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Form **990-PF**

EXTENDED TO NOVEMBER 15, 20 Return of Private Foundation 2016

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.lrs.gov/form990pf.

OMB No 1545-0052

		of the Treasury	וס ⊲ Informatioi ∙	not enter a n about For	sociai se m 990-Pl	curity numbers F and its separa	on this formate instruction	n as it ma ons is at	ay be ma www.irs	.gov/fo	rm990pf		Open to Publi	cinspection
		dar year 2015 or tax year			26,	2015		nd ending		DEC		2015		
		foundation	<u> </u>						-	A Empl	oyer ide	ntıfıcation	number	
q	ממו	E RESEARCH F	יי ע כוואוזט	TON	TNC.					47	7 – 41 (2058		
		nd street (or P O box number if						Roo	m/suite		hone nur		···	
_	77	W MAIN ST						90	0			33-12	00	
City	or to	own, state or province, coul	-	or foreign p	ostal cod	le		•		C If exer	nption app	lication is pe	nding, check here	
		SE, ID 8370	2											. —
G C	heck		initial return			Initial return of	•	olic charit	ty	D 1 Fo	reign org	anizations,	check here	
		===	Final return		님	Amended retur	n			2 Fo	reign organ	nizations mee	ting the 85% test	
ш (hack		Address cha		vemnt nri	Name change vate foundation				1				
"	_	ction 4947(a)(1) nonexemp				vate foundation kable private fou							us was termina A), check here	
I Fa		rket value of all assets at e		J Account				Accrual]			0-month termi	
(fr	om F	Part II, col. (c), line 16)			ther (spe								B), check here	-
_				Part I, colu	ımn (d) r	nust be on ca	sh basis)							
Pa	rt I	Analysis of Revenue and (The total of amounts in columnecessarily equal the amounts	nns (b), (c), and	(d) may not		Revenue and enses per books		let investi income	ment	(c)	Adjusted Income		(d) Disburs for charitable (cash basi	purposes
	1	Contributions, gifts, grants				215,926	5.							
	2	Check If the foundation	is not required to a											
	3	Interest on savings and tempor cash investments	rary											
	4	Dividends and interest from	m securities							ļ				
		Gross rents			-					-				
	_	Net rental income or (loss)			 					 				
ine	ь b	Net gain or (loss) from sale of a Gross sales price for all	issets not on lin	ne 10										
Revenue	7	assets on line 6a Capital gain net income (from F	Part IV, line 2)						0.		•			
æ	8	Net short-term capital gair										0.		
	9	Income modifications												
	10a	Gross sales less returns and allowances								ļ				
	i	Less Cost of goods sold								-				
	l [.]	Gross profit or (loss) Other income			-					 		·		
en	11 12	Total Add lines 1 through	h 11		-	215,920	5.		0.	-		0.		•
SCAN	13	Compensation of officers, dire		etc			Ď.		0.	+		0.		0.
Z	14	Other employee salaries a	nd wages											
Z	15	Pension plans, employee								ļ				
Ę	16a	Legal fees	ST	MT 1		1 , 5 <u>E</u> 076	IVED		0.			0.	1	5,076.
Ġ	b	Accounting fees			1			10						
	17	Other professional fees Interest			005	ncta	3 2016	OSC		 				
ate	18	Taxes			₹		9 KAIP	SS						
ast B	19	Depreciation and depletion	n				AI LIT	- E 						
Operating and Administrative Expenses	20	Occupancy				OGDE	N, UT							
혛	21	Travel, conferences, and r	meetings							ļ				
anc	22	Printing and publications		· · ·			_			1			-	0.5.0
ing	23	Other expenses		MT 2	-	85	J •		0.	-		0.		850.
erat	24	Total operating and adm expenses Add lines 13 th				15,92	5.		0.			0.	1 1	5,926.
Ö	25	Contributions, gifts, grant			ļ		0.			1		<u> </u>		0.
		Total expenses and disb												
_	Ĺ	Add lines 24 and 25				15,92	6.		0.			0.	1!	5,926.
	27	Subtract line 26 from line	12				_							
	1	Excess of revenue over expens				200,00	0.			-				
	1	Net investment income (0.	+		0.		
	ıC	Adjusted net income (if ne	oualive, enter -C	J-1	[1		U •		

