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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 Wags and Menace Make a Difference Foundation		A Employer identification number 46-2447133	
% Foundation Source		B Telephone number (see instructions) (800) 839-1754	
Number and street (or P O box number if mail is not delivered to street address) Foundation Source 501 Silverside Rd		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code Wilmington, DE 198091377		C If exemption application is pending, check here	
G Check all that apply ☐ Initial return☐ Initial return of a former public charity ☐ Final return☐ Amended return ☐ Address change☐ Name change		D 1. Foreign organizations, check here	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 276,677		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify)			

Part I Analysis of Revenue and Expenses		Revenue and expenses per books		Net investment income		Adjusted net income		Disbursements for charitable purposes	
		(a)		(b)		(c)		(d) (cash basis only)	
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)		320,620					
	2	Check if the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments		442		442			
	4	Dividends and interest from securities		1,668		1,071			
	5a	Gross rents							
	b	Net rental income or (loss)							
	6a	Net gain or (loss) from sale of assets not on line 10		747					
	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							
Operating and Administrative Expenses	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		323,477		1,513			
	13	Compensation of officers, directors, trustees, etc		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)		7,337		87		7,250	
	17	Interest							
	18	Taxes (attach schedule) (see instructions)		53					
	19	Depreciation (attach schedule) and depletion							
	20	Occupancy							
	21	Travel, conferences, and meetings.							
	22	Printing and publications							
	23	Other expenses (attach schedule).		7,525				7,525	
	24	Total operating and administrative expenses.							
		Add lines 13 through 23		14,915		87		14,775	
	25	Contributions, gifts, grants paid		306,900				306,900	
	26	Total expenses and disbursements.Add lines 24 and 25		321,815		87		321,675	
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses and disbursements		1,662					
	b	Net investment income (if negative, enter -0-)				1,426			
	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			
	2	Savings and temporary cash investments	3,329	276,677	276,677
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	271,686		
	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 ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	275,015	276,677	276,677	
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	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐ 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 ▶ ☒ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	275,015	276,677	
	30	Total net assets or fund balances(see instructions)	275,015	276,677	
31	Total liabilities and net assets/fund balances(see instructions)	275,015	276,677		

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	275,015
2	Enter amount from Part I, line 27a	2	1,662
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	276,677
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	276,677

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	Publicly-traded Securities			
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 272,433		274,549	-2,116
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
a			-2,116
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	-2,116
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	253,264	104,101	2 432868
2013	7,787	27,502	0 283143
2012	0	0	0 0
2011			
2010			

2	Total of line 1, column (d).	2	2 716011
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	1 358006
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	100,204
5	Multiply line 4 by line 3.	5	136,078
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	14
7	Add lines 5 and 6.	7	136,092
8	Enter qualifying distributions from Part XII, line 4.	8	321,675

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

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1
Date of ruling or determination letter _____
(attach copy of letter if necessary—see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

3 Add lines 1 and 2.

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-

6 Credits/Payments

a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868).	6c	14
d	Backup withholding erroneously withheld	6d	

7 Total credits and payments Add lines 6a through 6d.

8 Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter **amount owed** ➤

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**. ➤

11 Enter the amount of line 10 to be **Credited to 2015 estimated tax** ➤ **Refunded** ➤

1	14
2	
3	14
4	
5	14
7	14
8	
9	
10	
11	

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?

If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

c Did the foundation file **Form 1120-POL** for this year?

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year
(1) On the foundation ▶ \$ _____ **(2)** On foundation managers ▶ \$ _____

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?

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*

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on **Form 990-T** for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

*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 law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*

8a Enter the states to which the foundation reports or with which it is registered (see instructions)
▶ DE _____

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation.*

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? *If "Yes," complete Part XIV*

10 Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*

	Yes	No
1a		No
1b		No
1c		No
2		No
3		No
4a		No
4b		
5	Yes	
6	Yes	
7	Yes	
8b	Yes	
9		No
10		No

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	13	Yes	
14	The books are in care of Foundation Source Telephone no (800) 839-1754 Located at 501 Silverside Road Suite 123 Wilmington DE ZIP+4 198091377			
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?	☐ Yes	☒ No	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes	☒ No	
	(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)?	☐ Yes	☒ 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).	☐ Yes	☒ 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.	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? If "Yes," list the years 20 , 20 , 20 , 20	☐ Yes	☒ No	
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 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes	☒ No	
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		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)?

