

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



Form 990-PF

Return of Private Foundation

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

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

F	or ca	alendar year 2015 or tax year beginning		, 2015,	and ending	3		, 20
_	Name	of foundation				A Emplo	yer identifi	cation number
	THE	PATTERSON FOUNDATION				20-	755008	1
-	Numb	er and street (or P O box number if mail is not delivered	to street address)		Room/suite	B Telep	hone numbe	er (see instructions)
		110 DECUMENT Y DAY DO DON 700		ì			,	
_		10 DICKEY LANE, PO BOX 790	And and a			(
	City o	r town, state or province, country, and ZIP or foreign pos	tai code			C If even	nption applica	tion is
	CAF	PTIVA, FL 33924				pendin	g, check here	
7		eck all that apply initial return	Initial return	of a former p	ublic charity	/ n		
•		Final return	Amended ref	•		1	•	ions, check here P
		Address change	Name change			85%	test, check h	ere and attach
_ F	Che	eck type of organization X Section 501(— com	putation .	▶ ∟
·		Section 4947(a)(1) nonexempt charitable trust	Other taxable pr		ion			status was terminated
لے ا		r market value of all assets at JAcco				1)(1)(A), check here
•		F====	ther (specify)			1		in a 60-month termination
		, , , , , , , , , , , , , , , , , , ,	olumn (d) must be on cas	th basis)		-		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•		Analysis of Revenue and Expenses (The	, ,	,	T			(d) Disbursements
-	u., .	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inve	ľ	(c) Adjuste		for charitable
		may not necessarily equal the amounts in column (a) (see instructions))	books	incom	е	incom	ie	purposes (cash basis only)
-	1	Contributions, gifts, grants, etc , received (attach schedule)	13,319,405.					(oddir basis siny)
	2	Check if the foundation is not required to						
	1	attach Sch B	125.		125.			ATCH 1
	3	Interest on savings and temporary cash investments. Dividends and interest from securities						
	4				-			
	5a	Gross rents						
a	b	· · · · · · · · · · · · · · · · · · ·	1,021,413.				REI	CIVE
Revenue	b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1,021,413.				1 1	W W / U	ENLO
2		Capital gain net income (from Part IV, line 2)		1,02	1,413.	8		
S.	7					1861	MAY	18 2016
	8	Net short-term capital gain				1 4	-	2010
	10 a	Gross sales less returns					OGN	EALISTE
	in in	and allowances				-	1	110, 91
	ء							
40	11	Other income (attach schedule)						
SC -	12	Total. Add lines 1 through 11	14,340,943.	1,02	1,538.			
<u>≽</u> ⁻	13	Compensation of officers, directors, trustees, etc	0.					
25)	Other employee salaries and wages						
MED	15	Pension plans, employee benefits						
	16 a	Legal fees (attach schedule)						
XA!W	ь		4,567.		2,284.	_		2,283
₹ ₹	c	Other professional fees (attach schedule)						
ಲು ಕ	17	Interest						
	14 15 16 a b c 17 18 19	Taxes (attach schedule) (see instructions)[3].	11,053.					
رة خ	19	Depreciation (attach schedule) and depletion.						
9102 dmir	20	Occupancy						
₹	21	Travel, conferences, and meetings						
Ĭ.	21 22 23 24 25	Printing and publications						
<u> </u>	23	Other expenses (attach schedule)						
i i	24	Total operating and administrative expenses.						
er.		Add lines 13 through 23	15,620.		2,284.			2,283
å	25	Contributions, gifts, grants paid	499,477.					499,477
_	26	Total expenses and disbursements Add lines 24 and 25	515,097.		2,284.		0.	501,760
_	27	Subtract line 26 from line 12						
	а	Excess of revenue over expenses and disbursements	13,825,846.					
	ь	Net investment income (If negative, enter -0-)		1,01	9,254.			
	C	Adjusted net income (if negative, enter -0-)			_1_			

Form 990-PF (2015)

