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DLN: 93491214005216

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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 instructions is at $\underline{www.irs.gov/form990pf}$.

Open to Public Inspection

For	calen	ndar year 2015, or tax y	, and ending 1	nd ending 12-31-2015								
	e of foun				A Employer ide	A Employer identification number						
RU	Y AND IL	DA EAGLE FOUNDATION			26-2505029							
Num	ber and s	street (or P O box number if mail is	not delivered to street address)	Room/suite	B Telephone nun	nber (see instruction	s)					
PO	BOX 221	0			(805) 741-7770	(805) 741-7770						
	or town, POC, CA	state or province, country, and ZIP of 93438	r foreign postal code	- L	C If exemption	C If exemption application is pending, check here						
G Ch	neck all	that apply Initial return	Initial return of a fo	ormer public charity	D 1. Foreign or	ganizations, check h	ere 🕨 🗀					
		Final return ✓ Address chang	Amended return ge Name change		2. Foreign or test, check	ganizations meeting k here and attach co	the 85%					
		pe of organization				ndation status was to 507(b)(1)(A), chec						
		t value of all assets at end	JAccounting method		F If the founda	tion is in a 60-mont	h termination					
ofy	ear (fr	om Part II, col. (c), \$ 15,261,650	Other (specify)	be on cash basıs.)	•	n 507(b)(1)(B), chec	. –					
Pa	rt I	Analysis of Revenue a (The total of amounts in columns (necessarily equal the amounts in c instructions))	(b), (c), and (d) may not	Revenue and expenses per (a) books	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)					
	1	Contributions, gifts, grants, e	tc , received (attach									
		schedule)										
	2	Check $\blacktriangleright \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	is not required to attach									
		Sch B										
	3	Interest on savings and temp	oorary cash investments	36	36							
	4	Dividends and interest from s		343,097	343,097							
	5a	Gross rents										
	Ь	Net rental income or (loss)		1,024,335								
¥	6a	Net gain or (loss) from sale o		1,024,535								
Revenue	Ь	Gross sales price for all asse 6,641,202	ets on line 6a									
	7	Capital gain net income (from	n Part IV, line 2)		1,024,335							
	8	Net short-term capital gain .										
	9	Income modifications										
	10a	Gross sales less returns and allowances										
	b	Less Cost of goods sold.										
	С	Gross profit or (loss) (attach										
	11	Other income (attach schedu										
	12	Total.Add lines 1 through 11		1,367,468	1,367,468							
	13	Compensation of officers, dir		164,555	47,845		116,710					
	14	Other employee salaries and Pension plans, employee ben	_									
Š	15 16a	Legal fees (attach schedule).		% 330	165		165					
Expenses	b	Accounting fees (attach sche		95 11,781	5,891		5,890					
EX	_	Other professional fees (atta		169,365	169,365		0					
	с 17	Interest		103,303	105,303							
rat	18			% 38,800	11,074		6,565					
₹ -	19	Taxes (attach schedule) (see Depreciation (attach schedul	·	% 5,531	1,106							
를	20	Occupancy		5,537	1,107		4,430					
A	21	Travel, conferences, and mee		357	179		178					
and Administrative	22	Printing and publications	-									
	23	Other expenses (attach sche	edule)	8,431	3,969		4,462					
Operating	24	Total operating and administ	rative expenses.									
ğ		Add lines 13 through 23		404,687	240,701		138,400					
Ō	25	Contributions, gifts, grants p	aıd	566,000			566,000					
	26	Total expenses and disburser	nents.Add lines 24 and	970,687	240,701		704,400					
	27	Subtract line 26 from line 12		370,007	240,701		704,400					
	a	Excess of revenue over exper	nses and disbursements	396,781								
	b	Net investment income (if ne	gatıve, enter -0-)		1,126,767							
	С	Adjusted net income(If negat	ive, enter -0-)									