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?

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?

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
Cynthia Lee	Pres / Dir / Sec / Treas	0	0	0
Foundation Source 501 Silverside Rd Wilmington, DE 198091377	1 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	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances

Total

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

Part VIII

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation

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

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
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. ▶	

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	16,849
b	Average of monthly cash balances.	1b	84,881
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	101,730
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	101,730
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,526
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	100,204
6	Minimum investment return. Enter 5% of line 5.	6	5,010

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	5,010
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	14
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	14
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	4,996
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	4,996
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	4,996

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	321,675
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	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	321,675
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	14
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	321,661
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				4,996
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 2013 , 2012 , 2011				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				6,736
e From 2014.				248,165
f Total of lines 3a through e.	254,901			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 321,675				
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.				4,996
e Remaining amount distributed out of corpus	316,679			
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	571,580			
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				0
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	571,580			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				6,736
d Excess from 2014.				248,165
e Excess from 2015.				316,679

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)

☐ 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

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

(2)

Value of assets qualifying under section 4942(j)(3)(B)(i)

b

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

c

"Support" alternative test—enter

(1)

Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2)

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

(3)

Largest amount of support from an exempt organization

(4)

Gross investment income

Part XV

Supplementary Information (Complete this part only if the 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) (See section 507(d)(2))

Cynthia Lee

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. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or 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

Form 990-PF (2015)

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

Form **990-PF** (2015)

Enter gross amounts unless otherwise indicated

13 Total.	Add line 12, columns (b), (d), and (e).	13	<u>2,857</u>
(See worksheet in line 13 instructions to verify calculations)			

[illegible]

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

[illegible]

b If "Yes," complete the following schedule

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

Title

☒ Yes ☐ No

Phone no (800) 839-1754

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
3 SISTERS EQUINE RESCUE 2260 NE HWY 20 BOX 454 BEND,OR 97701	N/A	PC	Medical Fund	2,000
AMAZING AUSSIES LETHAL WHITE RESCUE OF ARIZONA PO BOX 26501 SCOTTSDALE,AZ 85255	N/A	PC	Medical Fund	2,000
AMAZING AUSSIES LETHAL WHITE RESCUE OF ARIZONA PO BOX 26501 SCOTTSDALE,AZ 85255	N/A	PC	Medical Fund	700
ANIMAL HUMANE ASSOCIATION OF NEW MEXICO INC 615 VIRGINIA ST SE ALBUQUERQUE,NM 87108	N/A	PC	Medical Fund	2,000
BABY WARM INC 54095 S CIR DR REAR 3656 IDYLLWILD,CA 92549	N/A	PC	Medical Fund	1,000
BABY WARM INC 54095 S CIR DR REAR 3656 IDYLLWILD,CA 92549	N/A	PC	Orphaned Newborns Program	2,000
BRAMBLEY HEDGE RABBIT RESCUE INC PO BOX 54506 PHOENIX,AZ 85078	N/A	PC	Medical Fund	2,000
CALIFORNIA COASTAL HORSE RESCUE PO BOX 1646 OAK VIEW,CA 93022	N/A	PC	Medical Fund	2,000
CITY OF BLACKFOOT 157 N BROADWAY BLACKFOOT,ID 83221	N/A	PC	Medical care	1,000
CITY OF IDAHO FALLS - ANIMAL SHELTER 2450 HEMMERT AVE IDAHO FALLS,ID 83401	N/A	PC	Medical Fund	3,000
COLORADO ANIMAL RESCUE INC A NONPROFIT CORPORATION 2801 COUNTY RD 114 GLENWOOD SPGS,CO 81601	N/A	PC	Medical Fund	7,000
COLORADO ANIMAL RESCUE INC A NONPROFIT CORPORATION 2801 COUNTY RD 114 GLENWOOD SPGS,CO 81601	N/A	PC	Medical Fund	2,000
COLORADO HORSE RESCUE 10386 N 65TH ST LONGMONT,CO 80503	N/A	PC	Medical Fund	4,000
COLORADO HORSE RESCUE 10386 N 65TH ST LONGMONT,CO 80503	N/A	PC	Medical Fund	1,000
COLORADO PUPPY RESCUE OF COLORADO 4553 S MOBILE WAY AURORA,CO 80015	N/A	PC	Medical Fund	2,000
Total				306,900