		Attached schedules and amounts in the	T	Beginning of year		End o	f year
نا	art li	Balance Sheets description column should be for end-of-y amounts only (See instructions)	year	(a) Book Value	(b) Book Value	$\overline{}$	(c) Fair Market Value
	1	Cash - non-interest-bearing		524,023.	1,030,	465.	1,030,465
	1	Savings and temporary cash investments					
		Accounts receivable >					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
		Less allowance for doubtful accounts ▶					
	5	Grants receivable	[-				
	6	Receivables due from officers, directors, trustees, and other					
	1	disqualified persons (attach schedule) (see instructions)	- 1			}	
	7	Other notes and loans receivable (attach schedule)					
	-	Less allowance for doubtful accounts		•			
ম	8	Inventories for sale or use					
ssets	9	Prepaid expenses and deferred charges	- 1			\neg	
As	-	Investments - U S and state government obligations (attach schedule),					
		Investments - corporate stock (attach schedule) ATCH 4		4,372,425.	17,301,	907.	20,077,526
		Investments - corporate bonds (attach schedule)				-	
	11	Investments - land, buildings.					
		and equipment basis Less accumulated depreciation				-	
	4.2	(attach schedule) Investments - mortgage loans	-				
	12 13	Investments - other (attach schedule)					
	14	Land, buildings, and	∵ -				
		equipment basis Less accumulated depreciation (attach schedule)					
	15	(attach schedule) Other assets (describe ▶	\neg				
	16	Total assets (to be completed by all filers - see t			·		
	'	Instructions Also, see page 1, item I)		4,896,448.	18,332,3	372.	21,107,991.
_	17	Accounts payable and accrued expenses					
	18	Grants payable					
S	19	Deferred revenue	1				
tie							
薑	20 21	Loans from officers, directors, trustees, and other disqualified persons. Mortgages and other notes payable (attach schedule)					
Liabilities	22	Other liabilities (describe >			· · · · · · · · · · · · · · · · · · ·		
	22	Other habilities (describe	-′⊢		· · · · · · · · · · · · · · · · · · ·		
	23	Total liabilities (add lines 17 through 22)		o.l		0.	
_		Foundations that follow SFAS 117, check here.					
ces		and complete lines 24 through 26 and lines 30 and					
ၓ		Unrestricted					
<u>=</u>	24	Temporarily restricted			 -		
B	25	Permanently restricted	· ·			$\neg \neg$	
5	20	· · · · · · · · · · · · · · · · · · ·	$\dot{\overline{\mathbf{x}}}$				
교	24 25 26 27 28 29 30 31	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.					
ō		•					
ß	27	Capital stock, trust principal, or current funds					
Se	20	Paid-in or capital surplus, or land, bldg, and equipment fund		4,896,448.	18,332,3	372	
Ą	20	Retained earnings, accumulated income, endowment, or other funds. Total net assets or fund balances (see instructions)		4,896,448.	18,332,		
ē	21	Total liabilities and net assets/fund balances (s		1,030,2101	20,002,		
Z	31	Instructions)		4,896,448.	18,332,	372	
F	art II	Analysis of Changes in Net Assets or Fund B			10/332/	<u> </u>	
		al net assets or fund balances at beginning of year - P			nuct sares with		
7							4,896,448
•		-of-year figure reported on prior year's return) er amount from Part I, line 27a				2	13,825,846
						3	13,023,040.
		er increases not included in line 2 (itemize)				4	18,722,294.
		lines 1, 2, and 3	5				389,922
		al net assets or fund balances at end of year (line 4 mi		ne 5) - Part II, column /	a) line 30	5 6	18,332,372
0	1016	ai net assets or iunu palances at enu ur year (iiile 4 mi	mua III	no oj - marcii, columin (t	J, III ID JU	. 0	10,006,012

P	art IV Capital Gains	and Losses for Tax on Inv	estment Income	······································			
	• •	d describe the kind(s) of property sold ((b) How acquired	(c) Date	(d) Date sold	
	2-story b	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)			
1a	SEE PART IV SCHE						
b							
d							
е							
	(e) Gross sales price	(h) Gain or (loss) (e) plus (f) minus (g)					
_				<u> </u>		- (3/	
<u>a</u> b				<u> </u>			
				 			
