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2015

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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.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.Department of the Treasury
Internal Revenue ServiceFor calendar year 2015 or tax year beginning **07/01/2015**

Name of foundation Ulrich & Ruth Frank Foundation for International		A Employer identification number H23-2571610
Number and street (or P O box number if mail is not delivered to street address) PO Box 7		B Telephone number (see instructions) (360) 466-8040
City or town, state or province, country, and ZIP or foreign postal code Clear Lake, WA 98235		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 14,847,829.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ Part I, column (d) must be on cash basis	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	214,296.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	335,124.	335,124.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-428,183.			
	b Gross sales price for all assets on line 6a 6,050,646.				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
Operating and Administrative Expenses	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	121,237.	335,124.		
	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits	6,928.			6,928.
	16a Legal fees (attach schedule)	1,000.			1,000.
	b Accounting fees (attach schedule)	7,080.			7,080.
	c Other professional fees (attach schedule)	605,505.			605,505.
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	3,948.	3,948.		
	19 Depreciation (attach schedule) and depletion	1,529.		1,529.	
	20 Occupancy				
	21 Travel, conferences, and meetings	51,825.			51,825.
22 Printing and publications					
23 Other expenses (attach schedule)	163,227.	95,194.		68,033.	
24 Total operating and administrative expenses. Add lines 13 through 23	841,042.	99,142.	1,529.	740,371.	
25 Contributions, gifts, grants paid	288.			288.	
26 Total expenses and disbursements. Add lines 24 and 25	841,330.	99,142.	1,529.	740,659.	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-720,093.				
b Net investment income (if negative, enter -0-)		235,982.			
c Adjusted net income (if negative, enter -0-)					

For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF(2015)

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21

Part II Balance Sheets

Attach schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash – non-interest-bearing	11,354.	32,793.	32,793.
	2 Savings and temporary cash investments	435,403.	497,536.	497,536.
	3 Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments – U.S. and state government obligations (attach schedule)			
	b Investments – corporate stock (attach schedule)			
	c Investments – corporate bonds (attach schedule)			
	11 Investments – land, buildings, and equipment basis ▶ Less accumulated depreciation (attach schedule) ▶			
	12 Investments – mortgage loans			
	13 Investments – other (attach schedule)	14,927,389.	14,142,626.	14,313,878.
	14 Land, buildings, and equipment basis ▶ 6,968. Less accumulated depreciation (attach schedule) ▶ 3,346.	2,600.	3,622.	3,622.
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I).	15,376,746.	14,676,577.	14,847,829.	
Liabilities	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)			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	5,229.	5,229.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	15,371,517.	14,671,348.	
	30 Total net assets or fund balances (see instructions)	15,376,746.	14,676,577.	
	31 Total liabilities and net assets/fund balances (see instructions)	15,376,746.	14,676,577.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	15,376,746.
2 Enter amount from Part I, line 27a	2	-720,093.
3 Other increases not included in line 2 (itemize)	3	19,924.
4 Add lines 1, 2, and 3	4	14,676,577.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	14,676,577.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a Publicly traded securities		P			
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 6,050,646.		6,478,829.	-428,183.		
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(f) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(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			
a			-428,183.		
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)		<div style="display: flex; align-items: center;"> <div style="font-size: 3em; margin-right: 10px;">{</div> <div> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> </div>		2	-428,183.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)		<div style="display: flex; align-items: center;"> <div style="font-size: 3em; margin-right: 10px;">}</div> <div> If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8. </div> </div>		3	-407,818.

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

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

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

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

☐ Yes ☒ No

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

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	720,983.	15,954,639.	.0452
2013	331,334.	45,588.	1.0000
2012	151,367.	7,369.	1.0000
2011	82,918.		
2010			
2 Total of line 1, column (d)			2 2.0452
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 .4090
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			4 14,507,915.
5 Multiply line 4 by line 3			5 5,934,289.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 2,360.
7 Add lines 5 and 6			7 5,936,649.
8 Enter qualifying distributions from Part XII, line 4			8 740,659.

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 <input type="checkbox"/> and enter 1% of Part I, line 27b.	1	4,720.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2	3	4,720.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	4,720.
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	27.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	4,747.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	0.

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? <i>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</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e 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? <i>If "Yes," attach a detailed description of the activities</i>		X
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? <i>If "Yes," attach a conformed copy of changes</i>		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) PA		
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 <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		X

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	Yes	No
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? Website address ► N/A	13	X	
14	The books are in care of ► KMA CPAs Ltd. Telephone no ► (250) 758-5557 Located at ► 5107 Somerset Drive Ste. C Nanaimo, British Columbia, V9T 2K5, Canada ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes" enter the name of the foreign country ►	16	Yes	No
				X

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

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

1a	During the year did the foundation (either directly or indirectly):		Yes	No
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b		
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))			
a	At the end of the 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 ►		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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 foundation had excess business holdings in 2015)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X

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

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 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? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No

Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Erica Frank 3164 Dolphin Drive Nanose Bay, British Columbia, V9P 9J2, C	President 20.00			69,333.