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book value	(B) Book Value	(c) Full Planket Value
	2	Savings and temporary cash investments	465,028	465,457	465,457
	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			_
	O	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	,	Less allowance for doubtful accounts			
		Inventories for sale or use			
왍	8	Prepaid expenses and deferred charges			
Assets	9	<u> </u>			
4	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	8,240,401	8,505,447	10,051,535
	c	Investments—corporate bonds (attach schedule)	4,584,069	4,511,702	4,444,658
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🕨 299,991			
		Less accumulated depreciation (attach schedule) ► 5,723	90,595	294,268	300,000
	15	Other assets (describe)			_
	16	Total assets(to be completed by all filers—see the			
		instructions Also, see page 1, item I)	13,380,093	13,776,874	15,261,650
	17	Accounts payable and accrued expenses			
	18	Grants payable			
å.	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
コ	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
φ		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted			
 	25	Temporarily restricted			
	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here			
or F		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	13,380,093	13,776,874	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
Ą	29	Retained earnings, accumulated income, endowment, or other funds	0	0	
Net	30	Total net assets or fund balances(see instructions)	13,380,093	13,776,874	
2	31	Total liabilities and net assets/fund balances(see instructions)	13,380,093	13,776,874	
Da	rt III	<u> </u>	, ,		
1	TT	Total net assets or fund balances at beginning of year—Part II, column (a) line 30 (must ac	ree	
_		with end-of-year figure reported on prior year's return)			13,380,093
2		Enter amount from Part I, line 27a		<u> </u>	396,781
3		Other increases not included in line 2 (itemize)		3	3,70,701
4		Add lines 1, 2, and 3		_	13,776,874
5		Decreases not included in line 2 (itemize)		5	13,7,0,074
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa			13,776,874

Part IV Capital Gains and Losses for Tax on Investment Income

		ınd(s) of property sold (e g , re e, or common stock, 200 shs	How acquired P—Purchase (b) D—Donation	Date acquired	Date sold (d) (mo , day, yr)	
1 a	WELLS FARGO			P	2014-01-01	2015-12-31
b	SALE OF PROPERTY			Р	2012-05-07	2015-12-31
d				1		
		Depreciation allowe	d Cos	t or other basis	Gau	n or (loss)
(e	e) Gross sales price	(f) (or allowable)		expense of sale		(f) minus (g)
a	6,448,30	2		5,518,89	7	929,405
b	192,90	0		97,97	0	94,930
С С						
d						
<u>е</u>						
	mplete only for assets shown	ng gain in column (h) and owne	ed by the foundation	n on 12/31/69	Gains (Col	(h) gain minus
		A djusted basis		cess of col (ı)	col (k), but no	ot less than -0-) or
(i)	FMV as of 12/31/69	(j) as of 12/31/69	(k) ove	rcol (j), ıfany	(I) Losses	(from col (h))
a						929,405
b						94,930
С						
d						
е						
2 3 Part	If gain, also enter in Part I in Part I, line 8	(net capital loss) { n or (loss) as defined in section, line 8, column (c) (see instruction) { r Section 4940(e) for R	ctions) If (loss), e	nter -0 -	2 3	1,024,335
(For opt		e foundations subject to the se				
		tion 4942 tax on the distributa ilify under section 4940(e) Do			erıod?	┌ Yes ┌ No
1 En	ter the appropriate amount in	each column for each year, so	ee instructions befo	ore making any ent	ries	
	(a) period years Calendar or tax year beginning in)	(b) djusted qualifying distributions	(c) Net value of noncha	ritable-use assets	(d) Distributio (col (b) divide	on ratio
	2014	869,797		16,042,825		0 054217
	2013	773,881		15,089,973		0 051284
	2012	837,981		14,059,683		0 059602
	2011	524,699		14,085,369		0 037251
	2010	850,720		13,414,076		0 063420
2				<u> </u>	2	0 265774
3	the number of years the fo	for the 5-year base period—div undation has been in existence	e ıf less than 5 yea	rs	3	0 053155
4		haritable-use assets for 2015	•	_	4	15,632,349
5				<u> </u>	5	830,938
6		nt income (1% of Part I, line 2	•	<u> </u>	6	11,268
7	Add lines 5 and 6				7	842,206