_ <u>c</u>				 -			
							
<u>e</u>		showing gain in column (h) and owne	d by the foundation on 12/31/69				
	Complete only for assets		T	(I)	Gains (Col (h) g	ain minus	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any	COI	(k), but not less t Losses (from co		
		20 01 12/01/00	Over col. (j), ii driy			- (//	
_ <u>a</u>							
<u>b</u>							
<u>c</u>							
d							
<u>e</u>			<u> </u>	 			
2	Capital gain net income o		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	1,	021,413.	
3	Net short-term capital ga	in or (loss) as defined in sections	1222(5) and (6)				
	If gain, also enter in Pa	art I, line 8, column (c) (see inst	tructions). If (loss), enter -0- in $igl l$				
	Part I, line 8	<u> </u>		3		0.	
Pa			duced Tax on Net Investment I	ncome		··	
Wa		·	outable amount of any year in the b Do not complete this part	ase perioc	ls	Yes X No	
1			r, see the instructions before making	any entr	201		
·	(a) Base penod years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	(d) Distribution ratio			
_Ca	alendar year (or tax year beginning in)	424,191.	8,127,205.	-	(col (b) divided by		
	2014	419,632.	6,235,133.			0.052194	
_	2013	146,200.				0.067301	
	2012	375,471.	5,558,443. 4,755,126.			0.026302	
	2011	88,275.				0.078961	
	2010	66,275.	2,739,797.			0.032220	
_						0.0000	
2				2		0.256978	
3		for the 5-year base period - divide					
	number of years the foun	dation has been in existence if les	s than 5 years	3		0.051396	
4	Enter the net value of nor	ncharitable-use assets for 2015 fro	om Part X, line 5	4	17,	792,248.	
5	Multiply line 4 by line 3.			5		914,450.	
	•		!				
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		10,193.	
		(12 2 1 2 1 3 1 4 1 1 2 1 2 1 2 1 4 1 1 1 1 1 1 1 1 1					
7	Add lines 5 and 6			7		924,643.	
							
8	Enter qualifying distribution of the street	ons from Part XII, line 4 eater than line 7, check the box	in Part VI, line 1b, and complete t	8 hat part u		501,760.	
	Part VI instructions	,		P-411 1	g u 170 ta/		

Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ctions	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	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		20,3	385.
	here ▶ and enter 1% of Part I, line 27b			
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-) 2			
3	Add lines 1 and 2		20,3	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		20,3	385.
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 7,812.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		/, 8	312.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		12,5	72
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		12,3	73.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Por	Enter the amount of line 10 to be Credited to 2016 estimated tax ► Refunded ► 11 t VII-A Statements Regarding Activities			
	· · · · · · · · · · · · · · · · · · ·		V	
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No X
L	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	10		
D	Instructions for the definition)?	16		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	15		
	published or distributed by the foundation in connection with the activities	1		
c	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
•	(1) On the foundation ►\$(2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$	1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 _		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	- A / /	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b_	_IV /	<u>#</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X_
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		х	
_	conflict with the state law remain in the governing instrument?	6	X	·
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) MO,	 		
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
U	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or	 		
•	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"		}	
	complete Part XIV	9	l	х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х

Pai	t 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		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ JEANNE PATTERSON Telephone no. ▶	-		
	Located at ▶ 11410 DICKEY LANE, PO BOX 790 CAPTIVA, FL ZIP+4 ▶ 33924	_		
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			
16	At any time during calendar year 2015, 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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country ▶			i
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X 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?			
	(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			10
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	LN	11
	Organizations relying on a current notice regarding disaster assistance check here		,	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<u> </u>			
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 2015 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	٠.	M	100
_	foundation had excess business holdings in 2015)	_3b	11	ιÛ
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	41-		v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	LJ	<u> X</u>

Form 990-PF (2015)

