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SCANNED JAN 0 5 2017 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.

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For	<u>cal</u> end	lar year 2015 or tax year beginning ,	and ending				
	ne of fou				A Empl	oyer identification number	
В	USH	HODGES FAMILY FOUNDATION			26	-0429845	
		street (or P O box number if mail is not delivered to street address)	Ro	oom/suite		hone number (see instruction	s)
71	250	ANTELOPE VALLEY RD					
1 ' '		, state or province, country and ZIP or foreign postal code			C If exe	mption application is pending,	check here
_	<u>ENO</u>	NV 89508-7					
F	heck a	''''	rn of a former public cha	anty	D 1 Fc	oreign organizations, check he	re •
3		Final return Amended				preign organizations meeting t	
		Address change Name cha			85	% test, check here and attach	computation
<u>H</u> C	heck t	ype of organization X Section 501(c)(3) exempt private	foundation			ate foundation status was terr	ninated under
	Section	4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		sectio	n 507(b)(1)(A), check here	• [_
l Fa	air marl	ket value of all assets at J Accounting method	X Cash Acc	rual	1	foundation is in a 60-month te	
		ear (from Part II, col (c), Uther (specify)			under	section 507(b)(1)(B), check h	ere 🕨
	e 16)		pe on cash basis)		Ĺ		
Pá	art 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 inv		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	10,000				(Casir basis drily)
	2	Check ► if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	9		9	9	
	4	Dividends and interest from securities					
	5a .	Gross rents	u				
	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10			-		
	b	Gross sales price for all assets on line 6a					
	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				0	
	9	Income modifications					
·	10a	Gross sales less returns and allowances					
_	Ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	10 000				SECENCE!
-	12	Total. Add lines 1 through 11	10,009		9	\ 9	The state of the s
	13	Compensation of officers, directors, trustees, etc				1_	NOV 1 8 2016
	14 15	Other employee salaries and wages Pension plans, employee benefits				3051	MONIO
	16a	Legal fees (attach schedule)					SEN III
	ь	Accounting fees (attach schedule) STMT 1	225		125	100	OGDEN UT
	С	Other professional fees (attach schedule)					
	17	Interest					
	18	Taxes (attach schedule) (see instructions)					
	19	Depreciation (attach schedule) and depletion					
	20	Occupancy	 				
	21	Travel, conferences, and meetings					
	22	Printing and publications					
)	23	Other expenses (att sch.) STMT 2	160		80	80	!
	24	Total operating and administrative expenses.			_		
		Add lines 13 through 23	385		205	180	0
ō	25	Contributions, grits, grants paid	5,000				5,000
	26	Total expenses and disbursements. Add lines 24 and 25	5,385		205	180	5,000
	27	Subtract line 26 from line 12	4 634				
	a	Excess of revenue over expenses and disbursements	4,624	<u> </u>	0		
	b	Net investment income(if negative, enter -0-) Adjusted net income(if negative, enter -0-)				0	
	, .	Agrasion riot mounic(n negative, citter -0-)	F	r		ı U	

For Paperwork Reduction Act Notice, see instructions.

Part IV Capital Gains and	Losses for Tax on Investment	Income				·
2-story brick war	be the kind(s) of property sold (e.g., real estate, ehouse, or common stock 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1a N/A						
<u>b</u>						<u> </u>
<u>c</u>						
						
<u>e</u>						L
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			or (loss) f) minus (g)
<u>a</u>						
<u>b</u>						-
<u>c</u>						
<u>d</u>						
Complete only for accets showing a	ain in column (h) and owned by the founda	ation on 12/31/6	<u> </u>			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (i) col (j), if any		(k), but not	(h) gain minus less than -0-)or om col (h))
			Cor (), ir any	 		
a						
<u>b</u>						
d						
e						
2 Capital gain net income or (net capi	If gain, also enter in Pai If (loss), enter -0- in Pai			2		
3 Net short-term capital gain or (loss)	as defined in sections 1222(5) and (6)	11, III.6 /				
	plumn (c) (see instructions) If (loss), enter	-0- ın 7				
Part I, line 8		·		3		
	ler Section 4940(e) for Reduced	Tax on Net	Investment Incom	e		
(For optional use by domestic private for If section 4940(d)(2) applies, leave this	undations subject to the section 4940(a) ta part blank	ix on net investr	nent income)			-
	n 4942 tax on the distributable amount of an under section 4940(e) Do not complete the	, ,	ase period?			Yes X No
1 Enter the appropriate amount in each	ch column for each year, see the instruction	ns before makin	g any entries			(4)
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions		(c) alue of noncharitable-use asse			(d) ribution ratio divided by col. (c))
2014		100	21,			0.157073
2013		500	16,			0.147301
2012		230	11,			0.105272
2011		000	11,			0.177983
2010				703 		
2 Total of line 1, column (d)				2	}	0.587629
	vear base period – divide the total on line 2	by 5 or by the		-	 	0.367623
	been in existence if less than 5 years	by o, or by the		3	-	0.146907
4 Enter the net value of noncharitable	e-use assets for 2015 from Part X, line 5			4		31,573
5 Multiply line 4 by line 3				5		4,638
6 Enter 1% of net investment income	(1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		4,638
8 Enter qualifying distributions from P	art XII, line 4			8		5,000
If line 8 is equal to or greater than li	ne 7, check the box in Part VI, line 1b, and	complete that p	art using a 1% tax rate	See the		

