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Form **990-PF**

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Depart	tment	of the Treasury	_	D 1	Do not enter	social se	curity numbers or	n this form as	it may be ma	iae public.	990nf	LU	10
Interna	i Rev	enue Service			on about For	m 990-P	F and its separate	and e		.gov/ioiii	330p1.	Open to Public I	nspection
		dar year 2015 (or tax year	beginning				, and c	ilulily	A Employ	er identification	number	
nam	ie oi	foundation								Lilipioy	er ruentineation	number	
S	Δ	ZUBER	FOIND	ATTON	ſ					46-	2427309		
		nd street (or P O b				address)			Room/suite	B Telepho			
7	06	E 20TH	ST							307	-634-89	53	
		wn, state or pr		ntry, and ZI	P or foreign p	ostal co	de		<u>, </u>	C If exempt	on application is pe	ending, check here	
		YENNE,		2001						_			
G C	heck	all that apply.		Initial retur	n		Initial return of a f	ormer public	charity	D 1. Forei	gn organizations	, check here	
				Fınal returr	1		Amended return			2 Fores	n organizations mor	ating the 85% test	
			<u>-</u>	Address ch			Name change			check	n organizations med here and attach cor	mputation	
H C	_	type of organiz					ivate foundation					us was terminate	d
<u> </u>		ction 4947(a)(1					xable private found			_ under s	ection 507(b)(1)	(A), check here	
		rket value of all		nd of year	J Account	-		Acc	rual			0-month termina	ition
		Part II, col (c),		070	1	ther (spe	must be on cash	hasis)		under s	ection 507(b)(1)	(B), cneck nere	
Po	<u>₃</u> rt l	Analysis of R		,878.	1:	1		T		(5) (4)	duuotad nat	(d) Disburser	ments
ra	<u> </u>	(The total of ame necessarily equ	ounts in colun	nns (b), (c), ar	nd (d) may not		Revenue and enses per books		nvestment :ome		djusted net ncome	for charitable pu	urposes
	1	Contributions,				 	5,673.			N	/A	(545)1 545/5	
	2		if the foundation				3,0,0,			_ _	7.5		
	3	Interest on saving	gs and tempo	•			· · · · · · · · · · · · · · · · · · ·		····		,		
	4	Dividends and		m securitie	S		1,037.		1,037.			STATEMEN	<u> 1 </u>
	5a	Gross rents											
	b	Net rental income	or (loss)										
ابه	6a	Net gain or (lors)	from sale of a	assets not on	line 10		1,475.						
Revenue	b	Gross sales price assets on line 6a	for all	66	, <u>204.</u>							-	
ě	7	Capital gain net i	ncome (from F	Part IV line 2)	ı				1,475.	ļ	THU.	EIVED	
-	8	Net short-term	capital gair	n		ļ		 		ļI	700		70 -
	9	Income modifi Gross sales le is						<u> </u>			MAR MAR	₹ 1 2016	
		and allowances	-					 				≥ # C010	(O)
ļ		Less Cost of goo	-			 				1	OGD	- 01 10-	<u> 쨘 </u>
		Gross profit or	(loss)			-				 		EN, UT	
	11 12	Other income Total Add line	se 1 through	h 11			8,185.		2,512.				
	13	Compensation o			s atc	†	0,103.		0.				0.
	14	Other employe			0, 0.0			<u> </u>	., <u></u>			-	<u></u>
		Pension plans		-			·····						
્રિક્ટ Ses		Legal fees									,		
GG V CENTING VOS Administrative Expenses		Accounting fee	es										
≽ ⊈ Ext	С	Other professi	onal fees	នា	MT 2		971.		971.				0.
GG V CENTRACES Administrative Expense	17	Interest								ļ			
਼ੁਰੂ trat	18	Taxes								ļ			
J P	19	Depreciation a	nd depletio	ก				ļ	······		 		
dmi dmi	20	Occupancy											
∌ da	1	Travel, confere		meetings		-			····				
ູ ຕ	í	Printing and o		O.	nwm 2		58.	 	58.	-			
_	23	Other expense			TMT 3		58.	'	58.				0.
ଅନ୍ତର peratir	24	Total operation					1,029		1,029				0.
ီ ဝီ	25	Contributions,					3,250		<u> </u>	<u> </u>		3	,250.
	t t	Total expense					5,250						<u>, </u>
	-"	Add lines 24 a					4,279.		1,029	.]		3	,250.
	27	Subtract line 2		12:	····	1	· · · · · · · · · · · · · · · · · · ·						
	l	Excess of revenu			ursements		3,906.						
	l	Net investme							1,483.				
	C	Adjusted net	income (if ne	egative, enter	-0-)					1	I/A		