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
COLORADO PUPPY RESCUE OF COLORADO 4553 S MOBILE WAY AURORA,CO 80015	N/A	PC	Medical Fund	6,000
COLORADO PUPPY RESCUE OF COLORADO 4553 S MOBILE WAY AURORA,CO 80015	N/A	PC	Medical Fund	3,000
COLORADO PUPPY RESCUE OF COLORADO 4553 S MOBILE WAY AURORA,CO 80015	N/A	PC	Medical Fund	1,000
CONNECTICUT DRAFT HORSE RESCUE INC 15 ROCK LANDING RD HADDAM NECK,CT 06424	N/A	PC	Emergency medical Fund	2,000
CRESCENT CITY MARINE MAMMAL REHABILITATION CENTER 424 HOWE DR CRESCENT CITY,CA 95531	N/A	PC	seal Fund	1,200
CRESCENT CITY MARINE MAMMAL REHABILITATION CENTER 424 HOWE DR CRESCENT CITY,CA 95531	N/A	PC	Race Program	700
CRESCENT CITY MARINE MAMMAL REHABILITATION CENTER 424 HOWE DR CRESCENT CITY,CA 95531	N/A	PC	seal Program	600
CRESCENT CITY MARINE MAMMAL REHABILITATION CENTER 424 HOWE DR CRESCENT CITY,CA 95531	N/A	PC	seal Program	7,200
CRESCENT CITY MARINE MAMMAL REHABILITATION CENTER 424 HOWE DR CRESCENT CITY,CA 95531	N/A	PC	seal and storytime sponsorship programs	1,300
DANBURY ANIMAL WELFARE SOCIETY INC 147 GRASSY PLAIN ST BETHEL,CT 06801	N/A	PC	Medical Fund	2,000
DENVER DUMB FRIENDS LEAGUE 2080 S QUEBEC ST DENVER,CO 80231	N/A	PC	Furry Scurry Race Program	5,000
DENVER DUMB FRIENDS LEAGUE 2080 S QUEBEC ST DENVER,CO 80231	N/A	PC	Charitable Event	16,000
DOGS DESERVE BETTER INC 1915 MOONLIGHT RD SMITHFIELD,VA 23430	N/A	PC	Medical Fund	1,000
DOGS DESERVE BETTER INC 1915 MOONLIGHT RD SMITHFIELD,VA 23430	N/A	PC	dog sponsorship program	1,000
FRIENDS OF THE SEA LION INC 20612 LAGUNA CANYON RD LAGUNA BEACH,CA 92651	N/A	PC	seal sponsorship Program	7,200
Total  3a				306,900

