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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 instructions is at www.irs.gov/form990pf.

OMB No 1545-0052
2015
Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation PATIENT ALWAYS FIRST AKA CAUTIOUS PATIENT AKA PATIENT FIRST MEDICINE		A Employer identification number 45-0540334
Number and street (or P O box number if mail is not delivered to street address) 2900 N QUINLAN PARK RD 240/337	Room/suite	B Telephone number (see instructions) (713) 461-2822
City or town, state or province, country, and ZIP or foreign postal code AUSTIN, TX 78732		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 272,943	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
1	Contributions, gifts, grants, etc , received (attach schedule)				
2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	35	35		
4	Dividends and interest from securities				
5a	Gross rents				
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				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)				
12	Total. Add lines 1 through 11	35	35		
13	Compensation of officers, directors, trustees, etc	0	0		0
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule).				
b	Accounting fees (attach schedule).				
c	Other professional fees (attach schedule)	65,063	0		65,063
17	Interest				
18	Taxes (attach schedule) (see instructions)	2	0		0
19	Depreciation (attach schedule) and depletion	124	0		
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule).	392	0		392
24	Total operating and administrative expenses. Add lines 13 through 23	65,581	0		65,455
25	Contributions, gifts, grants paid	0			0
26	Total expenses and disbursements. Add lines 24 and 25	65,581	0		65,455
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	-65,546			
b	Net investment income (if negative, enter -0-)		35		
c	Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	326,204	61,247	61,247
	2 Savings and temporary cash investments	11,488	211,523	211,523
	3 Accounts receivable ▶ _____ 173 Less allowance for doubtful accounts ▶ _____	673	173	173
	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 Land, buildings, and equipment basis ▶ _____ 140,250 Less accumulated depreciation (attach schedule) ▶ 140,250	124	0	0
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	338,489	272,943	272,943	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0	0	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
29 Retained earnings, accumulated income, endowment, or other funds	338,489	272,943		
30 Total net assets or fund balances (see instructions)	338,489	272,943		
31 Total liabilities and net assets/fund balances (see instructions)	338,489	272,943		

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	338,489
2	Enter amount from Part I, line 27a	2	-65,546
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	272,943
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	272,943

Part IV Capital Gains and Losses for Tax on Investment Income

(a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
a			
b			
c			
d			
e			

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
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

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 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	741,198	429,746	1.724735
2013	141,045	75,996	1.855953
2012	334,528	242,945	1.376970
2011	510,109	74,951	6.805900
2010	516,821	80,035	6.457437

2 Total of line 1, column (d).	2	18.220995
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	3.644199
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	283,185
5 Multiply line 4 by line 3.	5	1,031,982
6 Enter 1% of net investment income (1% of Part I, line 27b).	6	0
7 Add lines 5 and 6.	7	1,031,982
8 Enter qualifying distributions from Part XII, line 4.	8	65,455

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 page 18 of the instructions)

Table with 11 rows for excise tax calculation. Includes sub-rows 6a-6d for credits and payments. Total amount owed is 1, and amount overpaid is 0.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Questions cover political activities, unrelated business income, and substantial contributors.

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		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? Website address ►CAUTIOUSPATIENT.ORG	13	Yes	
14 The books are in care of ►CAROLYN OLIVER MD Telephone no ►(713) 461-2822 Located at ►2900 N QUINLAN PARK RD 240/337 AUSTIN TX ZIP+4 ►78732			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	15		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See 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 ►	16	Yes	No

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.

		Yes	No
1a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. ► <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		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)) a 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20___, 20___, 20___, 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). 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___, 20___	2b		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>).	3b		
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		No

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

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

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

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

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

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

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

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

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

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

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No **6b** **No**

If "Yes" to 6b, file Form 8870

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

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **7b**

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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CAROLYN OLIVER MD 2900 N QUINLAN PARK RD 240/337 AUSTIN, TX 78732	EXECUTIVE DIRECTOR 4 00	0	0	0
DAVID P GILL MD 2900 N QUINLAN PARK RD 240/337 AUSTIN, TX 78732	CHAIRMAN OF THE BOARD 0 00	0	0	0
LEONARD HOFFMAN MD 2900 N QUINLAN PARK RD 240/337 AUSTIN, TX 78732	SECRETARY/TREASURER 0 00	0	0	0