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions

P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
_	ai L	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	3,281.	7,178.	7,178.
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
	1	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons			
	,	Other notes and loans receivable			
	1	Less: allowance for doubtful accounts			
	١.				
ets	0	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
`	1	Investments U.S. and state government obligations	62 601	62 700	<u> </u>
	1	Investments - corporate stock STMT 4	62,691.	62,700.	62,700.
	1	Investments -, corporate bonds			
	11	Investments - land buildings and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated repreciation			
	15	Other assets (describe ►)			
	16	Total assets to be completed by all filers - see the			
		Instructions. Also, see page 1, item I)	65,972.	69,878.	69,878.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ā</u>	21	Mortgages and other notes payable			
Ë	1	Other liabilities (describe)	-		
	122	Other habilities (describe			
	22	Total liabilities (add lines 17 through 22)	0.	0.	
_	23				
Ś	 	and complete lines 24 through 26 and lines 30 and 31	65 072	60 070	
2		Unrestricted	65,972.	69,878.	
ā	25	Temporarily restricted			
æ	26	Permanently restricted			
Ĕ	1	Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds			
se	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
ĕ	29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets or Fund Balances	30	Total net assets or fund balances	65,972.	69,878.	
		'			
_	31	Total liabilities and net assets/fund balances	65,972.	69,878.	
F	art	III Analysis of Changes in Net Assets or Fund B	alances		
_					
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	65,972.
		r amount from Part I, line 27a		2	3,906.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	69,878.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	Inet assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		69,878.
					Form 990-PF (2015)

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3,250.

8 Enter qualifying distributions from Part XII, line 4

See 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.

	990-PF (2015) S A ZUBER FOUNDATION rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or		- <u>242</u>		ctio	Page 4
		1540	T 300	1150 0	Ctioi	13)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
L	Date of ruling or determination letter (attach copy of letter if necessary-see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1				15.
			 			13.
	of Part I, line 27b	-				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	2				0.
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	1			-	$\frac{0.}{15.}$
	Add lines 1 and 2	3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	5	-			$\frac{0.}{15.}$
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	3				1).
	Credits/Payments:	-				
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6b	\dashv				
	Exempt foreign organizations - tax withheld at source 6b	-				
	Tax paid with application for extension of time to file (Form 8868) 6c	-				
	Backup withholding erroneously withheld This work and assessed Add least Control of the control	- ,				Λ
	Total credits and payments. Add lines 6a through 6d	7	-			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	+			1 5
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				<u> 15.</u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	-			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
	rt VII-A Statements Regarding Activities			 _	Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in		-	162	
	any political campaign?			1a		X
Đ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition			1b_		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or		1 1		
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c		<u>X</u> _
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ► \$ 0 . (2) On foundation managers. ► \$ 0	•				1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
_	managers. ► \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2_		X
_	If "Yes," attach a detailed description of the activities					
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			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	1	N/A	4b		37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	ate law				17
_	remain in the governing instrument?			6	77	X
1	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 2	KV		7	X	
_	The state of the s					
ъa	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE					
	Kith and Market has 7 health found to the shadow of Fee 200 OF to the Attention Country of the state of the s					
0	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				7.7	
	of each state as required by General Instruction G? If "No," attach explanation	.la		8b	X	 -
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for consequence 2015, as the total black as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for consequence 2015, as the total black as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for consequence 2015, as the total black as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for consequence 2015, as the total black as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for consequence 2015, as the total black as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for consequence 2015, as the total black as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for consequence 2015, as the total black as a private operation of the private private operation operation of the private operation opera	nendar		_		\ .
40	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	CITIVE	m E	9	v	<u>X</u>
ΙU	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	STM'		10 orm 99 0	X)-DF	(2015)
			ru	ハロ ラブ	/"I"I"	(2013)

