                            |                    |                                       |
|                  | to satisfy requirements imposed by section                                  |               |                            |                    |                                       |
|                  | 170(b)(1)(F) or 4942(g)(3) (Election may be                                 |               |                            | •                  |                                       |
| _                | required—see instructions)                                                  |               |                            |                    |                                       |
| 8                | Excess distributions carryover from 2009 not                                | 0             |                            |                    | 1                                     |
|                  | applied on line 5 or line 7 (see instructions) .                            |               |                            |                    |                                       |
| 9                | Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a | 1219          | -                          |                    |                                       |
| 10               | Analysis of line 9:                                                         |               |                            |                    | <del></del>                           |
| 10               | Excess from 2010 928                                                        |               |                            |                    |                                       |
| a                | Excess from 2010                                                            | 1             |                            |                    |                                       |
| b                | Excess from 2012                                                            | 1             |                            |                    |                                       |
| C                | Excess from 2012                                                            | 1             |                            |                    | 1                                     |
| d                | Excess from 2014                                                            | 1             |                            |                    |                                       |
| <u> </u>         | EAGGGG HOITEGTT                                                             | L             |                            | <u> </u>           | Form <b>990-PF</b> (2014)             |
|                  |                                                                             |               |                            |                    |                                       |

| Page | 1 | 0 |
|------|---|---|
|      |   |   |

| Part :     | XIV Private Operating Founda                                                                                                                                                                                                                                                                                 | tions (see instru   | ctions and Part     | VII-A, question 9      | )                   |                                       |  |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------|------------------------|---------------------|---------------------------------------|--|
| 1a         | If the foundation has received a ruling or determination letter that it is a private operating                                                                                                                                                                                                               |                     |                     |                        |                     |                                       |  |
|            | oundation, and the ruling is effective for 2014, enter the date of the ruling                                                                                                                                                                                                                                |                     |                     |                        |                     |                                       |  |
|            | Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)                                                                                                                                                                                 |                     |                     |                        |                     |                                       |  |
| <b>2</b> a | Enter the lesser of the adjusted net income from Part I or the minimum                                                                                                                                                                                                                                       | Tax year            |                     | Pnor 3 years           | , · ·               | (e) Total                             |  |
|            | investment return from Part X for                                                                                                                                                                                                                                                                            | (a) 2014            | <b>(b)</b> 2013     | (c) 2012               | (d) 2011            |                                       |  |
|            | each year listed                                                                                                                                                                                                                                                                                             |                     |                     |                        |                     |                                       |  |
| b          | 85% of line 2a                                                                                                                                                                                                                                                                                               |                     | <del></del>         |                        |                     |                                       |  |
| С          | Qualifying distributions from Part XII, line 4 for each year listed                                                                                                                                                                                                                                          |                     |                     |                        |                     |                                       |  |
|            | Amounts included in line 2c not used directly                                                                                                                                                                                                                                                                |                     | <del></del>         | <del></del>            |                     |                                       |  |
| đ          | for active conduct of exempt activities                                                                                                                                                                                                                                                                      |                     |                     |                        |                     |                                       |  |
| е          | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c                                                                                                                                                                                                |                     |                     |                        |                     |                                       |  |
| 3          | Complete 3a, b, or c for the alternative test relied upon:                                                                                                                                                                                                                                                   |                     |                     |                        |                     |                                       |  |
| а          | "Assets" alternative test-enter:                                                                                                                                                                                                                                                                             |                     | 1                   |                        |                     |                                       |  |
|            | (1) Value of all assets                                                                                                                                                                                                                                                                                      |                     |                     |                        |                     |                                       |  |
|            | (2) Value of assets qualifying under                                                                                                                                                                                                                                                                         |                     |                     |                        |                     |                                       |  |
| <b>.</b>   | section 4942(j)(3)(B)(j)                                                                                                                                                                                                                                                                                     |                     |                     | <u> </u>               |                     | <u> </u>                              |  |
| U          | 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 Information                                                                                                                                                                                                                                                                                 | on (Complete th     | is part only if the | he foundation h        | ad \$5,000 or m     | ore in assets at                      |  |
|            | any time during the year-                                                                                                                                                                                                                                                                                    | -see instruction    | ns.)                |                        |                     | <u> </u>                              |  |
| 1          | Information Regarding Foundation                                                                                                                                                                                                                                                                             |                     |                     |                        |                     |                                       |  |
| а          | List any managers of the foundation                                                                                                                                                                                                                                                                          |                     |                     |                        |                     | by the foundation                     |  |
|            | before the close of any tax year (but o                                                                                                                                                                                                                                                                      |                     |                     | an \$5,000). (See s    | $\geq far/\epsilon$ |                                       |  |
|            | Robert S.  List any managers of the foundation                                                                                                                                                                                                                                                               |                     | enet C              |                        |                     |                                       |  |
| D          | ownership of a partnership or other e                                                                                                                                                                                                                                                                        |                     |                     |                        |                     | rge portion of the                    |  |
|            | ownership of a parallelating of ourier of                                                                                                                                                                                                                                                                    | nacy, or winder and | Tourisda.o. Has a   | . o / o o o groutor mi | <b></b>             |                                       |  |
| 2          | Information Regarding Contribution                                                                                                                                                                                                                                                                           |                     |                     |                        |                     |                                       |  |
|            | Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. |                     |                     |                        |                     |                                       |  |
| а          |                                                                                                                                                                                                                                                                                                              |                     |                     |                        |                     |                                       |  |
| b          | The form in which applications should                                                                                                                                                                                                                                                                        | d be submitted and  | d information and   | materials they sho     | ould include:       | · · · · · · · · · · · · · · · · · · · |  |
| С          | Any submission deadlines:                                                                                                                                                                                                                                                                                    |                     |                     |                        |                     |                                       |  |
| А          | Any restrictions or limitations on av                                                                                                                                                                                                                                                                        | vards, such as b    | v geographical ar   | reas, charitable fi    | elds, kinds of ins  | titutions, or other                   |  |
| -          | factors:                                                                                                                                                                                                                                                                                                     |                     | , ggapaa. aa        |                        | ,                   |                                       |  |