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	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000. **0**

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

Part VIII

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
NONE		

Total number of others receiving over \$50,000 for professional services. **0**

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 TO PROVIDE GOOD AFFORDABLE HEALTHCARE FOR PEOPLE WITHOUT INSURANCE TO EMPOWER PATIENTS, INSURED OR UNINSURED, IN GETTING THEIR HEALTHCARE NEEDS MET TO EMPOWER AND EDUCATE PEOPLE WITH CHRONIC ILLNESSES LIKE DIABETES AND BLOOD PRESSURE TO PREVENT COMPLICATIONS FROM THESE DISEASES	65,455
2	
3	
4	

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	
2	
All other program-related investments. See instructions	
3	

Total. Add lines 1 through 3 **0**

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	0
b	Average of monthly cash balances.	1b	287,497
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	287,497
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	287,497
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	4,312
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	283,185
6	Minimum investment return. Enter 5% of line 5.	6	14,159

Part XI Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

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

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	65,455
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		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	65,455
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	65,455

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 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ _____				
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				
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				
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 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				
e Excess from 2015.				

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 organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Table with columns: Tax year, (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 0, 0, 0, 0, 0

b 85% of line 2a

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 0, 0, 0, 0, 0

c Qualifying distributions from Part XII, line 4 for each year listed

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 65,455, 741,198, 141,045, 334,528, 1,282,226

d Amounts included in line 2c not used directly for active conduct of exempt activities

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 0, 0, 0, 0, 0

e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 65,455, 741,198, 141,045, 334,528, 1,282,226

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)

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 272,950, 338,489, 82,154, 123,973, 817,566

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 9,439, 14,325, 2,533, 8,098, 34,395

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)

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 1,000,000, 100,000, 400,000, 1,500,000

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 0, 0, 0, 0, 0

(3) Largest amount of support from an exempt organization

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 0, 0, 0, 0, 0

(4) Gross investment income

Table with columns: (a) 2015, (b) 2014, (c) 2013, (d) 2012, (e) Total. Row 1: 35, 76, 0, 0, 111

Part XV Supplementary Information (Complete this part only if the organization 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)

CAROLYN OLIVER MD

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Total ▶ 3a				0
b <i>Approved for future payment</i>				
Total ▶ 3b				0

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

TY 2015 Depreciation Schedule

Name: PATIENT ALWAYS FIRST AKA CAUTIOUS

PATIENT AKA PATIENT FIRST MEDICINE

EIN: 45-0540334

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
RESCUE CARPET	2004-11-30	338	338	SL	5 000000000000	0	0		
COMPUTER	2007-04-30	4,337	4,337	SL	5 000000000000	0	0		
COMPUTER - WEBSITE SERVERS	2007-10-31	9,073	9,073	SL	5 000000000000	0	0		
COMPUTER - APPLE	2009-11-30	2,164	2,164	SL	5 000000000000	0	0		
COMPUTER	2010-07-31	1,069	945	SL	5 000000000000	124	0		
SOFTWARE - A 4 HEALTH SYSTEM	2004-11-30	2,320	2,320	SL	3 000000000000	0	0		
SOFTWARE - CREDIT CARD MBNA	2004-12-31	304	304	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-01-31	2,503	2,503	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-02-28	7,171	7,171	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-04-30	1,488	1,488	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-05-31	2,436	2,436	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-07-31	3,383	3,383	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-09-30	6,495	6,495	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-10-31	10,000	10,000	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-11-30	16,500	16,500	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2007-12-31	2,700	2,700	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2008-03-31	15,300	15,300	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2008-06-30	3,250	3,250	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2008-07-31	2,700	2,700	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2008-10-31	1,950	1,950	SL	3 000000000000	0	0		