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78	Int VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			v
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	12		х
	If "Yes," attach statement (see instructions)	13	х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	10	- 21	
	Website address \blacktriangleright N/A The books are in care of \blacktriangleright THE FOUNDATION Telephone no. \blacktriangleright 307-63	14-8	953	
14	Located at ▶ 706 E 20TH ST, CHEYENNE, WY ZIP+4 ▶82			
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	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art 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.	<u></u>	Yes	No
18	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?			
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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.)			
ı	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4.		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b		
	Organizations relving on a current notice regarding disaster assistance check here 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		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		
_	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?			
	If "Yes," list the years ▶ ,,,,			
Į	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.) N/A	2b		
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
- {	o 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) N/A	3b_	ļ	<u> </u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			v
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b) DE	(2015)
	to the state of the	rm 99 0	ノーアト	(2015)

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:			[
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire			
any voter registration drive?	•		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizati	on described in section			
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or			
the prevention of cruelty to children or animals?			s X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	nder the exceptions described	in Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instr				5b
Organizations relying on a current notice regarding disaster assistance check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption				
expenditure responsibility for the grant?		I∕A ∟ Ye	s No	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax] Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrit				7b
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	inagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their		T	L (1) C	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
STEWART A. ZUBER	PRESIDENT			
706 E 20TH STREET				
CHEYENNE, WY 82001	0.50	0.	0.	0.
MATTHEW T. ZUBER	VICE PRESIDEN	ψr		
1721 SOMMERVILLEE DRIVE				
FORT COLLINS, CO 80526	0.50	0.	0.	0.
ELENORA K. ZUBER	_SECRETARY/TRE	ASURER		
2522 BENT AVENUE				
CHEYENNE, WY 82001	0.50	0.	0.	0.
WAYNE R. ZUBER	_ASSISTANT TRE	ASURER		
3381 SATTAI STREET				
TEMECULA, CA 92592	0.50	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(4)	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				j
Tatal number of other employees and over \$50,000				

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-pard independent contractors for professional services. If none, enter	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant stationumber of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year of	n lines 1 and 2	Amount
1 N/A	THIO TANGE	7 WIODIN
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<u></u>	0.

46-2427309 Page 8 S A ZUBER FOUNDATION Form 990-PF (2015) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 61,693. 1a Average monthly fair market value of securities 5,230. 1b Average of monthly cash balances 1¢ c Fair market value of all other assets 66,923. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 66,923. 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 1,004. 4 65,919. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 3,296. 6 Minimum investment return Enter 5% of line 5 Part XI | Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 3,296. Minimum investment return from Part X, line 6 15. 2a Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) b 2c Add lines 2a and 2b 3,281. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 4 Recoveries of amounts treated as qualifying distributions 3,281. 5 Add lines 3 and 4 0. 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 281 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 3,250. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the 3a Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 3ь 3,250. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

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3,235.