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

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

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Stuart Gitlow 153 Gaskill St. Woonsocket, RI 02895-1011	Management	200,000.
Crystal Marchan PO Box 1373 San Juan, TX 78589	Administrative services	67,495.
Ann Hulton 1389 Catherine Street Decatur, GA 30030	Technology related service	76,478.
Veronic Clair 752 Millyard Vancouver, BC, V5Z 4A1, Canada	Program Investig./Support	60,826.

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

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1 Annenberg Physician Training Program (APTP) - see attached stmt	437,019.
2 Next Generation University/Health Sciences Online (NGU/HSO) Project - see attached stmt	94,787.
3 EDATA-K - see attached stmt	85,377.
4 Skoll - see attached stmt	81,195.

Part IX-B Summary of Program-Related Investments (see instructions)

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

	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3 ▶	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	502,358.
c	Fair market value of all other assets (see instructions)	1c	14,226,490.
d	Total (add lines 1a, b, and c)	1d	14,728,848.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d.	3	14,728,848.
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	220,933.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,507,915.
6	Minimum investment return. Enter 5% of line 5	6	725,396.

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

1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5	2a	
b	Income tax for 2015 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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, line 1	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	740,659.
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	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	740,659.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	740,659.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only				
b Total for prior years				
3 Excess distributions carryover, if any, to 2015				
a From 2010 82,555.				
b From 2011 82,918.				
c From 2012 150,999.				
d From 2013 329,055.				
e From 2014				
f Total of lines 3a through e 645,527.				
4 Qualifying distributions for 2015 from Part XII, line 4: \$ 740,659.				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus 740,659.				
5 Excess distributions carryover applied to 2015 (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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 1,386,186.				
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions				
e 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 distributed in 2016.				
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) 82,555.				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 1,303,631.				
10 Analysis of line 9.				
a Excess from 2011 82,918.				
b Excess from 2012 150,999.				
c Excess from 2013 329,055.				
d Excess from 2014				
e Excess from 2015 740,659.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☒ 4942(j)(3) or ☐ 4942(j)(5) or

	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.					
b 85% of line 2a.					
c Qualifying distributions from Part XII, line 4 for each year listed	740,659.	720,983.	331,334.	151,367.	1,944,343.
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c.	740,659.	720,983.	331,334.	151,367.	1,944,343.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test— enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	483,597.	531,821.	1,519.	245.	1,017,182.
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 (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year— see instructions.)**1 Information Regarding Foundation Managers:**

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2))

None

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

None

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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.

- a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

Erica Frank, President

(360) 466-8040 EFrank@NextGenU.org

PO Box 7 Clear Lake, WA 98235

- b** The form in which applications should be submitted and information and materials they should include

Letter of Intent

- c** Any submission deadlines:

None

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

See attached stmt

Part XV Supplementary Information (continued)**3** Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year Simon Fraser University 8888 University Drive Burnaby, BC, V5A 1S6, Canada		PF	Subsidize labour costs for program dev	7,850.
Total			3a	7,850.
b Approved for future payment				
Total			3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities			05	335,124.	
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			05	-428,184.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)				-93,060.	
13	Total. Add line 12, columns (b), (d), and (e)					

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes[illegible]

Part XVII

- a** Transfers from the reporting foundation to a noncharitable exempt organization of:

(2) Other assets	1a(2)		X
----------------------------	-------	--	---

(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
--	-------	---

(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
--	-------	---

(4) Reimbursement arrangements	1b(4)		X
--	-------	--	---

(6) Performance of services or membership or fundraising solicitations.	1b(6)		X
---	-------	--	---

Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	Y
--	----	---

- d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods.

[illegible]

- 2 a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code

- b** If "Yes," complete the following schedule.

[illegible]

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Estimado Sr. Presidente

☒ Yes ☐ No

Print/Type preparer's name

Preparer's signature

Date	
------	--

Check ☐ if

PTIN

Douglas K PARKHURST

Firm's name ▶ **KMA CPA's Ltd.**

Firm's address ► **UNIT C - 5107 SOMERSET DRIVE**

NANAIMO, British Columbia, V9T 2K5, Canada

Firm's EIN ▶ 98-0607436

Phone no
(250) 758-5557

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

Department of the Treasury

Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization

Employer identification number

Ulrich & Ruth Frank Foundation for International Health **23-2571610**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