the Part VI instructions

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

704,400

ĿĊL	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49		UI 4346—See	paye	10 01	the ms	LIUCLIO	113)		
1a)]						
	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,			ij	1			2.2	2,535	
	here ► Tand enter 1% of Part I, line 27b			٠ ' ا						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	itions e	nter 4% of							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)									
3	Add lines 1 and 2				3			2.7	2,535	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Others	5	4				0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, en	nter - 0		. [5			2.7	2,535	
6	Credits/Payments									
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	21,	000						
b	Exempt foreign organizations—tax withheld at source	6b								
C	Tax paid with application for extension of time to file (Form 8868)	6c	2,0	000						
d	Backup withholding erroneously withheld	6d								
7	Total credits and payments Add lines 6a through 6d				7			2 3	3,000	
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 If Form 2	220 is	attached 🕏		8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .			•	9					
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount	t overp	aid	•	10				465	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	465	Refunded	•	11				0	
Par	t VII-A Statements Regarding Activities									
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislation	or di	d			Yes	No	
	it participate or intervene in any political campaign?			•			1a		No	
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	olitical	purposes (se	e In	struction	ons				
	for definition)?						1b		No	
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	pies of any ma	terial	s					
	published or distributed by the foundation in connection with the activities.									
C	Did the foundation file Form 1120-POL for this year?			•		•	1 c		No	
d	Enter the amount (If any) of tax on political expenditures (section 4955) impos									
	(1) On the foundation \blacktriangleright \$ 0 (2) On foundation managers			0						
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	tical ex	kpenditure tax	ımp	osed					
	on foundation managers \blacktriangleright \$0									
2	Has the foundation engaged in any activities that have not previously been rep	orted t	to the IRS?	•			2		No	
	If "Yes," attach a detailed description of the activities.									
3	Has the foundation made any changes, not previously reported to the IRS, in it	=	_	-		5				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo						3		No	
4a	Did the foundation have unrelated business gross income of \$1,000 or more di						4a	\vdash	No	
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?						4b	\vdash		
5	Was there a liquidation, termination, dissolution, or substantial contraction dur	ring the	e year?	•			5		No	
	If "Yes," attach the statement required by General Instruction T.									
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45) sat	tisfied either							
	By language in the governing instrument, or By state logic lation that effectively amonds the governing instrument so the	2+ 20 m	andatory dire	ction						
	By state legislation that effectively amends the governing instrument so the									
_	that conflict with the state law remain in the governing instrument?						6	Yes		
7	Did the foundation have at least \$5,000 in assets at any time during the year? and Part XV	rit "Yes • •	;," complete Pai	rt 11,	col. (c,	,, 	7	Yes		
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)							
	►CA			_						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF t	to the Attorne	У						
	General (or designate) of each state as required by General Instruction G? If $^\prime$	"No," at	tach explanatio	n.			8b	Yes		
9	Is the foundation claiming status as a private operating foundation within the n	meanin	g of section 49	942(յ)(3)					
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see	ee ınst	ructions for Pa	art X	۱۷)۲					
	If "Yes," complete Part XIV						9		No	
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach	a schedule lıs	tıng	their na	ames				
	and addresses.						10		No	

Pai	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		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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►ROYANDIDAEAGLEFOUNDATION ORG			
14	The books are in care of ►SONYA SCHROEDER Telephone no ►(805))741	-7770	
	Located at ▶PO BOX 2210 LOMPOC CA ZIP+4 ▶93438			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			-
13	and enter the amount of tax-exempt interest received or accrued during the year		- 1	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	1	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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)?			
	(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)			
Ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			110
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
•	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes Vo			
	If "Yes," list the years 🕨 20			
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			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015.)	3b	 	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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	1	No