orm	990-PF (2015) BUSH HODGES FAMILY FOUNDATION 26-0429845			F	age 4
	rt 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 ▶ 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 ► X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-				0
6	Credits/Payments				
а	2015 estimated tax payments and 2014 overpayment credited to 2015				
b	Exempt foreign organizations – tax withheld at source				
¢	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2016 estimated tax▶ Refunded ▶ 11				
	rt VII-A Statements Regarding Activities	F			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	ŀ		Yes	No
	participate or intervene in any political campaign?	}	<u>1a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	ì			٦,
	Instructions for the definition)?	ŀ	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	ŀ			
	published or distributed by the foundation in connection with the activities	F	. 1		٠,,
С	Did the foundation file Form 1120-POL for this year?	-	1c		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 ▶ \$			1	`
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1	
_	on foundation managers \$	ŀ		Ī	v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ļ.	2		X
_	If "Yes," attach a detailed description of the activities			1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	Ţ	3	Î	Х
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	ŀ	4a		X
4a		J/A	4b		
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	''	5		X
5	If "Yes," attach the statement required by General Instruction T	ŀ	-		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	[-	
U	By language in the governing instrument, or	-		-	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			į	
	conflict with the state law remain in the governing instrument?	I	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	Ī	7	Х	
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	NONE				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	-	8b	Х	_
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)? If "Yes,"				
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	ſ			
•	names and addresses		10		X
		-	00	n DE	(2015)

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

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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)

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Х

3b

4a

N/A

		5 FAMILY FOUNDATION		7429845			Page 6
		rding Activities for Which For	m 4/20 May Be Re	quired (conti	nued)		
5a	During the year did the foundation pay	•			(TE)		ł
	*, , , , , , , , , , , , , , , , , , ,	e attempt to influence legislation (section	` '/'		Yes $\overline{\mathbb{X}}$ No		
		cific public election (see section 4955), o	or to carry on,				1
	directly or indirectly, any voter reg		_		Yes X No		1
	•	r travel, study, or other similar purposes			Yes X No		1
	•	other than a charitable, etc , organization	on described in		57		•
	section 4945(d)(4)(A)? (see instru	·			Yes X No		<u> </u>
	• • • • • • • • • • • • • • • • • • • •	n religious, charitable, scientific, literary,	or educational		(2)		I
	purposes, or for the prevention of	•			Yes X No		1
b	_	dany of the transactions fail to qualify ur		cribed in	/-		1
		irrent notice regarding disaster assistan			N/A	5b	
	, ,	ice regarding disaster assistance check			▶ 📋		ŧ
C	·), does the foundation claim exemption	from the tax	37/3 []			ŧ
	because it maintained expenditure res			N/A	Yes U No		-
	,	by Regulations section 53 4945–5(d)					1
6a		ceive any funds, directly or indirectly, to	pay premiums		[[]		ŀ
	on a personal benefit contract?				Yes X No		
b		y premiums, directly or indirectly, on a p	personal benefit contract	7		6b	X
	If "Yes" to 6b, file Form 8870				G T		
	,	ne foundation a party to a prohibited tax			Yes X No		
		y proceeds or have any net income attrit			N/A	7b	
Pŧ		Officers, Directors, Trustees, I	roundation Manag	jers, Hignly P	aid Employees	s,	
	and Contractors	and their services		4:	- 		
1 L	list all officers, directors, trustees, i	oundation managers and their comp	pensation (see instruc	tions).			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expe	ense account,
	(a) Name	and address	hours per week devoted to position	(if not paid, enter -0-)	plans and deferred		allowances
_				ļ — — — —	compensation		
	CHARD D HODGES	RENO	TREASURER			1	
	01 CORPORATE BLVD	NV 89502	1.00	<u>-</u>	· 	 -	0
	SIREE BUSH	RENO	SECRETARY			ĺ	
	01 CORPORATE BLVD	NV 89502	1 00	<u> </u>			0
	BERT BUSH	RENO	PRESIDENT				
12	01 CORPORATE BLVD	NV 89502	1 00		0	ļ. 	0
	Company of Fire Limbort main		lad an line 4	<u> </u>		L	
2	"NONE."	employees (other than those include	ied on line 1 – see ins	tructions). If nor	ne, enter		
	NONE.				4.0000000000000000000000000000000000000	ı 	
	(a) Name and address of each emplo	was paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e)Expe	ense account,
	(a) Maine and address of each emplo	yee paig more than \$50,000	devoted to position	(c) Compensation	plans and deferred compensation		allowances
					Compensation		
NO	NE]		
							