Ulrich & Ruth Frank Foundation for International Health**23-2571610****Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<u>Grand Challenges Canada</u> <u>101 College Street Ste. 406</u> <u>Toronto, Ontario, M5G 1L7, Cameroon</u>	\$ <u>97,533.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u>2</u>	<u>Josiah Macy Jr. Foundation</u> <u>44 East 64th Street</u> <u>New York, NY 10065</u>	\$ <u>33,750.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u>3</u>	<u>Skoll Global Threats Fund</u> <u>1808 Wedemeyer ST.</u> <u>San Francisco, CA 94129</u>	\$ <u>77,600.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

Ulrich & Ruth Frank Foundation for International Health**23-2571610****Part II** Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from 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
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization

Employer identification number

Ulrich & Ruth Frank Foundation for International Health**23-2571610****Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

(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, and 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, and 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, and 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, and ZIP + 4

Relationship of transferor to transferee

_____	_____
_____	_____
_____	_____

Name of organization
Ulrich & Ruth Frank Foundation for International Health

Employer identifying number
23-2571610

Form 990-PF Professional Fees Expense

Supporting Details for Form 990-PF, Part I, Line 16

(a) Description	(b) Revenue and expenses per books	(c) Net investment income	(d) Adjusted net income	(e) Disbursement for charitable purpose
Legal fees:				
Legal fees	1,000.	0.	0.	1,000.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
Accounting fees:				
	0.	0.	0.	0.
Accounting fees	7,080.	0.	0.	7,080.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
Other professional fees:				
Ann Hulton	76,478.	0.	0.	76,478.
Ashley Shaw	1,612.	0.	0.	1,612.
Bjorn Stime	1,825.	0.	0.	1,825.

Elsa Spencer	350.	0.	0.	350.
Gurkaran Thiara	2,529.	0.	0.	2,529.
Joanne Krupa	6,278.	0.	0.	6,278.
Karambir Khangoora	500.	0.	0.	500.
Kartik Bajaj	2,250.	0.	0.	2,250.
Kausar Doctor	44,520.	0.	0.	44,520.
See attached statement	469,163.	0.	0.	469,163.

Name of organization
Ulrich & Ruth Frank Foundation for International Health

Employer identifying number
23-2571610

Form 990-PF Taxes Expenses

Supporting Details for Form 990-PF, Part I, Line 18

(a) Description	(b) Revenue and expenses per books	(c) Net investment income	(d) Adjusted net income	(e) Disbursement for charitable purpose
Foreign Taxes Pd(Various)	3,948.	3,948.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

Name of organization
Ulrich & Ruth Frank Foundation for International Health

Employer identifying number
23-2571610

Form 990-PF Other Expenses

Supporting Details for Form 990-PF, Part I, Line 23

(a) Description	(b) Revenue and expenses per books	(c) Net investment income	(d) Adjusted net income	(e) Disbursement for charitable purpose
Bank and Advisory Fees	96,104.	95,194.	0.	910.
Books/Sub/Ref	20.	0.	0.	20.
Course materials	399.	0.	0.	399.
Hosting	24,751.	0.	0.	24,751.
Insurance	4,629.	0.	0.	4,629.
Internet	24.	0.	0.	24.
Postage, mailing service	108.	0.	0.	108.
Supplies	164.	0.	0.	164.
Website	4,224.	0.	0.	4,224.
Dues	5,192.	0.	0.	5,192.
Office expenses	16,712.	0.	0.	16,712.
Student scholarships	7,727.	0.	0.	7,727.
Utilities	3,173.	0.	0.	3,173.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

Form 990-PF Amortization

Supporting Details for Form 990-PF, Part I, Line 23

(a) Description	(b) Date Acquired, Completed, or Expended	(c) Amount Amortized	(d) Deduction for Prior Years	(e) Amortization Period	(f) Current Year Amortization	(g) Net Investment Income	(h) Adjusted Net Income	(i) Total Amount of Amortization
-----------------	---	----------------------	-------------------------------	-------------------------	-------------------------------	---------------------------	-------------------------	----------------------------------

0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.
0.	0.0.000000	0.	0.	0.	0.

Name of organization
Ulrich & Ruth Frank Foundation for International Health

Employer identifying number
23-2571610

Form 990-PF Other Expenses
Supporting Details for Form 990-PF, Part II, Line 13

Investments - Other

(a) Description	(b) Listed at Cost	(c) Listed at FMV	(b) End of Year Book Value	(c) End of Year Fair Market
Merrill Lynch Accounts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4,142,626.	4,313,878.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.
	<input type="checkbox"/>	<input type="checkbox"/>	0.	0.