Pa	rt VII-B	Statements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (Cont	inue	:d)		
5a	During th	e year dıd the foundatıor	рау	or incurany amoun	t to								
	(1) Carry	on propaganda, or other	wise	attempt to influence	e leg	ıslatıon (section 494	45(e)))? [Y	es 🖟	No No			
	(2) Influe	ence the outcome of any	spec	ıfıc publıc election (see	section 4955), or to	carr	у					
	on, dı	rectly or indirectly, any	votei	registration drive?.					'es √	No No			
	(3) Provi	de a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		Γ γ	'es √	- No			
	(4) Provi	de a grant to an organıza	tion	other than a charita	ble,	etc , organization de:	scrib	ed					
	ın sec	ction 4945(d)(4)(A)? (se	e ins	structions)				Г ү	es F	No No			
	(5) Provi	de for any purpose other	thar	religious, charitable	e, sc	ientific, literary, or							
	educa	ational purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.		Г ч	′es 🖟	No No			
ь	If any ans	swerıs "Yes" to 5a(1)–(5), d	id any of the transac	tions	fail to qualify under	the e	exceptions describ	ed ın				
	Regulatio	ns section 53 4945 or i	nac	urrent notice regard	ıng d	lisaster assistance ((see i	nstructions)?			5b		
	O rganıza	tions relying on a curren	t not	ice regarding disast	eras	ssistance check here	e		. ▶[_			
С	_	wer is "Yes" to question											
		use it maintained expend						Г ү	′es 「	- No			
		attach the statement requ											
6a		oundation, during the yea					prem	niums on					
		al benefit contract?		, ,					es F	- No			
b		oundation, during the yea						·			6b	No	
		o 6b, file Form 8870.		•		,							
7a		ne during the tax year, w	as tl	ne foundation a party	/ to a	a prohibited tax shel	ter tr	ansaction? \(\)	es F	- No			
ь		d the foundation receive									7b		
		Information About	Of	ficers, Directors	s, Tı	rustees, Founda	tion	Managers, Hi	ghly	Paid	Employee	s,	
Ра	rt VIII	and Contractors		, 		<u> </u>							
1	List all off	icers, directors, trustees	s, fou	ındation managers a	nd t	heir compensation (see ir	structions).					
				Title, and average	(c)	Compensation(If		(d) Contributions to			Evnana		
	(a) Na	me and address	hours per week			not paid, enter		employee benefit plans			Expense account, (e) other allowances		
			(b)	(b) devoted to position		-0-)		and deferred compensation					
SONY	A SCHROEDE	R	EXE	KEC DIR/TTEE		125,000			0			0	
	30 X 2210		30 0	00									
	IPOC,CA												
	SCHROEDER	₹	4	STEE	31,950		0			0		0	
	BOX 2210 IPOC,CA	02420	5 00	,									
	AN MELERO	73430	TDU	CTEE		7.605							
	30 X 2210		5 00	STEE)	7,605			0				0	
	IPOC,CA	93438											
2	Compensa	tion of five highest-paid	emp	oloyees (other than	thos	e included on line 1–	-see i	nstructions). If no	ne, eı	nter "	NONE."		
		(a)		Title, and aver	ane			Contributions					
Na	me and add	lress of each employee p	aıd	hours per wee		(c) Compensatio	n	employee ber			Expense acco		
	mo	re than \$50,000		(b) devoted to posi	tıon			plans and defe (d) compensation		(e)	other allowand	ces	
NON													
							-+						
										<u> </u>			
Tota	I number o	f other employees paid o	vers	\$50,000				🕨				0	

	(see instructions). If none, enter "NO!	VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	、	
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year Include re rganizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1	duced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2 All other program-related investments See instructions	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2	•	Amount

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	ıs.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	15,327,392
b	A verage of monthly cash balances	1b	485,613
c	Fair market value of all other assets (see instructions)	1c	57,400
d	Total (add lines 1a, b, and c)	1d	15,870,405
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	15,870,405
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	238,056
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	15,632,349
6	Minimum investment return. Enter 5% of line 5	6	781,617
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cercheck here ► and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	781,617
2a	Tax on investment income for 2015 from Part VI, line 5 2a 22,535		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	22,535
3	Distributable amount before adjustments Subtract line 2c from line 1	3	759,082
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	759,082
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	759,082
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	704,400
b	Program-related investments—total from Part IX-B	1b	0
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		
а	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	704,400
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	704,400
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIIII Undistributed Income (see instr	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				759,082
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			48,713	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
C	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e		0		
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 704,400				
	Applied to 2014, but not more than line 2a			48,713	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				655,687
е	Remaining amount distributed out of corpus		<u> </u>		
5	Excess distributions carryover applied to 2015		0		0
	(If an amount appears ın column (d), the same amount must be shown ın column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
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		0		
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions		0		
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see				
	Instructions			0	
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must				103,395
_	be distributed in 2015				103,393
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)		O Company		
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
4.0	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2011 Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				