					(
			- 				
					 		
			1				
					 -		
			<u> </u>]		
	I number of other amplayees and suc-	\$50,000		L	L		
ota	I number of other employees paid over	φυυ,υυυ					0
					Fo	om 990)-PF (2015)

Form 990-PF (20	15) BUSH HODGES FAMILY FOUNDATION	26-0429845	Page 7
Part VIII	Information About Officers, Directors, Trustees, Found	dation Managers, Highly Paid Em	ployees,
	and Contractors (continued)		
3 Five highe	est-paid independent contractors for professional services (see ins	tructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		į.	
			
		}	
			
		ļ	
		j	
Total number of	others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct charitable activities during the tax year. Include relevant statistical informatio other beneficiaries served, conferences convened, research papers produced, etc	n such as the number of	Expenses
1 N/A			
•			
2			
			Ì
			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instr	uctions)	
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
-			
All other program-re	elated investments See instructions		
3			
			
Total. Add lines	1 through 3	> _	L

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

-orm	99	0-F	PF	(2015)
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5

6

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Pa	rt XIII Undistributed Income	(see instructions)				
1	. Distributable amount for 2015 from Part X	il,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
	line 7	<u> </u>				1,579
2	Undistributed income, if any, as of the end	d of 2015			1	
а	Enter amount for 2014 only	Ĺ.				
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to 2	2015				
а	From 2010		Ī		1	
b	From 2011	420				
С	From 2012	646	†			
d	From 2013	1,651				
	From 2014	2,318	1			
f	Total of lines 3a through e		5,035			
4	Qualifying distributions for 2015 from Part	XII.				***************************************
•	line 4 ▶ \$ 5,000				1	
а	Applied to 2014, but not more than line 2a	,				
	Applied to undistributed income of prior ye	f				
	(Election required – see instructions)		-	1		
_	Treated as distributions out of corpus (Ele	action				
·	required – see instructions)	,011011				
	Applied to 2015 distributable amount	<u></u>				1,579
	''	s	3,421			
_ e	Remaining amount distributed out of corp Excess distributions carryover applied to	ſ=				
5	• • • • • • • • • • • • • • • • • • • •	r		·····		
	(If an amount appears in column (d), the amount must be shown in column (a))	Same	[1	1	
_	, , ,		1		1	
6	Enter the net total of each column as		ļ		1	
_	indicated below:	4 lima E	8,456	` }		
	Corpus Add lines 3f, 4c, and 4e Subtrac	F.	0,430			
D	Prior years' undistributed income Subtraction	²¹			1	
	line 4b from line 2b					
С	Enter the amount of prior years' undistribu	1]	1	1	
	income for which a notice of deficiency ha	į.	;]	1	
	been issued, or on which the section 494	2(a)	j	1	1	
	tax has been previously assessed	ļ				
đ	Subtract line 6c from line 6b Taxable	į	į		1	
	amount – see instructions	 				
е	Undistributed income for 2014 Subtract I	ne	1			
	4a from line 2a Taxable amount – see		1	1		
	instructions	<u> -</u>				
f	Undistributed income for 2015 Subtract li	i	1	1		
	4d and 5 from line 1. This amount must be	e		1		
	distributed in 2016	į-				0
7	Amounts treated as distributions out of co	· .		1	1	
	to satisfy requirements imposed by section				1	
	170(b)(1)(F) or 4942(g)(3) (Election may	be				
	required—see instructions)	-				
8	Excess distributions carryover from 2010	1			1	
	applied on line 5 or line 7 (see instruction					
9	Excess distributions carryover to 201	6.			1	
	Subtract lines 7 and 8 from line 6a	<u> </u>	8,456			· · · · · · · · · · · · · · · · · · ·
10	Analysis of line 9				1	
а	Excess from 2011	420			1	
b	Excess from 2012	646			1	
С	Excess from 2013	1,651			1	
đ	Excess from 2014	2,318			1	
е	Excess from 2015	3,421				
						5 990 PE 19915