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FRIENDS OF THE SEA LION INC 20612 LAGUNA CANYON RD LAGUNA BEACH,CA 92651	N/A	PC	emergency medical Program	6,400
GARFIELD COUNTY ANIMAL WELFARE FOUNDATION INC PO BOX 1375 RIFLE,CO 81650	N/A	PC	Medical Fund	14,000
GARFIELD COUNTY ANIMAL WELFARE FOUNDATION INC PO BOX 1375 RIFLE,CO 81650	N/A	PC	Medical Fund	3,000
GARFIELD COUNTY ANIMAL WELFARE FOUNDATION INC PO BOX 1375 RIFLE,CO 81650	N/A	PC	Charitable Event	1,000
GARFIELD COUNTY ANIMAL WELFARE FOUNDATION INC PO BOX 1375 RIFLE,CO 81650	N/A	PC	medical fund and storytime sponsorship program	2,000
GOOD SAMARITAN PET ADOPTION CENTER PO BOX 202005 DENVER,CO 80220	N/A	PC	Medical Fund	2,000
GUNNISON VALLEY ANIMAL WELFARE LEAGUE INC PO BOX 1834 GUNNISON,CO 81230	N/A	PC	Medical Fund	2,000
HEART OF THE VALLEY HUMANE SOCIETY INC PO BOX 11390 BOZEMAN,MT 59719	N/A	PC	Medical Fund	1,000
HEART OF THE VALLEY HUMANE SOCIETY INC PO BOX 11390 BOZEMAN,MT 59719	N/A	PC	dog sponsorship Program	1,000
HEAVENLY HORSE HAVEN 58290 MARLIS LN ANZA,CA 92539	N/A	PC	horse medical care Fund	6,000
HEAVENLY HORSE HAVEN 58290 MARLIS LN ANZA,CA 92539	N/A	PC	emergency hey Fund	5,000
HEAVENLY HORSE HAVEN 58290 MARLIS LN ANZA,CA 92539	N/A	PC	Medical Fund	8,000
HEAVENLY HORSE HAVEN 58290 MARLIS LN ANZA,CA 92539	N/A	PC	Medical Fund	1,000
HIDDEN HARBOR MARINE ENVIRONMENTAL PROJECT INC 2396 OVERSEAS HWY MARATHON,FL 33050	N/A	PC	Medical Fund	3,000
HIGH COUNTRY NEWFOUNDLAND RESCUE 2600 S ROCK CREEK PKWY APT 18-103 SUPERIOR,CO 80027	N/A	PC	Medical Fund	3,000
Total				306,900

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HUMANE SOCIETY OF MOFFAT COUNTY PO BOX 1587 CRAIG,CO 81626	N/A	PC	Medical Fund	3,000
INTERNATIONAL ANIMAL RESCUE US PO BOX 137 SHREWSBURY,MA 01545	N/A	PC	emergency medical care fund	5,800
LARIMER HUMANE SOCIETY 5137 S COLLEGE AVE FORT COLLINS,CO 80525	N/A	PC	Camper's Fund, Pet Calendar Fund, and Medical Fund	4,100
LUCKY DOG RESCUE INC 4401 MARK DABLING BLVD STE 10 COLORADO SPGS,CO 80907	N/A	PC	Medical Fund	1,000
MARINE ANIMAL RESCUE REHAB & RELEASE INTO Nat Env 1536 W 25TH ST SAN PEDRO,CA 90732	N/A	PC	seals sponsorship Program	2,000
MARINE MAMMAL CENTER 2000 BUNKER RD FORT CRONKHITE SAUSALITO,CA 94965	N/A	PC	Medical Fund	5,000
MARINE MAMMAL CENTER 2000 BUNKER RD FORT CRONKHITE SAUSALITO,CA 94965	N/A	PC	seals sponsorship Program	2,000
MOUNTAIN PET RESCUE PO BOX 1841 WINTER PARK,CO 80482	N/A	PC	medical Fund	1,000
MOUNTAIN PET RESCUE PO BOX 1841 WINTER PARK,CO 80482	N/A	PC	Medical Fund	4,000
MOUNTAIN PET RESCUE PO BOX 1841 WINTER PARK,CO 80482	N/A	PC	dogs sponsorship Program	2,000
NATIONAL ANATOLIAN SHEPHERD RESCUE NETWORK PO BOX 13667 MESA,AZ 85216	N/A	PC	Medical Fund	2,000
NATIONAL GREAT PYRENEES RESCUE 81 BARNUM RD MAPLECREST,NY 12454	N/A	PC	Medical Fund	4,000
NATIONAL MILL DOG RESCUE PO BOX 88468 COLORADO SPGS,CO 80908	N/A	PC	Medical Fund	2,000
NATIONAL MILL DOG RESCUE PO BOX 88468 COLORADO SPGS,CO 80908	N/A	PC	Medical Fund	2,000
NEVADA HUMANE SOCIETY INC 2825 LONGLEY LN STE B RENO,NV 89502	N/A	PC	Medical Fund	2,000
Total				306,900