AND WELFARE

Private Operating Foundations (see instructions and Part VII-A, question 9) 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	
foundation, and the ruling is effective for 2015, enter the date of the ruling	
Tax year Prior 3 years income from Part I or the minimum investment return from Part X for each (a) 2015 (b) 2014 (c) 2013 (d) 2012	
income from Part I or the minimum investment return from Part X for each (a) 2015 (b) 2014 (c) 2013 (d) 2012	
Investment return from Part X for each (a) 2015 (b) 2014 (c) 2013 (d) 2012	
Investment return from Part X for each	(e) Total
year iisted	
85% of line 2a	
Qualifying distributions from Part XII,	
line 4 for each year listed	
A mounts included in line 2c not used	
directly for active conduct of exempt	
Qualifying distributions made directly	
for active conduct of exempt activities Subtract line 2d from line 2c	
Complete 3a, b, or c for the	
alternative test relied upon	
"Assets" alternative test—enter	
(1) Value of all assets	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	
"Endowment" alternative test— enter 2/3	
of minimum investment return shown in	
Part X, line 6 for each year listed	
"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(1)(3)(B)(III)	
(3) Largest amount of support	
from an exempt organization	
(4) Gross investment income	
art XV Supplementary Information (Complete this part only if the organization had \$5,000 or assets at any time during the year—see instructions.)	more in
Information Regarding Foundation Managers:	
List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation	tion
before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
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	
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	
The name, address, and telephone number or e-mail address of the person to whom applications should be addressed	
SONYA SCHROEDER	
PO BOX 2210 LOMPOC,CA 93438	
(805) 741-7770	
The form in which applications should be submitted and information and materials they should include	
COMPLETE APPLICATION, AVAILABLE ON WEBSITE, AND ALL REQUIRED ATTACHMENTS	
Any submission deadlines	
SEPTEMBER 15TH	
Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	
THE PURPOSE AND ACTIVITIES OF THE FOUNDATION ARE TO SEEK OUT AND PROVIDE FUNDING TO CHARITA	
GOVERNMENTAL ORGANIZATIONS THAT PROVIDE SERVICES TO ENCOURAGE AND STRENGTHEN THE FAMILY WELL AS PROVIDE CARE AND PROTECTION FOR DOMESTIC ANIMALS AND INDIGENOUS WILDLIFE THE TYPES	
ORGANIZATIONS THAT MEET THE PURPOSE OF THE FOUNDATION INCLUDE BUT ARE NOT LIMITED TO THOSE	
PROVIDE EDUCATIONAL OPPORTUNITIES, MEET EMERGENCY NEEDS, PROMOTE CHARACTER DEVELOPMENT	AND SELF
RELIANCE, PROVIDE MEDICAL ASSISTANCE TO THOSE WITHOUT SUFFICIENT RESOURCES, AND ORGANIZATI	
PROVIDE FOR THE PROTECTION OF ANIMALS IN THEIR COMMUNITY CONSIDERATION IS GIVEN TO ORGANIZ PRIMARILY IN SANTA BARBARA COUNTY WITH AN EMPHASIS TO ORGANIZATIONS IN THE NORTH SANTA BAR	

COUNTY REGION WITH THE FOLLOWING CHARITABLE PURPOSES EDUCATIONAL OPPORTUNITIES, SUPPORT TO ABUSED WOMEN AND CHILDREN/VIOLENCE PREVENTION, HEALTH CARE SERVICES, CRITICAL NEEDS AND ANIMAL PROTECTION

Form **990-PF** (2015)