Pa	Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)							
1a	If the foundation has received a ruling or d	etermination letter tha	t 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	ion is a private operati	ing foundation described	d in section 4	942(J)(3) or 494	2(j)(5)		
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years				
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total		
	investment return from Part X for							
	each year listed					Ì		
b	85% of line 2a							
С	Qualifying distributions from Part XII,							
_	line 4 for each year listed							
d	Amounts included in line 2c not used directly							
	for active conduct of exempt activities							
е	Qualifying distributions made directly							
	for active conduct of exempt activities				Į.	ļ		
	Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the							
	alternative test relied upon							
а	"Assets" alternative test – enter							
	(1) Value of all assets				[
	(2) Value of assets qualifying under							
	section 4942(j)(3)(B)(i)		<u> </u>					
b	"Endowment" alternative test – enter 2/3							
	of minimum investment return shown in							
	Part X, line 6 for each year listed		<u> </u>					
С	"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		į .					
	an exempt organization				<u> </u>	<u> </u>		
	(4) Gross investment income		<u> </u>	L				
₽ŧ	et XV Supplementary Inform	•		ne foundation had	\$5,000 or more it	n assets at		
	any time during the ye		ions.)					
1	Information Regarding Foundation Ma	-						
а	List any managers of the foundation who i				ne foundation			
	before the close of any tax year (but only to N/A	they have contributed	i more man \$5,000) (S	ee section 507(d)(2))				
	List any managers of the foundation who	wn 10% or more of the	e stock of a corporation	(or an equally large po	rtion of the			
J	ownership of a partnership or other entity)		•		ruon or the			
	N/A		m nee a re to or greater					
2	Information Regarding Contribution, C	Brant, Gift, Loan, Sch	nolarship, etc., Progra	ams:				
			preselected charitable		s not accept			
	unsolicited requests for funds If the found	ation makes gifts, grar	nts, etc (see instructions	s) to individuals or orga	nizations under			
	other conditions, complete items 2a, b, c,	and d						
a	The name, address, and telephone number		the person to whom ap	plications should be ad	dressed			
	BUSH HODGES FAMILY F							
	1250 ANTELOPE VALLEY	RD RENO N	<i>1</i> 89508-7313					
b	The form in which applications should be		•					
	SUBMIT LETTER OF INC	UIRY FOR A	PPLICATION P	ACKET				
С	Any submission deadlines							
	NONE		-1	- 11				
d	Any restrictions or limitations on awards, s	uch as by geographica	areas, chantable field	s, kinds of institutions,	or otner			
	factors SEE STATEMENT 3							
	ODE OTUTEMENT 3					000 DE		

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year GRACE CHURCH 1220 ROBB DR NONE EXEMPT **RENO NV 89523** CHARITABLE 4,000 POCKET BIBLES 1220 ROBB DR NONE EXEMPT **RENO NV 89523** CHARITABLE 1,000 ▶ 3a 5,000 **b** Approved for future payment N/A ▶ 3b Total

Enter gross am	ounts unless otherwise indicated	Unrelate	ed business income	Excluded	d by section 512, 513, or 514	(a)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program se						
		_				
		-		}		
				 		
						
		-	 	 -		·
f	-dtto from reversement agencies	-		 		
•	nd contracts from government agencies			 		
	p dues and assessments			14	9	
	savings and temporary cash investments and interest from securities			+		
	ncome or (loss) from real estate			-		
	• •		· · · · · · · · · · · · · · · · · · ·	1		
	nanced property			1		
	ot-financed property ncome or (loss) from personal property			1 1		
	stment income			1 1		
	s) from sales of assets other than inventory			1 1		
•	or (loss) from special events			† 		
	t or (loss) from sales of inventory			† †		
•	nue a			1		
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13 Total. Add	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations)		nt of Exempt Pur	poses	13	
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DAA