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

THE PATTERSON FOUNDATION

orm 990-PF (2015)		Page
Part VIII Information About Officers, Directors, Trustees, Founda and Contractors (continued)	tion Managers, Highly Paid Empl	oyees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NO	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
NONE		_
		
otal number of others receiving over \$50,000 for professional services	<u></u>	·
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevan organizations and other beneficianes served, conferences convened, research papers produced, e		Expenses
1 N/A		
2		
3		
4		
art IX-B Summary of Program-Related Investments (see instruct		
art IX-B Summary of Program-Related Investments (see Instruct Describe the two largest program-related investments made by the foundation during the tax year		Amount
1 NONE		_
,		
		•
All other program-related investments See instructions NONE		
3 110112		·
otal. Add lines 1 through 3	<u> </u>	•

Form 990-PF (2015)

Part	rt X Minimum Investment Return (All domestic foundations must complete the see instructions)	nis part. Foreign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out cha	aritable, etc,	
	purposes		
а	Average monthly fair market value of securities	1a	16,826,694.
b	Average of monthly cash balances	1b	1,236,502.
С		1c	
d	d Total (add lines 1a, b, and c)	1d	18,063,196.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater	3	18,063,196.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater	amount, see	
	instructions)	<u>.</u> 4	270,948.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on	Part V, line 4 5	17,792,248.
6	Minimum investment return. Enter 5% of line 5		889,612.
Part	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private and certain foreign organizations check here ▶ and do not complete this pa		
1	Minimum investment return from Part X, line 6	1	889,612.
2 a		20,385.	
b			
C		2c	20,385.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	869,227.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		869,227.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and		
	line 1		869,227.
Part	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	es	
a		l l	501,760.
b			
2	Amounts paid to acquire assets used (or held for use) directly in carrying out cha	aritable etc	· ·
_	purposes	l l	
3	Amounts set aside for specific charitable projects that satisfy the	· · · · · · · · · · · · · · · · · · ·	
-	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and P	art XIII, line 4 4	501,760.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.	·	331,730.
•	Enter 1% of Part I, line 27b (see instructions)		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	501,760.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent y	ears when calculating w	
	qualifies for the section 4940(e) reduction of tax in those years	care which calculating v	mether the foundation

Form 990-PF (2015)

Pa	rt XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				869,227.
2	Undistributed income, if any, as of the end of 2015		į		
а	Enter amount for 2014 only				
ь	Total for pnor years 20 13 ,20 12 ,20 11				
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
c	From 2012				
d	From 2012				
е	From 2014				
f	Total of lines 3a through e	53,299.			
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 501,760.				
а	Applied to 2014, but not more than line 2a				
ь	Applied to undistributed income of prior years				
	(Election required - see instructions)				<u></u>
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2015 distributable amount,				501,760.
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015.	53,299.		- 	53,299.
	(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			. 	
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				<u></u>
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2015 Subtract lines		\$		
	4d and 5 from line 1 This amount must be				214 160
	distributed in 2016				314,168.
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 2010 not				
	applied on line 5 or line 7 (see instructions)	-			
9	Excess distributions carryover to 2016.	0.			
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9 Excess from 2011				
	5 f 0040				
	Excess from 2012		j		
	Excess from 2014				
	Excess from 2015				
					Form 990-PF (2015)

-	990-PF (2015)		ERSON FOUNDATION				550081	Page 10
_			(see instructions ar				NOT API	PLICABLE
1 a	If the foundation has	_		•	٠ ا			
	foundation, and the ruling	•	-		<u> </u>			
b	Check box to indicate v		is a private operating f		section	4942(J)(3) or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) To	otal
	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 20	12		
	for the minimum investment return from Part X for each year listed				ļ			
b	85% of line 2a							
	Qualifying distributions from Part XII, line 4 for each year listed							
d	Amounts included in line 2c not used directly for active conduct							
е	of exempt activities							
	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) Value of all assets							
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test-							
	enter 2/3 of minimum invest- ment 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,				1			
	payments on secunties 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 sup- port from an exempt							
	organization	-						
Pa	rt XV Supplemen	ntary Information (Curing the year - see	Complete this part	only if the founda	tion had \$	5,000 or r	nore in a	ssets at
4	Information Regarding	<u></u>			·			
' a	List any managers of			than 2% of the total	al contribution	ons received	d by the f	oundation
	before the close of any	tax year (but only if th	ey have contributed m	ore than \$5,000) (Se	ee section 50)7(d)(2))	•	
	NEAL PATTER		own 10% or more of	the stock of a corn	oration (or	an equally !	arge nort	on of the
Ü	ownership of a partner					an equany i	arge port	on or the
	N/A							
2	Information Regarding	-		• •				
	Check here ► X if the unsolicited requests for	or funds If the found	ation makes gifts, gra	to preselected char nts, etc (see instruct	itable organ tions) to ind	izations and ividuals or	d does n organizatii	ot accept ons under
	other conditions, comp				aliantiana ali	مطامان		
	The name, address, ar	, 					essed	
b	The form in which appl	lications should be sub	omitted and informatio	n and materials they	should include	le		