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 566,000 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page 12		
Enter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt		
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)		
a					mstractions y		
b							
d							
e							
f g Fees and contracts from government agencies							
2 Membership dues and assessments3 Interest on savings and temporary cash investments			14	36			
4 Dividends and interest from securities			14	343,097			
Net rental income or (loss) from real estatea Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal property							
7 Other investment income			10	4 024 225			
9 Net income or (loss) from special events			18	1,024,335			
10 Gross profit or (loss) from sales of inventory							
11 Other revenue a							
c							
d							
e 12 Subtotal Add columns (b), (d), and (e)		0		1,367,468	0		
13 Total. Add line 12, columns (b), (d), and (e)			1	13			
(See worksheet in line 13 instructions to verify of Part XVI-B Relationship of Activities to		plishment of E	xempt Purpos	es			
Line No. Explain below how each activity for whithe accomplishment of the foundation's instructions)	ich income is re	ported ın column ((e) of Part XVI-A c	ontributed importa			

Part XVII	Information Re Noncharitable					action	s and I	Relations	hips	With			
	rganization directly or ii	ndırectly e	engage	ın any of t	he following wit							Yes	No
organızat	ions?												
a Transfers	from the reporting four	idation to	a noncl	harıtable e	exempt organiza	ition of							
(1) Cash	1										1a(1)		No
(2) Othe	erassets										1a(2)		No
b O ther tra	nsactions												
(1) Sale	s of assets to a noncha	rıtable exe	empt or	ganızatıor	1						1b(1)		No
(2) Purc	hases of assets from a	noncharit	able ex	empt orga	inization						1b(2)		No
(3) Rent	al of facilities, equipme	nt, or othe	rasset	s							1b(3)		No
(4) Reim	nbursement arrangemen	ts									1b(4)		No
(5) Loan	s or loan guarantees.										1b(5)		No
(6) Perfor	mance of services or m	embership	or fun	draising s	olicitations						1b(6)		No
c Sharing o	of facilities, equipment, i	maılıng lıs	ts, oth	er assets,	or paid employ	ees					1 c		No
of the god in any tra	swer to any of the above ods, other assets, or se insaction or sharing arr	rvices giv angement	en by tl , show i	he reportii n column	ng foundation I (d) the value of	f the four the goo	ndation r ds, other	received les r assets, or	s than servic	fair mark es receive	et value ed		
(a) Line No	(b) Amount involved	(c) Name	of nonch	aritable exe	mpt organization	(a) L	escription	of transfers, t	ansacti	ons, and sha	aring arra	ngemer	its
described	undation directly or inding in section 501(c) of the complete the following to the complete the following (a) Name of organization	ne Code (d schedule		an sectior		ın sectio				tion of relati		s 🔽	No
Sign Here	der penalties of perjury, best of my knowledge a rmation of which prepar ****** Signature of officer or t	nd belief, er has any	ıt ıs tru	ie, correct		Declara				May t return with t below	r) is bas he IRS di he prepa	sed on scuss th	all us vn
						Date		Check if s	elf-	PTIN			_
	Print/Type preparer's CATHERINE MACAULAY	name	Prepa	rer's Sıgn	ature			employed			001787	96	
Paid Preparer Use		GHTINGA	LE			•		Firm's EIN	l ⊫ 77	7-007664	7		
Only	Firm's address ► 200 EAST CARRILLO SANTA BARBARA, CA		SUITE	303				Phone no	(805) 963-18:	37		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
•	or substantial contributor			
a Paid during the year				
ALZHEIMER'S ASSOCIATION 1528 CHAPALA ST SANTA BARBARA,CA 93101	NONE	PC	ELDERLY SUPPORT SERVICES	10,000
ANGELS FOSTER CARE OF SANTA BARBARA 3905 STATE STREET SANTA BARBARA,CA 93105	NONE	PC	YOUTH SUPPORT SERVICES	20,000
ANIMAL SHELTER ASSISTANCE PROGRAM 5473 OVERPASS ROAD SANTA BARBARA,CA 93111	NONE	PC	ANIMAL WELFARE	6,000
CARE 4 PAWS PO BOX 60524 SANTA BARBARA,CA 93160	NONE	PC	ANIMAL WELFARE	10,000
CASA 118 EAST FIGUEROA STREET SANTA BARBARA,CA 93101	NONE	PC	YOUTH SUPPORT SERVICES	30,000
CASA SERENA 1515 BATH STREET SANTA BARBARA,CA 93101	NONE	PC	RECOVERY SUPPORT SERVICES	24,000
CUYAMA VALLEY FAMILY RESOURCE CENTER 4689 HIGHWAY 166 UNIT B NEW CUYAMA,CA 93254	NONE	PC	FAMILY SUPPORT SERVICES	15,000
DOMESTIC VIOLENCE SOLUTIONS PO BOX 1530 SANTA BARBARA,CA 93102	NONE	PC	FAMILY SUPPORT SERVICES	30,000
DOS PUEBLOS ENGINEERING ACADEMY FOUNDATION PO BOX 313 GOLETA,CA 93116	NONE	PC	EDUCATION	4,000
FAMILY SERVICE AGENCY 123 W GUTIERREZ ST SANTA BARBARA,CA 93101	NONE	PC	FAMILY SUPPORT SERVICES	60,000
FOODBANK OF SANTA BARBARA COUNTY 4554 HOLLISTER AVE SANTA BARBARA,CA 93110	NONE	PC	FAMILY SUPPORT SERVICES	20,000
MOUNTAIN VIEW SCHOOL FOUNDATION 5465 QUEEN ANN LN SANTA BARBARA,CA 93111	NONE	PC	EDUCATION	5,000
NEW HOUSE SANTA BARBARA 227 W HALEY ST SANTA BARBARA,CA 93101	NONE	PC	RECOVERY SUPPORT SERVICES	10,000
NORTH COUNTY RAPE CRISIS & CHILD PROTECTION CENTER PO BOX 148 LOMPOC,CA 93438	NONE	PC	FAMILY SUPPORT SERVICES	25,000
ORCUTT AREA SENIORS CENTER (OASIS SENIOR CENTER) PO BOX 2637 ORCUTT,CA 93457	NONE	PC	ELDERLY SUPPORT SERVICES	10,000
Total			▶ 3a	566,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