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
SOFTWARE - PAD WEBSITE DEV	2008-12-31	500	500	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-01-31	2,936	2,936	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-01-31	1,745	1,745	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-03-31	1,204	1,204	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-04-30	8,231	8,231	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-06-30	7,320	7,320	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-07-31	4,397	4,397	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-08-31	5,425	5,425	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-10-31	2,827	2,827	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-10-31	3,856	3,856	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2009-11-30	1,745	1,745	SL	3 000000000000	0	0		
SOFTWARE - APPLE	2009-11-30	1,081	1,081	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2010-01-31	2,001	2,001	SL	3 000000000000	0	0		
SOFTWARE - PAD WEBSITE DEV	2010-02-28	1,501	1,501	SL	3 000000000000	0	0		

**TY 2015 Land, Etc.
Schedule**

Name: PATIENT ALWAYS FIRST AKA CAUTIOUS
 PATIENT AKA PATIENT FIRST MEDICINE
EIN: 45-0540334

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
RESCUE CARPET	338	338	0	
COMPUTER	4,337	4,337	0	
COMPUTER - WEBSITE SERVERS	9,073	9,073	0	
COMPUTER - APPLE	2,164	2,164	0	
COMPUTER	1,069	1,069	0	
SOFTWARE - A 4 HEALTH SYSTEM	2,320	2,320	0	
SOFTWARE - CREDIT CARD MBNA	304	304	0	
SOFTWARE - PAD WEBSITE DEV	2,503	2,503	0	
SOFTWARE - PAD WEBSITE DEV	7,171	7,171	0	
SOFTWARE - PAD WEBSITE DEV	1,488	1,488	0	
SOFTWARE - PAD WEBSITE DEV	2,436	2,436	0	
SOFTWARE - PAD WEBSITE DEV	3,383	3,383	0	
SOFTWARE - PAD WEBSITE DEV	6,495	6,495	0	
SOFTWARE - PAD WEBSITE DEV	10,000	10,000	0	
SOFTWARE - PAD WEBSITE DEV	16,500	16,500	0	
SOFTWARE - PAD WEBSITE DEV	2,700	2,700	0	
SOFTWARE - PAD WEBSITE DEV	15,300	15,300	0	
SOFTWARE - PAD WEBSITE DEV	3,250	3,250	0	
SOFTWARE - PAD WEBSITE DEV	2,700	2,700	0	
SOFTWARE - PAD WEBSITE DEV	1,950	1,950	0	
SOFTWARE - PAD WEBSITE DEV	500	500	0	
SOFTWARE - PAD WEBSITE DEV	2,936	2,936	0	
SOFTWARE - PAD WEBSITE DEV	1,745	1,745	0	
SOFTWARE - PAD WEBSITE DEV	1,204	1,204	0	
SOFTWARE - PAD WEBSITE DEV	8,231	8,231	0	
SOFTWARE - PAD WEBSITE DEV	7,320	7,320	0	
SOFTWARE - PAD WEBSITE DEV	4,397	4,397	0	
SOFTWARE - PAD WEBSITE DEV	5,425	5,425	0	
SOFTWARE - PAD WEBSITE DEV	2,827	2,827	0	
SOFTWARE - PAD WEBSITE DEV	3,856	3,856	0	

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
SOFTWARE - PAD WEBSITE DEV	1,745	1,745	0	
SOFTWARE - APPLE	1,081	1,081	0	
SOFTWARE - PAD WEBSITE DEV	2,001	2,001	0	
SOFTWARE - PAD WEBSITE DEV	1,501	1,501	0	

TY 2015 Other Expenses Schedule

Name: PATIENT ALWAYS FIRST AKA CAUTIOUS
PATIENT AKA PATIENT FIRST MEDICINE

EIN: 45-0540334

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS EXPENSE	392	0		392

TY 2015 Other Professional Fees Schedule

Name: PATIENT ALWAYS FIRST AKA CAUTIOUS
PATIENT AKA PATIENT FIRST MEDICINE

EIN: 45-0540334

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONSULTING FEES	61,297	0		61,297
ADMINISTRATIVE FEES	3,766	0		3,766

TY 2015 Taxes Schedule

Name: PATIENT ALWAYS FIRST AKA CAUTIOUS
PATIENT AKA PATIENT FIRST MEDICINE

EIN: 45-0540334

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES	2	0		0