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.

c Any submission deadlines

. Form 990-PF (2015)

Page **11**

Part XV Supplementary Information 3 Grants and Contributions Paid Dur	(continued)	roved for F	Future Payment	Tage
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Purpose of ampt or	
Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	 		
- ,				
ATCH 7				
				•
			•	
				100 45
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·		▶ 3a	499,47
b Approved for future payment				
]		
•				
•				
Total	<u></u> .		▶ 3b	NONE

JSA 5E1491 1 000 Form 990-PF (2015)

r gross amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
I			1		(See mandenons)
·					
,					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments •					
Dividends and interest from securities			14	125.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal property					
Other investment income				1 001 412	
Sain or (loss) from sales of assets other than inventory			18	1,021,413.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a					
				1 021 538	
Subtotal Add columns (b), (d), and (e)				1,021,538.	1 021 5
Subtotal Add columns (b), (d), and (e)					1,021,5
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculated the color of the c	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce t XVI-B Relationship of Activitie e No. Explain below how each activit	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	ted importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce t XVI-B Relationship of Activities Replain below how each activity	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	ted importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce t XVI-B Relationship of Activities Replain below how each activity	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	ted importantly to
ubtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	ted importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce t XVI-B Relationship of Activitie	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculated the columns of activities. Relationship of Activities e No. Explain below how each activity	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculated the columns of activities. Relationship of Activities e No. Explain below how each activity	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculated the columns of activities. Relationship of Activities e No. Explain below how each activity	ulations) s to the A	ccomplishment of	Exempt Purpo	oses of Part XVI-A contribut	ted importantly t

JSA 5E1492 1 000 Form **990-PF** (2015)

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Orga	nizations							
		=	-	engage in any of the fo	-	-			Yes	No
		cion 501(c) of the Co zations?	oue (other than	section 501(c)(3) organ	uzauons) or in section 527,	relating to political			
	-		na foundation t	o a noncharitable exempt	t organi	ration of				
		•	-	•	_			12(1)		х
										X
		transactions					• • • • • • • • • • •	1a(2)	\vdash	<u> </u>
			ncharitable exe	empt organization				16/1		х
ì	2) Pu	rchases of assets fro	om a noncharit	able exempt organization.		· · · · · · · · · · · · · · · · · · ·		1b(2)		X
				r assets						Х
ì	4) Re	imbursement arrang	ements					1b(4)		Х
										X
(6) Pe	rformance of service	es or members	hip or fundraising solicitat	ions			1b(6)		Х
				sts, other assets, or paid e						Х
				es," complete the follow					fair m	arket
		- · · · · · · · · · · · · · · · · · · ·		nces given by the report	_					
	/alue i	n any transaction of	r sharing arran	gement, show in column	n (d) the	e value of the good	s, other assets, or s	ervice	s rece	eived
(a) Lin	e no	(b) Amount involved	(c) Name of	noncharitable exempt organizati	on		sfers, transactions, and sha	nng arra	ıngeme	nts
		N/A				N/A				
	-			·						
	-+		-							
	-+		 		-					
			1							
					+					
										
		 								
				· · · · · · · · · · · · · · · · · · ·						
	Ì									
2a	s the	foundation directly	or indirectly a	ffiliated with, or related	to, one	or more tax-exemp	ot organizations		-	
c	describ	ped in section 501(c)	of the Code (d	other than section 501(c)((3)) or ir	n section 527?	[Y/	es X	No
b_!	f "Yes	" complete the follo	wing schedule							
		(a) Name of organization	n	(b) Type of organiz	ation		(c) Description of relations	hip		
										
