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Form 990-PF

Department of the Treasury  
Internal Revenue Service

## Return of Private Foundation

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

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► Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

For calendar year 2015 or tax year beginning 07/01/2015

Name of foundation		A Employer identification number		
<b>Ulrich &amp; Ruth Frank Foundation for International</b>		<b>H23-2571610</b>		
Number and street (or P O box number if mail is not delivered to street address)		Room/suite		
<b>PO Box 7</b>				
City or town, state or province, country, and ZIP or foreign postal code <b>Clear Lake, WA 98235</b>				
<p>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</p>				
<p>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</p>				
<p>I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 14,847,829.</p>				
<p>J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual  <input type="checkbox"/> Other (specify) _____</p>				
<p><b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</p>				
Revenue	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	214,296.			
	2			
	3			
	4			
	5 a			
	b			
	6 a	-428,183.		
	b	6,050,646.		
	7			
	8			
	9			
	10 a			
	b			
	c			
	11			
	12	121,237.	335,124.	
	13			
	14			
	15			
	16 a			
	b			
	c			
	17			
	18			
	19			
	20			
21				
22				
23				
24				
25				
26				
27				
<p><b>Operating and Administrative Expenses</b></p> <p>RECEIVED MAY 01 2017 JGDEN, UT</p>				
13				
14				
15				
16 a				
b				
c				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
a				
b				
c				

G-29

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<b>Part II</b> <b>Balance Sheets</b>	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
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.
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.
<b>Liabilities</b>				
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)			
<b>Net Assets or Fund Balances</b>				
24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>			
	and complete lines 24 through 26 and lines 30 and 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.)
<b>1a Publicly traded securities</b>		<b>P</b>		
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
(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)
<b>a</b> <b>6,050,646.</b>			<b>6,478,829.</b>	<b>-428,183.</b>
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>a</b>				<b>-428,183.</b>
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	<b>-428,183.</b>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8.		{ }	3	<b>-407,818.</b>

**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	<b>720,983.</b>	<b>15,954,639.</b>	<b>.0452</b>
2013	<b>331,334.</b>	<b>45,588.</b>	<b>1.0000</b>
2012	<b>151,367.</b>	<b>7,369.</b>	<b>1.0000</b>
2011	<b>82,918.</b>		
2010			
2 Total of line 1, column (d)			<b>2.0452</b>
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			<b>.4090</b>
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			<b>14,507,915.</b>
5 Multiply line 4 by line 3			<b>5,934,289.</b>
6 Enter 1% of net investment income (1% of Part I, line 27b)			<b>2,360.</b>
7 Add lines 5 and 6			<b>5,936,649.</b>
8 Enter qualifying distributions from Part XII, line 4			<b>740,659.</b>

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	}	4,720.
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.		
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-)	4,720.	
3	Add lines 1 and 2		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0-		
6	<b>Credit/Payments</b>		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	4,720.
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	4,747.	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached		
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>		9
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>		10
11	Enter the amount of line 10 to be <b>Credited to 2016 estimated tax</b> ►		Refunded
		11	0.

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes	No
1a		X	
1b		X	
1c		X	
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>	Yes	No
2		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>	Yes	No
3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Yes	No
4a		X	
4b		X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction 7</i>	Yes	No
5		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?	Yes	No
6		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>	Yes	No
7		X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ►	Yes	No
8a	<b>PA</b>	X	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	Yes	No
b		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>	Yes	No
9		X	
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	Yes	No
10		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 <input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <b>N/A</b>	13	<input checked="" type="checkbox"/>	
14	The books are in care of ► <b>KMA CPAs Ltd.</b> Telephone no ► <b>(250) 758-5557</b> Located at ► <u>5107 Somerset Drive Ste. C Nanaimo, British Columbia, V9T 2K5, Canada</u> 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 . . . . . ► <b>15</b>	<input type="checkbox"/>		
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	<input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>

**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"/>	<input checked="" 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"/>	<input checked="" 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"/>	<input checked="" 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"/>	<input checked="" 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"/>	<input checked="" 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"/>	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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 . . . . . ► <input type="checkbox"/>	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	<input checked="" type="checkbox"/>
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 ►	2a	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) . . . . .	2b	
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ►		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	3a	<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	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>

5a	During the year did the foundation pay or incur any amount to	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? Organizations relying on a current notice regarding disaster assistance check here	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5b <input type="checkbox"/>
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? If "Yes," attach the statement required by Regulations section 53.4945-5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		6b <input checked="" type="checkbox"/>
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7b <input type="checkbox"/>

**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
<b>Erica Frank</b> 3164 Dolphin Drive Nanoose Bay, British Columbia, V9P 9J2, C	<b>President</b> 20.00			<b>69,333.</b>