Part		-	_	sfers To and	Transaction	s and Relationships With	n Noncharitable		
4 0		Exempt Organiza		un anu of the faller		or accompation described		Tv	l Na
	_			_	-	er organization described	1	Yes	No
			than section	501(c)(3) organiza	ations) or in secti	on 527, relating to political			1
	rganization				_				1
a Ti	ransfers fro	m the reporting founda	ition to a nonc	charitable exempt	organization of		-	1	1
(1) Cash						1 <u>a(1</u>	¥	X
(2	?) Other as	sets					1a(2)	X
b O	ther transa	ctions					Ę	1	
(1) Sales of	assets to a noncharital	ble exempt or	ganization			1b(1)L	_X_
(2) Purchas	es of assets from a nor	ncharitable ex	empt organization	1		1b(2)	X
(3) Rental o	f facilities, equipment, o	or other asset	s			1b(3		X
(4	I) Reimbur	sement arrangements					1b(4		Х
		loan guarantees					1b(5		X
_	-	ance of services or mer	mbership or fi	indraising solicitat	tions		1b(6		X
•	-	cilities, equipment, mai					1c	4	X
	-		_			(b) should always show the fair		ا ا	
		<u>₹</u>	•	_		e foundation received less than fa			
						e goods, other assets, or service			
	Line no	(b) Amount involved		e of noncharitable exem			transactions, and sharing arranger	nente.	
	Citie 110	(b) Amount involved	(c) (tallie	of Horizinatidale exert	ipi organization	(a) Description of translets,	transactions, and sharing attaciger	161113	
N/A									
			<u> </u>						
									
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				· <u> </u>					
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			l						
		,			_				
de	escribed in "Yes," com	ation directly or indirectly section 501(c) of the C uplete the following sch	ode (other th	an section 501(c)((3)) or in section (Y	es X	No
		a) Name of organization		(b) Type of c	organization	(c) Descr	ription of relationship		
N/	A								
	T			4.0					
						dules and statements, and to the best of hich preparer has any knowledge	May the IRS discuss this	return	
Sign	Į						with the preparer shown		, I
Here		11-1	•			,	(see instructions)?	Yes	No
		SARI	_		111	115-116 N PRES	SIDENT		
	Signa	ture of officer or trustee			Date	Title	JIDUNI		
	' 				1 8				
	Print/fy	pe preparer's name			Preparer's signatu	ਖ	Date	Check	
Paid	GT: 3 CT	EC & MODELCON	I CDZ		CHARLES &	MODDICON CD3	100/05/05	self-emp	oloyed
Prepare	er	ES A MORRISON		DIGON CT		MORRISON CPA	11/15/16		
Use On	Firm's n		LES MOR	RISON, CF	<u>A</u>		PTIN P0055	1129	
	Firm's a		X 3457	0505			Firm's EIN	4 -	
		RENO,	NV 8	9505			Phone no 775-32		
							Form 9	90-PF	(2015)

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26-0429845

Federal Statements

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

SUBMIT LETTER OF INQUIRY FOR APPLICATION PACKET

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NONE

Statement 3 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

AWARDS LIMITED TO EDUCATION, LIBRARIES, ARTS, COMMUNITY SERVICE, DISASTER RELIEF, RELIEF FOR VICTIMS OF DISEASE

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

Employer identification number

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

2015

BUSH HODGES FA	MILY FOUNDATION	26-0429845					
Organization type (check one)	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	$\overline{[X]}$ 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Instructions General Rule	(8), or (10) organization can check boxes for both the General Rule and a Special Rule Se						
General Rule	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000						
	operty) from any one contributor. Complete Parts I and II. See instructions for determining						
Special Rules							
regulations under section 13, 16a, or 16b, and that	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the section 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, at received from any one contributor, during the year, total contributions of the greater of (1) amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and	line					
contributor, during the y	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any on ear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III	e -					
contributor, during the y contributions totaled mo during the year for an e	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any onear, contributions exclusively for religious, charitable, etc., purposes, but no such are than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the contribution because it received nonexclusively religious, charitable, etc., contributions.						
totaling \$5,000 or more	during the year	▶ \$					
990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file Schedule B (Form answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-lertify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-	EZ or on its					

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

Name of organization

BUSH HODGES FAMILY FOUNDATION

Employer identification number 26-0429845

Part I	Contributors (see instructions) Use duplicate	copies of Part I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD AND NANCY HODGES 2540 ROCKVIEW DR RENO NV 895	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT AND DERISEE BUSH 425 LOVITT LANE RENO NV 895	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)