6

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

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
Distributable amount for 2015 from Part XI, line 7				3,281.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			3,220.	<u> </u>
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: \triangleright \$ 3, 250.				
a Applied to 2014, but not more than line 2a			3,220.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				30.
e Remaining amount distributed out of corpus	0.	-		
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c and 4e Subtract line 5	0.			
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.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				<u>3,251.</u>
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)	0.			
8 Excess distributions carryover from 2010	0			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016	0			
Subtract lines 7 and 8 from line 6a	0.			
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				
6 E A 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6				Form 990-PF (2015)

Form 990-PF (2015) S A ZUB		46-2427309 Page 10				
Part XIV Private Operating F	oundations (see in:	structions and Part V	II-A, question 9)	N/A		
1 a If the foundation has received a ruling of						
foundation, and the ruling is effective for			▶ ∟			
b Check box to indicate whether the found	ation is a private operatir	ng foundation described		4942(j)(3) or 4	1942(j)(5)	
2 a 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						
b 85% of line 2a						
c 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						
e Qualifying distributions made directly						
for active conduct of exempt activities.						
Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the						
alternative test relied upon. a "Assets" alternative test - enter:						
(1) Value of all assets		l 1				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	1					
b "Endowment" alternative test - enter 2/3 of minimum investment return						
shown in Part X, line 6 for each year listed						
c "Support" alternative test - enter						
(1) Total support other than gross						
investment income (interest,						
dividends, rents, payments on securities loans (section						
512(a)(5)), or royalties)						
(2) Support from general public						
and 5 or more exempt organizations as provided in						
section 4942(j)(3)(B)(iii)						
(3) Largest amount of support from						
an exempt o ganization						
(4) Gross investment income						
Part XV Supplementary Info			if the foundation	on had \$5,000 or m	nore in assets	
at any time during t	he year-see inst	ructions.)				
1 Information Regarding Foundation	n Managers:					
a List any managers of the foundation wh year (but only if they have contributed n			ntributions received by t	he foundation before the c	ose of any tax	
STEWART A. ZUBER						
b List any managers of the foundation wh			ı (or an equally large po	rtion of the ownership of a	partnership or	
other entity) of which the foundation ha	s a 10% or greater intere	st.				
NONE						
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., F	Programs:			
Check here ► ☐ If the foundation of						
the foundation makes gifts, grants, etc. a The name, address, and telephone num	`				10 0.	
CEE CHAMENEN C		,				
SEE STATEMENT 6 b The form in which applications should to	e submitted and informa	tion and materials they	should include	-·····································	_	
c Any submission deadlines:		<u></u>				
d Any restrictions or limiteties as a six-	o cuph as hy assessed	ni arang abaritahla ficili	e kinde of institutions	or other factors:		
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitadie field	s, kinus oi ilisulutions, (or other factors.		

3 Grants and Contributions Paid During the	e Year or Approved for Future P	ayment		-
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
		ı		
CASPER COLLEGE	NONE			
125 COLLEGE DRIVE				
CASPER, WY 82601				1,375
,				
NORTHWEST COLLEGE	NONE			
231 W 6TH ST.	10112			
POWELL, WY 82435				1,375
CACRED HOUGING NUMBER TO	NONE	:		
CASPER HOUSING AUTHORITY 1514 E 12TH ST, STE 105	NONE			
CASPER, WY 82601				500
				-
	}			
Total			▶ 3a	3,250
b Approved for future payment				
MONE				
NONE				
		l		
			-	
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated. Unrelated business income Excluded by section 512, 513, or 514						
gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exemp function income	
rogram service revenue:	code		code	711100111	- 101101101111001110	
	-					
	l l					
	_					
	_					
Fees and contracts from government agencies						
Membership dues and assessments						
nterest on savings and temporary cash						
nvestments						
dividends and interest from securities			14	1,037.		
let rental income or (loss) from real estate:					·	
Debt-financed property						
Not debt-financed property						
let rental income cr (loss) from personal						
roperty						
Other investment income						
Sain or (loss) from sales of assets other						
han inventory			14	1,475.		
let income or (loss) from special events						
Gross profit or (loss) from sales of inventory		- · · · · · · · · · · · · · · · · · · ·				
Other revenue:						
	1					
Subtotal. Add columns (b), (d), and (e)		(0.	2,512.		
fotal Add line 12, columns (b), (d), and (e)				13	2,5	
worksheet in line 13 instructions to verify calculations.)	,					
art XVI-B Relationship of Activities	to the Accon	nplishment of	Exempt P	urposes		
e No Explain below how each activity for which in	come is reported in i	column (e) of Part XV	/I-A contribute	d importantly to the accomp	olishment of	
▼ the foundation's exempt purposes (other than the foundation) is exempt purposes.	an by providing fund	s for such purposes)	·			
				·-·		
		,				
			·			