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
PETAID COLORADO 191 YUMA ST DENVER, CO 80223	N/A	PC	Charitable Event	7,500
RED DESERT HUMANE SOCIETY INC 310 YELLOWSTONE RD ROCK SPRINGS,WY 82901	N/A	PC	Medical Fund	2,000
RIDGEFIELD OPERATION FOR ANIMAL 45 S ST RIDGEFIELD,CT 06877	N/A	PC	Medical Fund	2,000
SECOND CHANCE ANIMAL RESCUE FOUNDATION PO BOX 44 LAMAR,CO 81052	N/A	PC	dog sponsorship Program	1,000
SECOND CHANCE HUMANE SOCIETY INC PO BOX 2096 RIDGWAY,CO 81432	N/A	PC	Medical Fund	5,000
SECOND CHANCE HUMANE SOCIETY INC PO BOX 2096 RIDGWAY,CO 81432	N/A	PC	Medical Fund	1,000
SPIRIT WIND HORSE RESCUE PO BOX 27 HOTCHKISS,CO 81419	N/A	PC	Medical Fund	20,000
SPIRIT WIND HORSE RESCUE PO BOX 27 HOTCHKISS,CO 81419	N/A	PC	Medical Fund	4,000
SPIRIT WIND HORSE RESCUE PO BOX 27 HOTCHKISS,CO 81419	N/A	PC	Medical Fund	2,000
SPIRIT WIND HORSE RESCUE PO BOX 27 HOTCHKISS,CO 81419	N/A	PC	Horses sponsorship program	12,000
SPIRIT WIND HORSE RESCUE PO BOX 27 HOTCHKISS,CO 81419	N/A	PC	Clean Drinking Water Fund	1,200
SPIRIT WIND HORSE RESCUE PO BOX 27 HOTCHKISS,CO 81419	N/A	PC	Horse Sponsorship Program	10,000
SUMMIT COUNTY ANIMAL CONTROL PO BOX 5225 FRISCO,CO 80443	N/A	PC	Medical Fund	1,000
TEE OFF FOR DOGS INC 24701 SANTA CLARA AVE 5 DANA POINT,CA 92629	N/A	PC	Charitable Event	1,000
THE DELTA GAMMA ANCHOR CENTER FOR BLIND CHILDREN 2550 ROSLYN ST DENVER,CO 80238	N/A	PC	Christmas Program	1,000
Total				306,900