										
	Under	penalties of penuou I decis	ara that I have avam	ined this return, including accompa	anyona raha	edules and statements and	to the best of my knowledge		a aliant is	
	correc	t, and complete Deglaration of	f p epare (other than	taxpayer) is based on all information of	of which pro	reparer has any knowledge	to the best of thy knowledg	e and p	Jener, II	is true,
Sign		VIII AT	out I -	- 12 MA	<i>11.</i> N		May the IRS			retum
Here	Sign	nature of officer or trustee	1 1	Date	<u>/ u </u>	Title		eparer		below
	Jigi	rature of officer of trustee		, Date /	ļ	Title	(see instruction	5)" [^	Yes	No
	<u> </u>	Print/Type preparer's na	me	Rreparer's signature	////	Date /	Charle I I	PTIN		
Paid		STEPHANIE M K		CATIONAVIA	MIV	WW Jolinh		P013	3655	51
Prepa	arer		W & ASSOCI	IATES, LLC	iri M	44 1/10/1	Firm's EIN ► 57-1			
Use (DD SUITE 100			TOWNS EIN POLITY			
`		1	ERLAND PAR			66202	Phone no 913-45	99-4	920	
				· · · · · · · · · · · · · · · · · · ·	-,. · · -			m 990		(2015)

JSA

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization		Employer identification number
THE PATTERSON FOUN	DATION	20-7550001
Organization type (check of	ne)	20-7550081
3	··-•	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)(³) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a p	private foundation
527 political organization		
Form 990-PF	Form 990-PF X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	te foundation
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Ru	ile and a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, y or property) from any one contributor. Complete Parts I and II. See contributions	
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Fand that received from any one contributor, during the year, total con of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ,	Form 990 or 990-EZ), Part II, line at the stributions of the greater of (1)
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990- g the year, total contributions of more than \$1,000 <i>exclusively</i> for reli- ional purposes, or for the prevention of cruelty to children or animals	igious, charitable, scientific,
contributor, during contributions total during the year for General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-g the year, contributions exclusively for religious, charitable, etc., purpled more than \$1,000. If this box is checked, enter here the total contrained an exclusively religious, charitable, etc., purpose. Do not complete a lies to this organization because it received nonexclusively religious, commore during the year.	poses, but no such ntributions that were received any of the parts unless the charitable, etc , contributions
Caution. An organization th	at is not covered by the General Rule and/or the Special Rules does ust answer "No" on Part IV, line 2, of its Form 990, or check the box	not file Schedule B (Form 990, x on line H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization	THE	PATTERS	SON	FOUNDATION	
----------------------	-----	---------	-----	------------	--

Employer identification number 20-7550081

Part l	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	NEAL PATTERSON 11410 DICKEY LANE, PO BOX 790 CAPTIVA, FL 33924	\$\$ 13,319,405.	Person X Payroll X Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		 	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

Name of organization THE PATTERSON FOUNDATION

Employer identification number 20-7550081

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is nee	ded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	190690 SHS CERNER CORP		
		\$\$.	VAR
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see Instructions)	(d) Date received
		\$	

Name of organization THE PATTERSON FOUNDATION

Employer identification number 20-7550081

the con		ons completing Part III, ente e year (Enter this informatio	atributor. Complete columns (a) through (e) are the total of exclusively religious, charitable, et on once. See instructions) ► \$
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
—			

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME 125. EXPENSES PER BOOKS REVENUE AND CREDIT SUISSE DESCRIPTION

125.

125.

ATTACHMENT 1 PAGE 21

20-7550081

7 1 1
CULTINITION
i
۲
PART T

CHARITABLE PURPOSES	2,283.	2,283.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	2,284.	2,284.
REVENUE AND EXPENSES PER BOOKS	4,567.	4,567.
		TOTALS
DESCRIPTION	JMW & ASSOCIATES, LLC	

FORM 990PF, PART I - TAXES

REVENUE AND **EXPENSES**

DESCRIPTION

PER BOOKS

2014 TAX DUE 2015 ESTIMATED TAX 3,241. 7,812.

TOTALS

11,053.