Form 990-PF (2015) S A ZUBER FOUNDATION 46-2427309

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Organi	izations					
			ectly engage in any of the following			of	Yes	No
			(3) organizations) or in section 52		ations?			
			ation to a noncharitable exempt org	ganization of:		10/1)		v
	(1) Cash					1a(1)		X
	(2) Other					1a(2)		
-	Other tran		his averant areas ration			1b(1)		_X_
		s of assets to a noncharital				1b(2)		X
	• •		ncharitable exempt organization			1b(3)		X
	\ -/	al of facilities, equipment,	or other assets			1b(4)		X
		bursement arrangements				1b(5)		X
		s or loan guarantees	mberohin or fundraiging colinitatio	20		1b(6)		X
	1-7		mbership or fundraising solicitatio			1c		X
			iling lists, other assets, or paid em "Yes," complete the following sche		we chow the fair market vali	 	ente	
			oundation. If the foundation receive				5615,	
			other assets, or services received.	su less man lan market value	in any transaction or snarin	g arrangement, snow in		
	ne no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers	s, transactions, and sharing ar	rangeme	nts
2 / [ile ilo	(b) Amount involved	N/A	- Storings organization	(a) beachprion of transfer	s, transactions, and snaming a	angomo	
			N/A					
								
								
			· · · · · · · · · · · · · · · · · · ·	 				
		· · · · · · · · · · · · · · · · · ·						
				-				
								
			<u> </u>		<u> </u>			
		•	tly affiliated with, or related to, one		itions described			7
			r than section 501(c)(3)) or in sect	ion 527?		Yes	LX	No
b	If "Yes," c	omplete the following sch				 		
		(a) Name of org	ganization	(b) Type of organization	(c) Descri	ption of relationship		
		N/A						
				L				
٠.	1		that I have examined this return, including mplete. Declaration of preparer (other that			May the IRS	discuss	this
Siç	gn 📗 🔪	, The st	00 D.			return with the shown below	e prepar (see <u>ins</u>	er t <u>r</u>)?
He		Dewal	U Zaher	X3-15-16	PRESIDENT	Ves		No
	Sig	hature of officer or trustee		D'ate /	Title			
		Print/Type preparer's na	ame reparer's s	ignature / / / [Date Check [if PTIN		
_			May	, L/ / Hel	self- emp	- I		
Pa -		JOSEPH J.	PAIZ		3/15/16	P00010		
	eparer		EE, HEARNE & PA	IZ, LLP /	Firm's f	EIN ► 83-03312	29	
Us	e Only							
		Firm's address ▶ P.	O. BOX 1088					
			EYENNE, WY 8200	3	Phone	no. 307-634-2	<u>1</u> 51	
			· · · · · · · · · · · · · · · · · · ·			Form 99 6		(2015)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number Name of the organization 46-2427309 S A ZUBER FOUNDATION Organization type (check one) Section: Filers of 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

S A ZUBER FOUNDATION

46-2427309

Part I	Contributors (see instructions) Use duplicate copies of Part I if additiona	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEWART A. ZUBER 706 E. 20TH STREET CHEYENNE, WY 82001	\$5,673.	Person X Payroll
(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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