			are rear or Approved for i	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (nome or pusiness)	or substantial contributor	'		
a Paid during the year				
PATHPOINT 315 W HALEY STREET SUITE 102 SANTA BARBARA,CA 93101	NONE	PC	COMMUNITY SUPPORT SERVICES	25,000
SANTA BARBARA PARTNERS IN EDUCATION 3970 LA COLINA ROAD SUITE 9 SANTA BARBARA,CA 93110	NONE	PC	EDUCATION	15,000
SANTA MARIA DISCOVERY MUSEUM 702 S MCCLELLAND ST SANTA MARIA,CA 93454	NONE	PC	EDUCATION	10,000
SANTA MARIA HUMANE SOCIETY 1687 W STOWELL ROAD SANTA MARIA,CA 93458	NONE	PC	ANIMAL WELFARE	2,000
SANTA MARIA VALLEY YMCA 3400 SKYWAY DRIVE SANTA MARIA,CA 93455	NONE	PC	YOUTH SPORTS	20,000
SANTA YNEZ PEOPLE HELPING PEOPLE 545 NORTH ALISAL RD STE 202 SOLVANG,CA 93463	NONE	PC	COMMUNITY SUPPORT SERVICES	35,000
SUSAN G KOMEN FOR THE CURE PO BOX 650309 DALLAS,TX 75265	NONE	PC	HEALTH	1,000
TEDDY BEAR CANCER FOUNDATION 2320 BATH ST SANTA BARBARA,CA 93105	NONE	PC	YOUTH SUPPORT SERVICES	35,000
TEHACHAPI MOUNTAIN RODEO ASSOCIATION PO BOX 63 TECHACHAPI,CA 93581	NONE	PC	YOUTH SPORTS	5,000
UNITED BOY'S & GIRLS 901 NORTH RAILROAD AVENUE SANTA MARIA,CA 93458	NONE	PC	YOUTH SUPPORT SERVICES	40,000
VALLEY HAVEN 1825 ALAMO PINTADO ROAD SOLVANG,CA 93463	NONE	PC	ELDERLY SUPPORT SERVICES	20,000
WOUNDED HEROES FUND 161 N CLARK STREET SUITE 4200 CHICAGO,IL 60601	NONE	PC	VETERAN SUPPORT SERVICES	2,000
DAWG 5480 OVERPASS ROAD SANTA BARBARA,CA 93111	NONE	PC	ANIMAL WELFARE	10,000
GUADALUPE KIDS COME FIRST PO BOX 696 GUADALUPE,CA 93434	NONE	PC	YOUTH SUPPORT SERVICES	15,000
CARRILLO COUNSELING SERVICES 324 E CARRILLO ST C SANTA BARBARA,CA 93101	NONE	PC	COMMUNITY SUPPORT SERVICES	7,000
Total			▶ 3a	566,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SANTA MARIA BREAKFAST ROTARY 801 S BROADWAY SANTA MARIA,CA 93454	NONE	PC	COMMUNITY SUPPORT SERVICES	13,000
SECOND CHANCE COCKER RESCUE PO BOX 3325 SANTA BARBARA,CA 93130	NONE	PC	ANIMAL WELFARE	5,000
SHADOW'S FUND PO BOX 1472 LOMPOC,CA 93436	NONE	PC	ANIMAL WELFARE	5,000
TRANSITIONS-MENTAL HEALTH ASSOCIATION 784 HIGH STREET SAN LUIS OBISPO,CA 93401	NONE	PC	COMMUNITY SUPPORT SERVICES	10,000
DRESSEMBER FOUNDATION BLYTHE HILL LOS ANGELES, CA 90041	NONE	PC	WOMENS SUPPORT SERVICES	1,000
MANITOU CAMPS FOUNDATION PO BOX 5099 WESTPORT,CT 06881	NONE	PC	YOUTH SUPPORT SERVICES	1,000
PAYETTE LAKES PROGRESSIVE CLUB PO BOX 1446 MCCALL,ID 83638	NONE	PC	WOMENS SUPPORT SERVICES	5,000
DONNELLY BIBLE CHURCH FW GESTRIN ROAD DONNELLY,ID 83615	NONE	PC	COMMUNITY SUPPORT SERVICES	5,000
Total				566,000