STOCK
CORPORATE
1
ΗI
PART
990PF,
FORM

THE PATTERSON FOUNDATION

DESCRIPTION

CERNER CORPORATION

ENDING BOOK VALUE

ENDING

20,077,526.

20,077,526.

TOTALS

17,301,907.

17,301,907.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

CARRYOVER BASIS ADJUSTMENT 389,922.

TOTAL 389,922.

ATTACHMENT 6	EXPENSE ACCT AND OTHER ALLOWANCES	0	0
ATTACH	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	.0
	COMPENSATION	Ö	Ö
LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 4.00	TRUSTEE 4.00
FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	NEAL PATTERSON 11410 DICKEY LANE PO BOX 790 CAPTIVA, FL 33924	JEANNE PATTERSON 11410 DICKEY LANE PO BOX 790 CAPTIVA, FL 33924

GRAND TOTALS

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIF TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECTPIENT	DIEDPORE OF CRAW OF CAMPUTCHMAN	
	There is no the second of the	FURFUSE OF GRAIN OR CONTRIBUTION	AMOUNT
AMERICAN ROYAL ASSOCIATION	NONE	TO PROVIDE SUPPORT FOR THE PREMIUM LIVESTOCK	226,112.
1701 AMERICAN ROYAL COURT	PC PC	AUCTION AND THE YOUTH AWARDS PROGRAM	
KANSAS CITY, MO 64102			
HEALTHE KIDS INSTITUTE	NONE	SUPPORT FOR THE GENERAL FUND - CIVIC	200,000.
2800 ROCKCREEK PARKWAY	PC		
KANSAS CITY, MO 64117			
FIRST HAND FOUNDATION	NONE	SUPPORT FOR THE GENERAL FUND - CIVIC	44,667.
2800 ROCKCREEK PARKWAY	PC		•
KANSAS CITY, MO 64117			
BRIDGES OF HOPE DELAWARE	NONE	SUPPORT FOR THE GENERAL FUND - CIVIC	2,500.
P.O. BOX 453045	PC		
GROVE, OK 74345			
THE ANTHONY HOSPITAL AND CLINIC ASSOCIATION	NONE	TO PROVIDE SUPPORT FOR THE HEALTH CENTER - CIVIC	11,110.
1101 E SPRING ST	PC		
ANTHONY, KS 67003			
ROCKHURSI HIGH SCHOOL	NONE	TO FUND SCHOLARSHIPS	2,500.
9301 STATE LINE ROAD	PC		
KANSAS CITY, MO 64114			

11:21:14 AM

20-7550081

YEA	
THE	
PAID DURING	
PAID	
ANTS AND CONTRIBUTIONS	
AND	
GRANTS	
ᆝ	I
⋩	Ì
PART XV	
990PF.	
FORM	

ATTACHMENT 7 (CONT'D)

AMOUNT	5,000.	7,588.
PURPOSE OF GRANT OR CONTRIBUTION	TO FUND SCHOLARSHIPS	TO PROVIDE MEALS FOR THE RESIDENTS
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE PC	NONE PC
RECIPIENT NAME AND ADDRESS	NOTRE DAME DE SION SCHOOL OF KANSAS CITY 823 LOCUST ST KANSAS CITY, MO 64109	LITTLE SISTERS OF THE POOR 8745 JAMES A REED RD KANSAS CITY, MO 64138

499,477. TOTAL CONTRIBUTIONS PAID

ATTACHMENT 7 PAGE 28

92490S 757L 5/10/2016

11:21:14 AM

FORM 990-PF - PART IV
AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME Kind of Property Description Date sold acquired Date sold								
Kind of Property Description						01	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis	Ĭ	Gain or (loss)	
		14000 SHS CERNER CORP					VAR	02/25/2015
1,021,413.		PROPERTY TYPE: SECURITIES					1,021,413.	
rotal gain(i	oss)			• • • • • • • • • • • • •			1,021,413.	
1								
	<u> </u>	 				Н		