Part XV Supplementary Information (continued)

| 3 | Grants and Contributions Paid During to                            | he Year or Approve                                      | ed for Fut           | ure Payment                      |        |
|---|--------------------------------------------------------------------|---------------------------------------------------------|----------------------|----------------------------------|--------|
|   | Recipient                                                          | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
|   | Name and address (home or business)                                | any foundation manager<br>or substantial contributor    | recipient            | Contribution                     |        |
| a | Name and address (home or business)  Paid during the year  See Att |                                                         |                      | che dule                         |        |
|   | Total                                                              |                                                         |                      | ▶ 3a                             |        |
| b |                                                                    |                                                         |                      |                                  |        |
|   | Total                                                              |                                                         |                      | <b>3</b> h                       |        |

| Pal      | t XVI        | -A Analysis of Income-Producing Ac                                                      | TUVITIES                                          |                                                    |                                                  |                                                   |                                        |
|----------|--------------|-----------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------|--------------------------------------------------|---------------------------------------------------|----------------------------------------|
| Ente     | r gross      | s amounts unless otherwise indicated.                                                   | Unrelated bu                                      | usiness income (b)                                 | Excluded by sect                                 | on 512, 513, or 514<br>(d)                        | (e)<br>Related or exempt               |
|          |              |                                                                                         | Business code                                     | Amount                                             | Exclusion code                                   | Amount                                            | function income<br>(See instructions.) |
| 1        | Progr        | ram service revenue:                                                                    |                                                   |                                                    |                                                  |                                                   | <u>`</u>                               |
|          | a _          |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          | b            |                                                                                         |                                                   |                                                    | 10                                               | 1 0                                               |                                        |
|          | ິ –          |                                                                                         | /\ <i>/</i>                                       | -T                                                 | H                                                | 10                                                | alste                                  |
|          | <u> </u>     |                                                                                         |                                                   |                                                    | <del>                                     </del> |                                                   | 1001c                                  |
|          | ř –          |                                                                                         | · · · · · · · · · · · · · · · · · · ·             | <del> </del>                                       | <del>                                     </del> | 7                                                 |                                        |
|          | , E          | ees and contracts from government agencies                                              | <del></del>                                       |                                                    | <del>                                     </del> |                                                   |                                        |
| 2        |              | bership dues and assessments                                                            |                                                   |                                                    |                                                  |                                                   |                                        |
| 3        |              | est on savings and temporary cash investments                                           |                                                   |                                                    | <del> </del>                                     |                                                   |                                        |
| 4        |              | ends and interest from securities                                                       |                                                   | · · · · · · · · · · · · · · · · · · ·              |                                                  |                                                   |                                        |
| 5        |              | ental income or (loss) from real estate:                                                |                                                   |                                                    |                                                  |                                                   |                                        |
| _        |              | ebt-financed property                                                                   | -                                                 |                                                    |                                                  |                                                   |                                        |
|          |              | ot debt-financed property                                                               |                                                   |                                                    |                                                  |                                                   |                                        |
| 6        | Net r        | ental income or (loss) from personal property                                           |                                                   |                                                    |                                                  |                                                   |                                        |
| 7        |              | r investment income                                                                     |                                                   |                                                    |                                                  |                                                   |                                        |
| 8        | Gain         | or (loss) from sales of assets other than inventory                                     | ļ                                                 | <u> </u>                                           |                                                  |                                                   |                                        |