S A ZUBER FOUNDATION

46-2427309

Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
	(c)	
(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		l
	(b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given S

Employer identification number

A ZUBE	R FOUNDATION		46-2427309 In section 501(c)(7), (8), or (10) that total more than \$1,000 for wind line entry. For organizations			
Part III E	xclusively religious, charitable, etc., contine year from any one contributor. Complete completing Part III, enter the total of exclusively religious.	ributions to organizations described columns (a) through (e) and the follow to chartable etc. contributions of \$1,000 etc.	in section 501(c)(/), (8), or (10) that total more than \$1,000 for wing line entry. For organizations			
c L	ompleting Part III, enter the total of exclusively religious Use duplicate copies of Part III if additions	al space is needed	1855 TOT THE YOU (CITICI BIRD WITH VINCE)			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	.,,					
<u> </u>						
		(e) Transfer of gif	tt			
	Transferee's name, address, al	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
_						
	(e) Transfer of gift					
	Transferee's name, address, a	Relationship of transferor to transferee				
(a) Na						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
 		(e) Transfer of git	ft			
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
	Hansieree's Hame, address, and ZIF + 4					

FORM 990-PF DIVID	ENDS AND INTER	EST FROM SECUR	ITIES S	TATEMENT 1	
GROS SOURCE AMOU		REVENUE	(B) NET INVEST- MENT INCOME		
		0. 526. 0. 511.	526. 511.		
TO PART I, LINE 4 1,	037.	0. 1,037.	1,037.		
FORM 990-PF	OTHER PROFES	SIONAL FEES	S	татемент 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TRUST ADMINISTRATION FEES	971.	971.		0.	
TO FORM 990-PF, PG 1, LN 1	6C 971.	971.		0.	
FORM 990-PF	OTHER E	OTHER EXPENSES		STATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DESCRIPTION SAFE DEPOSIT BOX SECRETARY OF STATE	EXPENSES	NET INVEST- MENT INCOME	ADJUSTED	CHARITABLE	
SAFE DEPOSIT BOX	EXPENSES PER BOOKS 33. 25.	NET INVEST- MENT INCOME 33. 25.	ADJUSTED	CHARITABLE PURPOSES 0.	
SAFE DEPOSIT BOX SECRETARY OF STATE	EXPENSES PER BOOKS 33. 25.	NET INVEST- MENT INCOME 33. 25.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 0.	
SAFE DEPOSIT BOX SECRETARY OF STATE TO FORM 990-PF, PG 1, LN 2	EXPENSES PER BOOKS 33. 25.	NET INVEST- MENT INCOME 33. 25. 58.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 0. 0.	
SAFE DEPOSIT BOX SECRETARY OF STATE TO FORM 990-PF, PG 1, LN 2 FORM 990-PF	EXPENSES PER BOOKS 33. 25.	NET INVEST- MENT INCOME 33. 25. 58.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 0. 0. TATEMENT 4 CAIR MARKET	

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 5

NAME OF CONTRIBUTOR

STEWART A. ZUBER

ADDRESS

706 E. 20TH STREET CHEYENNE, WY 82001

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

S.A. ZUBER FOUNDATION 706 E. 20TH STREET CHEYENNE, WY 82001

TELEPHONE NUMBER NAME OF GRANT PROGRAM

307-634-8953 SCHOLARSHIP FOR STUDENTS OF CHEYENNE SOUTH HIGH SCHOOL.

FORM AND CONTENT OF APPLICATIONS

CONTACT STEWART ZUBER

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION SCHOLARSHIP IS INTENDED FOR STUDENTS PURSUING A CERTIFICATION IN VOCATIONAL TRAINING OR A DEGREE ENGINEERING OR PHYSICAL SCIENCES. MUST BE A STUDENT OF CHEYENNE SOUTH HIGH SCHOOL. GPA RESTRICTIONS APPLY FOR 2ND SEMESTER.