TY 2015 Accounting Fees Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	11,781	5,891		5,890

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND	2012-05-07	8,721		L		0	0		
BUILDING	2012-05-07	78,490	5,232	SL	40 000000000000	1,308	0		
COMPUTER EQUIPMENT	2012-07-01	1,983	992	SL	5 000000000000	397	0		
OFFICE REMODEL	2012-07-01	8,133	508	SL	40 000000000000	203	0		
BUILDING	2015-07-14	289,875		SL	40 000000000000	3,623	0		

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TY 2015 Investments Corporate Bonds Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Name of Bond	End of Year Book Value	End of Year Fair Market Value
WELLS FARGO #XX88	2,240,015	2,218,715
WELLS FARGO #XX73	2,271,687	2,225,943

TY 2015 Investments Corporate Stock Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
WELLS FARGO #XX34	435,938	711,614
WELLS FARGO #XX27	404,644	497,369
WELLS FARGO #XX32	670,885	650,344
WELLS FARGO #XX56	1,046,543	1,346,922
WELLS FARGO #XX62	1,357,089	1,347,444
WELLS FARGO #XX68	1,047,275	1,493,162
WELLS FARGO #XX77	881,947	1,007,513
WELLS FARGO #XX81	1,066,807	1,316,966
WELLS FARGO #XX82	1,059,525	976,264
WELLS FARGO #XX50	534,794	703,937

TY 2015 Land, Etc. Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COMPUTER EQUIPMENT	1,983	1,389	594	
OFFICE REMODEL	8,133	711	7,422	
BUILDING	289,875	3,623	286,252	

TY 2015 Legal Fees Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	330	165		165

TY 2015 Other Expenses Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	7,169	3,585		3,584
OUTSIDE CONTRACT SERVICES	438	219		219
INSURANCE	824	165		659

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TY 2015 Other Professional Fees Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WELLS FARGO INVESTMENT MGMT FEES	169,365	169,365		0

TY 2015 Taxes Schedule

Name: ROY AND IDA EAGLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES WITHHELD	8,542	8,542		0
FEDERAL EXCISE TAX	21,161	0		0
FILING FEE	160	0		160
REAL ESTATE TAXES	734	147		587
PAYROLL TAXES	8,203	2,385		5,818