| 9        |              | ncome or (loss) from special events                                                     |                                                   |                                                    |                                                  |                                                   |                                        |
| 10       | Gros         | s profit or (loss) from sales of inventory                                              |                                                   | ļ                                                  | ļ                                                | ļ                                                 |                                        |
| 11       | _            | r revenue: a                                                                            |                                                   |                                                    | 1                                                |                                                   |                                        |
|          | ь_           |                                                                                         |                                                   |                                                    | <del> </del>                                     |                                                   |                                        |
|          |              |                                                                                         |                                                   | <del> </del>                                       | <del>                                     </del> |                                                   | <del></del>                            |
|          | d _          |                                                                                         |                                                   | <del> </del>                                       |                                                  |                                                   |                                        |
| 10       | e<br>Subt    | otal Add columns (b) (d) and (e)                                                        |                                                   |                                                    |                                                  | <del> </del>                                      | <del> </del>                           |
| 12       | Tota         | otal. Add columns (b), (d), and (e)                                                     | <u> </u>                                          | L                                                  | <u> </u>                                         | . 13                                              | <del></del>                            |
|          |              | sheet in line 13 instructions to verify calculation                                     |                                                   |                                                    |                                                  |                                                   | <del></del>                            |
| <u> </u> | rt XVI       |                                                                                         |                                                   | ent of Exemp                                       | t Purposes                                       |                                                   |                                        |
| Lin      | e No.        | Explain below how each activity for which accomplishment of the foundation's exempt pur | income is rep                                     | orted in column                                    | (e) of Part XV                                   | I-A contributed i                                 | mportantly to the                      |
|          | ▼            | accomplishment of the foundation's exempt pur                                           | poses (other tha                                  | in by providing fur                                | nas for such purp                                | oses). (See instru                                | <del></del>                            |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              | <u> </u>                                                                                | ·/\                                               |                                                    |                                                  | 1                                                 |                                        |
|          |              | 1/57                                                                                    | <del>-                                     </del> | $\sim 1$                                           | 10                                               | ( e >                                             |                                        |
|          | <del> </del> | 1 10                                                                                    | 1163                                              | <del>(L)                                    </del> | _00                                              |                                                   |                                        |
|          |              |                                                                                         |                                                   | <del></del>                                        |                                                  |                                                   |                                        |
|          |              |                                                                                         | ~                                                 |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         | · · · · · · · · · · · · · · · · · · ·             |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         |                                                   |                                                    |                                                  | · <del>····································</del> | <del></del>                            |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         | <del></del>                                       |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         |                                                   |                                                    | <del></del>                                      |                                                   | <del> </del>                           |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              | <del></del>                                                                             | <del></del>                                       |                                                    |                                                  |                                                   |                                        |
|          |              |                                                                                         | <del>_</del>                                      |                                                    | <del></del>                                      | ····                                              |                                        |
|          |              |                                                                                         |                                                   |                                                    |                                                  |                                                   |                                        |
|          |              | <del></del>                                                                             |                                                   | <del> </del>                                       |                                                  |                                                   |                                        |