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE HUMANE SOCIETY OF BOULDER VALLEY INC 2323 55TH ST BOULDER, CO 80301	N/A	PC	Medical fund	1,000
THE HUMANE SOCIETY OF BOULDER VALLEY INC 2323 55TH ST BOULDER, CO 80301	N/A	PC	Dog Race Program	15,000
THE HUMANE SOCIETY OF BOULDER VALLEY INC 2323 55TH ST BOULDER, CO 80301	N/A	PC	Charitable Event	4,000
THE HUMANE SOCIETY OF BOULDER VALLEY INC 2323 55TH ST BOULDER, CO 80301	N/A	PC	Charitable Event	4,000
US FRIENDS OF THE DAVID SHELDRIK WILDLIFE TRUST 25283 CABOT RD STE 101 LAGUNA HILLS, CA 92653	N/A	PC	ELEPHANT SPONSORSHIP Fund	2,000
US FRIENDS OF THE DAVID SHELDRIK WILDLIFE TRUST 25283 CABOT RD STE 101 LAGUNA HILLS, CA 92653	N/A	PC	Elephant SPONSORSHIP Program	4,000
US FRIENDS OF THE DAVID SHELDRIK WILDLIFE TRUST 25283 CABOT RD STE 101 LAGUNA HILLS, CA 92653	N/A	PC	the orphans project	2,000
US FRIENDS OF THE DAVID SHELDRIK WILDLIFE TRUST 25283 CABOT RD STE 101 LAGUNA HILLS, CA 92653	N/A	PC	Orphaned Elephant Project	1,000
WAGGYTAIL RESCUE INC 170 NORFOLK ST APT 10 NEW YORK, NY 10002	N/A	PC	Medical Fund	2,000
WETLANDS AND WILDLIFE CARE CENTER 21900 PACIFIC COAST HWY HUNTINGTN BCH, CA 92646	N/A	PC	Brown Pelican Medical Fund	1,000
WETLANDS AND WILDLIFE CARE CENTER 21900 PACIFIC COAST HWY HUNTINGTN BCH, CA 92646	N/A	PC	Medical Fund	2,000
WETLANDS AND WILDLIFE CARE CENTER 21900 PACIFIC COAST HWY HUNTINGTN BCH, CA 92646	N/A	PC	baby ducks and showers Project	1,000
WILD BURRO RESCUE AND PRESERVATION PROJECT 2351 S HWY 395 OLANCHA, CA 93549	N/A	PC	Medical Fund	4,000
WILD BURRO RESCUE AND PRESERVATION PROJECT 2351 S HWY 395 OLANCHA, CA 93549	N/A	PC	Medical Fund	1,000
ZOOH CORNER RABBIT RESCUE PO BOX 2192 SAN GABRIEL, CA 91778	N/A	PC	Medical Fund	3,000
Total 3a				306,900

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

TY 2015 Depreciation Schedule

Name: Wags and Menace Make a Difference Foundation

EIN: 46-2447133

TY 2015 LiquidationExplanationStmt

Name: Wags and Menace Make a Difference Foundation

EIN: 46-2447133

Statement: This statement is submitted to report the distribution of certain assets during the year. The distributions resulted in a substantial contraction of assets. The following information is submitted in accordance with Treasury Regulation Section 1.6043-3(a)(1) and the Form 990-PF instructions: During the taxable year ending December 31, 2015, the Foundation made distributions from assets from sources other than current income. Collectively, the distributions in excess of current income totaled \$306,900. This amount represents over 25% of the Foundation's net assets of \$278,111 (as measured by fair market value) at the beginning of the Foundation's taxable year ending December 31, 2015. Although the Foundation technically experienced a substantial contraction, it will continue in existence and has no plans for dissolution. The Foundation made distributions of cash to the grantees listed in the attachment to Part XV, Line 3a; each such grant was made solely for the charitable purpose specified therein.

TY 2015 Other Expenses Schedule

Name: Wags and Menace Make a Difference Foundation

EIN: 46-2447133

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	7,500			7,500
State or Local Filing Fees	25			25

TY 2015 Other Professional Fees Schedule**Name:** Wags and Menace Make a Difference Foundation**EIN:** 46-2447133

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment Management Services	87	87		
COPYWRITE SERVICES	500			500
Website Development	2,000			2,000
WEBSITE HOSTING/SUPPORT	4,750			4,750

TY 2015 Taxes Schedule

Name: Wags and Menace Make a Difference Foundation

EIN: 46-2447133

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Excise Tax for 2014	53			

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.	OMB No 1545-0047 2015
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Name of the organization Wags and Menace Make a Difference Foundation	Employer identification number 46-2447133
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Organization type (check one)

Filers of: Form 990 or 990-EZ Form 990-PF	Section: ☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☒ 501(c)(3) exempt private foundation ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation
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Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other 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 33¹/₃% 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 990PF, 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 Wags and Menace Make a Difference Foundation	Employer identification number 46-2447133
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Lee Cynthia	\$ 317,500	Person ☒
	1330 South Glencoe Street		Payroll ☐
	Denver, CO 80222		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)
(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)

Name of organization Wags and Menace Make a Difference Foundation	Employer identification number 46-2447133
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Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization Wags and Menace Make a Difference Foundation	Employer identification number 46-2447133
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
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