**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
<b>NONE</b>				

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

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**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
<b>Stuart Gitlow</b> 153 Gaskill St. Woonsocket, RI 02895-1011	<b>Management</b>	<b>200,000.</b>
<b>Crystal Marchan</b> PO Box 1373 San Juan, TX 78589	<b>Administrative services</b>	<b>67,495.</b>
<b>Ann Hulton</b> 1389 Catherine Street Decatur, GA 30030	<b>Technology related service</b>	<b>76,478.</b>
<b>Veronic Clair</b> 752 Millyard Vancouver, BC, V5Z 4A1, Canada	<b>Program Investig./Support</b>	<b>60,826.</b>
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 <u>Annenberg Physician Training Program (APTP) - see attached stmt</u>	<u>437,019.</u>
2 <u>Next Generation University/Health Sciences Online (NGU/HSO) Project - see attached stmt</u>	<u>94,787.</u>
3 <u>EDATA-K - see attached stmt</u>	<u>85,377.</u>
4 <u>Skoll - see attached stmt</u>	<u>81,195.</u>

**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 <u>N/A</u>	
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 <b>502,358.</b>
c	Fair market value of all other assets (see instructions)	1c <b>14,226,490.</b>
d	<b>Total</b> (add lines 1a, b, and c)	1d <b>14,728,848.</b>
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 <b>14,728,848.</b>
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see instructions)	4 <b>220,933.</b>
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5 <b>14,507,915.</b>
6	<b>Minimum investment return.</b> Enter 5% of line 5	6 <b>725,396.</b>

**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	<b>Distributable amount</b> 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 <b>740,659.</b>
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	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4 <b>740,659.</b>
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	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6 <b>740,659.</b>

**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				<input checked="" type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5) or					
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.				Tax year		Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012						
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	740,659.	720,983.	331,334.	151,367.	1,944,343.				
Subtract line 2d from line 2c										
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**  
**PO Box 7 Clear Lake, WA 98235**

(360) 466-8040 **EFrank@NextGenU.org**

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)				
<i>a Paid during the year</i>				
<b>Simon Fraser University 8888 University Drive Burnaby, BC, V5A 1S6, Canada</b>		<b>PF</b>	<b>Subsidize labour costs for program dev</b>	<b>7,850.</b>
<b>Total</b>				► 3a <b>7,850.</b>
<i>b Approved for future payment</i>				
<b>Total</b>				► 3b

Part XVI-A Analysis of Income-Producing Activities

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					
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					
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)					
13 Total. Add line 12, columns (b), (d), and (e)					
					13

(See worksheet in line 13 instructions to verify calculations )

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

**Part XVII** **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of.		
(1)	Cash . . . . .	1a(1)	X
(2)	Other assets . . . . .	1a(2)	X
b	Other transactions		
(1)	Sales of assets to a noncharitable exempt organization . . . . .	1b(1)	X
(2)	Purchases of assets from a noncharitable exempt organization . . . . .	1b(2)	X
(3)	Rental of facilities, equipment, or other assets . . . . .	1b(3)	X
(4)	Reimbursement arrangements . . . . .	1b(4)	X
(5)	Loans or loan guarantees . . . . .	1b(5)	X
(6)	Performance of services or membership or fundraising solicitations . . . . .	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received		

**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 (other than section 501(c)(3)) or in section 527? . . . . .  Yes  No

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

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

Paid Preparer Use Only	Print/Type preparer's name <b>Douglas K PARKHURST</b>	Preparer's signature 	Date <b>4/5/7</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P01474935</b>
	Firm's name ► <b>KMA CPA's Ltd.</b>			Firm's EIN ► <b>98-0607436</b>	
	Firm's address ► <b>UNIT C - 5107 SOMERSET DRIVE NANAIMO, British Columbia, V9T 2K5, Canada</b>			Phone no <b>(250) 758-5557</b>	

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

**2015**

► 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](http://www.irs.gov/form990)

Name of the organization

**Ulrich & Ruth Frank Foundation for International Health**

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 foundation

Employer identification number

Check 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

Ulrich & Ruth Frank Foundation for International Health

## Employer identification number

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
1	<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 )
2	<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 )
3	<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 )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

Name of organization

Ulrich &amp; Ruth Frank Foundation for International Health

Employer identification number

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
		\$ _____	_____

## Name of organization

Ulrich &amp; Ruth Frank Foundation for International Health

Employer identification number  
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 &amp; 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
<b>Legal fees:</b>				
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.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
<b>Accounting fees:</b>				
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.
	0.	0.	0.	0.
<b>Other professional fees:</b>				
Ann Hulton	76,478.	0.	0.	76,478.
Ashley Shaw	1,612.	0.	0.	1,612.
Bjorn Stime	1,825.	0.	0.	1,825.

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

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.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

Name of organization

Ulrich &amp; 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.

## 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.

Name of organization

Ulrich &amp; 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
<b>Merrill Lynch Accounts</b>	<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.

Name of organization

Ulrich &amp; 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
<b>Machinery and equipment</b>	<b>2,100.</b>	<b>1,632.</b>	<b>468.</b>	<b>468.</b>
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.

Name of Corporation  
Ulrich & Ruth Frank Foundation for International Health

Federal EIN  
23-2571610

### **Underpayment Penalty Calculations**

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

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

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

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

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

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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.

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

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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.

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

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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.

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