| Part     | XVII                                                       | Information<br>Exempt On                                                                                                                                                                                                                                                                |               |             | sfers To and 1      | Fransactio      | ons and f    | Relationshi        | ips W        | ith N   | lonch                 | aritab   | e         | <u> </u> |
|----------|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------|---------------------|-----------------|--------------|--------------------|--------------|---------|-----------------------|----------|-----------|----------|
| 1        | ın sec                                                     | e organization d<br>tion 501(c) of the<br>izations?                                                                                                                                                                                                                                     | irectly or in | directly e  |                     |                 |              |                    |              |         |                       |          | Yes       | No       |
| а        |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
| a        | (1) Cash                                                   |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            | her assets .                                                                                                                                                                                                                                                                            |               |             |                     |                 |              |                    |              |         | • •                   | 1a(2)    | <b></b> - | 1        |
| h        | <b>b</b> Other transactions:                               |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              | 10(-)              | <del> </del> |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              | 1b(1)              | <b></b> -    | 1       |                       |          |           |          |
|          | (1) Sales of assets to a noncharitable exempt organization |                                                                                                                                                                                                                                                                                         |               |             |                     | • •             | 1b(2)        |                    | V            |         |                       |          |           |          |
|          | , , ,                                                      |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              | 1b(3)              |              | V       |                       |          |           |          |
|          | • •                                                        | eimbursement ar                                                                                                                                                                                                                                                                         |               | -           |                     |                 |              |                    | • •          | • •     | • •                   | 1b(4)    |           |          |
|          | • •                                                        | ans or loan gua                                                                                                                                                                                                                                                                         | -             |             |                     |                 |              |                    | • •          | • •     | •                     | 1b(5)    |           | V        |
|          |                                                            | erformance of se                                                                                                                                                                                                                                                                        |               |             |                     |                 |              |                    | •            | • •     |                       | 1b(6)    |           | 1        |
| С        |                                                            | ng of facilities, ed                                                                                                                                                                                                                                                                    |               |             |                     |                 |              |                    |              | •       | • •                   | 1c       |           | V        |
|          |                                                            | answer to any                                                                                                                                                                                                                                                                           |               |             |                     |                 |              |                    |              |         |                       |          | fair m    | arket    |
| •        |                                                            | of the goods, of                                                                                                                                                                                                                                                                        |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            | in any transaction                                                                                                                                                                                                                                                                      |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
| (a) Line | no (l                                                      | ) Amount involved                                                                                                                                                                                                                                                                       | (c) Nam       | e of noncha | antable exempt orga | nızation        | (d) Descr    | ription of transfe | rs, trans    | saction | s, and sh             | anng arr | angem     | ents     |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 | <del> </del> |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 | 1            |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         | <del></del>   |             |                     |                 | 1            |                    |              | -       |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 | 1            |                    |              |         |                       |          |           |          |
| <u> </u> |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               | ·           |                     |                 |              | <del></del>        |              |         | _                     |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              | •                  |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     | •               |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 | 1            |                    |              |         |                       |          |           |          |
|          |                                                            | -                                                                                                                                                                                                                                                                                       |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
| 2a<br>b  | descr                                                      | foundation direction 5<br>fibed in section 5<br>s," complete the                                                                                                                                                                                                                        | 501(c) of the | Code (of    | ther than section   |                 |              |                    |              |         |                       | ☐ Yes    | s 19      | No       |
|          |                                                            | (a) Name of organ                                                                                                                                                                                                                                                                       |               |             |                     | of organization | 1            |                    | (c) Des      | cnptio  | n of relati           | onship   |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            | ·                                                                                                                                                                                                                                                                                       |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            |                                                                                                                                                                                                                                                                                         |               |             |                     |                 |              |                    |              |         |                       |          |           |          |
|          |                                                            | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kn correct, and complete. Declaration of prepares (other than taxpayer) is based on all information of which preparer has any knowledge. |               |             |                     | my knowl        | edge and     | belief, r          | t is true,   |         |                       |          |           |          |
| Sign     |                                                            |                                                                                                                                                                                                                                                                                         |               |             | May the             |                 |              | IRS disci          |              |         |                       |          |           |          |
| Here     |                                                            |                                                                                                                                                                                                                                                                                         |               | Kue 11/16   | <u>0) 15</u>        | 115 Presiden    |              |                    |              |         | preparer<br>uctions)? |          |           |          |
|          | Signature of officer or trustee Date Title                 |                                                                                                                                                                                                                                                                                         |               |             | ,555 2.30           |                 |              |                    |              |         |                       |          |           |          |
| Paid     |                                                            | Print/Type preparer                                                                                                                                                                                                                                                                     | 's name       |             | Preparer's signatu  | re              |              | Date               |              | Chec    | ⟨∏ ıf                 | PTIN     |           |          |
| Prep     | arer                                                       |                                                                                                                                                                                                                                                                                         |               |             | <u> </u>            |                 |              |                    |              |         | mployed               |          |           |          |
| Use      |                                                            | Firm's name ▶                                                                                                                                                                                                                                                                           |               |             |                     |                 |              |                    | Firm's       | EIN Þ   | <u> </u>              |          |           |          |
|          | Jy                                                         | Firm's address ▶                                                                                                                                                                                                                                                                        |               |             |                     |                 |              |                    | Phone        | no.     |                       |          |           |          |