Name of organization
Ulrich & Ruth Frank Foundation for International Health

Employer identifying number
23-2571610

Form 990-PF Other Expenses

Supporting Details for Form 990-PF, Part II, Line 14

Land, Buildings, and Equipment

(a) Description	(b) Cost or other basis	(c) Accumulated depreciation	(b) End of Year Book value	(c) End of Year Fair Market
Machinery and equipment	2,100.	1,632.	468.	468.
Computer	2,317.	1,204.	1,113.	1,113.
Computer	2,551.	510.	2,041.	2,041.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

Name of Corporation

Ulrich & Ruth Frank Foundation for International Health

Federal EIN

23-2571610

Underpayment Penalty Calculations

		Underpayment Amount	Number Of Days	Daily Rate	Penalty Amount
From	11/17/2015	241.	30	.000082	0.59
To	12/15/2015	0.	0	.000082	0.00
From		0.	0	.000000	0.00
To		0.	0	.000000	0.00
From		0.	0	.000000	0.00
To		0.	0	.000000	0.00
From	12/16/2015	481.	16	.000082	0.63
To	12/31/2015	0.	0	.000082	0.00
From	01/01/2016	481.	75	.000082	2.96
To	03/15/2016	0.	0	.000082	0.00
From		0.	0	.000000	0.00
To		0.	0	.000000	0.00
From		0.	0	.000000	0.00
To		0.	0	.000000	0.00
From	03/16/2016	722.	16	.000082	0.95
To	03/31/2016	0.	0	.000082	0.00
From	04/01/2016	722.	76	.000109	5.98
To	06/15/2016	0.	0	.000109	0.00
From		0.	0	.000000	0.00
To		0.	0	.000000	0.00
From	06/16/2016	962.	15	.000109	1.57
To	06/30/2016	0.	0	.000109	0.00
From	07/01/2016	962.	92	.000109	9.65
To	09/30/2016	0.	0	.000109	0.00
From	10/01/2016	962.	46	.000109	4.82
To	11/15/2016	0.	0	.000109	0.00

Total Penalty 27.

Return due date or date tax paid if earlier

11/15/2016

Details for Form 990-PF Professional Fees Expense

23-2571610

Date	Description	Amount
06/30/2016	Kisha Clune	500.00
06/30/2016	Leah Schultze	33,317.09
06/30/2016	Logan Ansell	394.05
06/30/2016	Lola Halpin	562.50
06/30/2016	Michelle Everton	3,212.56
06/30/2016	Patrick Van Nieuwenhuizen	275.00
06/30/2016	Kasra Hassani	794.65
06/30/2016	Simon Fraser University	7,850.00
06/30/2016	Talk Science to Me	1,278.87
06/30/2016	Verena Rossa-Roccor	9,325.00
06/30/2016	Veronic Clair	60,825.96
06/30/2016	Brian Hurley	9,999.96
06/30/2016	Crystal Marchan	67,495.36
06/30/2016	Erica Frank	69,333.29
06/30/2016	Stuart Gitlow	199,999.92
06/30/2016	University of British Columbia	3,363.08
06/30/2016	Cameron Dunbar	463.68
06/30/2016	Jennifer Rubben	171.88
Total		469,162.85

Comments for Form 990-PF, Part XV, Line 2d

Must be highly efficient (good and large yield), leveraged with complementary funds and capable of significant improvement in international health with a small investment.

Comments for Form 990-PF, Part IX-A, Line 1

- APTP seeks to discover methods that could be used to develop greater understanding of and greater interest in addictive disease among physicians.

Comments for Form 990-PF, Part IX-A, Line 2

Starting with a focus in the health sciences, NextGenU.org now brings over 5 years of uniquely offering courses for credit for free, registrants in over 150 countries, and funders and partners including CDC, Harvard, NATO, Stanford, and WHO. This free model has been tested in North American medical and public health students, and in community health workers and primary care physicians in Kenya, with as much knowledge gain and greater student satisfaction than with traditional courses, positive effects on complex health worker behaviors (like counselling) and attitudes (like stigma), and the creation of a global community of learning and practice. NextGenU.org is ready to offer our ultimate goal, the world's first free degrees: MDs, Masters' in Public Health, and residencies (in Pediatrics and in Preventive and Family Medicine). Courses are competency-based currently ranging from undergraduate and community health worker training, through Graduate and Continuing Medical Education, and include a global peer community of practice, and local skills-oriented mentorships.

Comments for Form 990-PF, Part IX-A, Line 3

This project allows the Africa Mental Health Foundation and the University of British Columbia to adapt NextGenU.org's model of free, high-quality computer-based distance learning to train the primary care workforce in Kenya in substance use disorders research. The aim of the project is to train large numbers of primary care workers to successfully identify and treat substance use disorders through high-quality, globally available, free-to-use, low-cost to assemble, peer and mentor supported learning offered by NextGenU.org.

Comments for Form 990-PF, Part IX-A, Line 4

The Skoll Global Threats Fund program is designed to provide users with: 1) Online curriculum on innovative epidemiological surveillance methods and 2) Another online curriculum to train epidemiologists in the field on how to use one of these specific innovative surveillance tools.