# The Macfarlane Foundation EIN 94-1701568 Contributions FYE 9/30/2015

| Desert Foothills Library Cave Creek, AZ                          | 100    |
|------------------------------------------------------------------|--------|
| Princeton Theological Seminary Princeton, NJ                     | 100    |
| Washington State Parks Foundation<br>Olympia, WA                 | 350    |
| University of Washington School of Law<br>Seattle, WA            | 14,000 |
| University of Washington Henry Gallery<br>Seattle, WA            | 1,800  |
| Princeton University Princeton, NJ                               | 100    |
| Pinnacle Presbyterian Church<br>Scottsdale, AZ                   | 500    |
| Presbytery of the Pacific<br>Los Angeles, CA                     | 50     |
| Wolf Hollow Center<br>Friday Harbor, WA                          | 200    |
| University of Washington Friday Harbor Labs<br>Friday Harbor, WA | 11,000 |
| NAVOS<br>Seattle, WA                                             | 700    |
| Orcas Island Library Eastsound, WA                               | 500    |
| ·                                                                | 29,400 |

The Macfarlane Foundation EIN 94-1701568 FYE 9/30/2015

Part One, line 1 (Gifts)

\$4,000 cash gift from Robert & Janet Macfarlane 105 Merrymac Lane Olga, WA 98279

Part One, line 18 (Taxes)

328.00 to U. S. Treasury Investment Income Excise Tax

10.00 California Franchise Tax Board

25.00 Californina Registry of Charitable Trusts Attorney Generals Office

363.00 Total

# The Macfarlane Foundation EIN 94-1701568 FYE 9/30/2015

Schedule: Part II ( line 10b )

| Shares    | Company                       | Book Value         | Market Value |
|-----------|-------------------------------|--------------------|--------------|
| 108       | Phillips 66                   | 3,677              | 8,299        |
| 200       | Berkshire Hathaway B          | 5,229              | 26,080       |
| 200       | Avery Dennison                | 4,583              | 11,314       |
| 400       | Banner Bank                   | 17,067             | 19,108       |
| 216       | Conoco Phillips               | 6,201              | 10,359       |
| 252.619   | Vanguard Explorer Fund        | 17,166             | 21,763       |
| 369.223   | Vanguard 500 Index Fund       | 37,046             | 65,404       |
| 1,403.941 | Vanguard Morgan Growth Fund   | 22,598             | 35,506       |
| 859.165   | Vanguard Winsor II Fund       | 25,151             | 29,383       |
| 5,512.069 | Wasatch Small Cap Value Fund  | 15,287             | 32,301       |
| 2,464.054 | Wasatch World Innovators      | 18,589             | 49,700       |
| 1,446.147 | Wasatch Ultra Growth Fund     | 18,870             | 26,117       |
| 2,628.562 | Wasatch Small Cap Growth Fund | Growth Fund 47,740 |              |
| 1,719.396 | Wasatch Core Growth Fund      | 38,835             | 99,433       |
|           | Total                         | 278,039            | 555,602      |

Schedule: Part II line (13)

| Shares   | Company            | Book Value | Market Value |  |
|----------|--------------------|------------|--------------|--|
| 1726.836 | Fidelty Ginnie Mae | 19,099     | 20,014       |  |