For	m 99	0-PF (2015) SAGE RESEARCH FOUNDATION	I, INC.	47-	4102058 Page	2
۵	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o		_
<u></u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	_
	1	Cash - non-interest-bearing		200,000.	200,000	•
	2	Savings and temporary cash investments				_
	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				
	7	Other notes and loans receivable				_
		Less; allowance for doubtful accounts				
s	8	Inventories for sale or use				_
Assets	۵	Prepaid expenses and deferred charges				_
As	102	Investments - U.S. and state government obligations				_
		Investments - corporate stock				
		Investments - corporate bonds				_
	ł	· · · · · · · · · · · · · · · · · · ·				
	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 depreciation		· · · ·		
		Other assets (describe)				_
	16	Total assets (to be completed by all filers - see the				
_	ļ	instructions. Also, see page 1, item I)	0.	200,000.	200,000	<u>•</u>
	17	Accounts payable and accrued expenses				
	18	Grants payable				
S	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable				
ت	22	Other liabilities (describe >)				
	23	Total liabilities (add lines 17 through 22)	0.	0.		
,		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31				
ès	24	Unrestricted				
au	25	Temporarily restricted				
Bal	26	Permanently restricted				
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here				
Ē		and complete lines 27 through 31				
ō	27	Capital stock, trust principal, or current funds	0.	0.		
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
ASS	29	Retained earnings, accumulated income, endowment, or other funds	0.	200,000.		
et.	I	Total net assets or fund balances	0.	200,000.		
Ž	30	Total net assets of fund parances		200,000.		
	2.	Total liabilities and not exceed found belonged	0.	200,000.		
_		Total liabilities and net assets/fund balances		200,000.		_
P	art	Analysis of Changes in Net Assets or Fund Ba	alances			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30			_
		st agree with end-of-year figure reported on prior year's return)		1	0	•
2	•	r amount from Part I, line 27a		2	200,000	
		r increases not included in line 2 (itemize)		3	0	_
		lines 1, 2, and 3		4	200,000	_
		reases not included in line 2 (itemize)		5	0	_
		I net assets or fund halances at end of year (line 4 minus line 5) - Part II on	lumn (h) line 30		200.000	_

		esses for lax on in		tincome	(h)	How an	oured	(-) Do		(d) Date cold
		nd(s) of property sold (e.g. or common stock, 200 shs			D D	- Purc - Dona	quired hase ition	(c) Dai	te acquired , day, yr.)	(d) Date sold (mo , day, yr.)
1a				_						
b · NO	NE_	- 10 = 1-10 ·								
C					_		·			
<u>d</u>						 -		-		
е	(6)	Depression allowed	/=\ Co.	at as ather been				/61	Gain or (loss	\
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis expense of sale					lus (f) minus	
a	ļ									. .
<u>b</u>										
d d										
е				-						
Complete only for assets show	ng gain in	column (h) and owned by	the foundation	n on 12/31/69				(I) Gains	(Col. (h) gain	minus
(i) F M V. as of 12/31/69	((j) Adjusted basis as of 12/31/69		cess of col. (i)		col. (k), but not less than -0-) or Losses (from col. (h))			n -0-) or	
a	<u> </u>								*******	
b										
C										
d										
е	<u> </u>		<u> </u>							
2 Capital gain net income or (net c	apıtal loss)	If gain, also enter If (loss), enter -0	r in Part I, line - in Part I, line	7 : 7	}	2				
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c).										
If (loss), enter -0- in Part I, line 8	3				<u> </u>	3	L			
Part V Qualification U	Jnder S	Section 4940(e) for	Reduced	Tax on Ne	t Inv	estn	nent In	come		
(For optional use by domestic privat	te foundati	ons subject to the section 4	4940(a) tax or	n net investment	ıncom	e.)				N/A
If section 4940(d)(2) applies, leave t	this part bl	ank.								
Was the foundation liable for the sec	ntion 4042	tay on the distributable am	nount of any v	ear in the bace n	arınd?					Yes No
If "Yes," the foundation does not qua				•	enou.					
Enter the appropriate amount in					entrie	S.				
Race period years		(b)			(c)			Distri	(d) bution ratio
Base periód years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dis	tributions	Net value of n	oncha	ritable-	use asset	ts	(col (b) di	vided by col. (c))
2014			····					_		
2013										
2012		,, -								
2011 2010								-		· · ·
2010									T	
2 Total of line 1, column (d)								2		
3 Average distribution ratio for the	5-year ba	se period - divide the total	on line 2 by 5,	, or by the numbe	er of ye	ears				
the foundation has been in existe	ence if less	s than 5 years						3	_	
4 Enter the net value of noncharita	ıble-use as	sets for 2015 from Part X,	line 5					4		
5 Multiply line 4 by line 3								5		
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6		
7 Add lines 5 and 6								7		
8 Enter qualifying distributions fro	m Part XII	, line 4						8		
If line 8 is equal to or greater tha See the Part VI instructions	ın line 7, cl	heck the box in Part VI, line	e 1b, and com	plete that part us	ing a 1	1% tax	rate.			
· · · · · · · · · · · · · · · · · · ·										Corm 000-DE (2016

SAGE RESEARCH FOUNDATION, INC.

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	990-PF (2015) SAGE RESEARCH FOUNDATION, INC. rt VI Excise Tax Based on Investment Income (Section 4940)	a) 4040(b) 4040(c) or 4	4 / - 4 Q/Q -	4102	058		age 4
			, or 4	340 -	200 II	Struc	CHOIL	-
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🗓 and enter		}					
	Date of ruling or determination letter (attach copy of letter if neces		Į.			/-		
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	P	1	-	N/Z	}	
	of Part I, line 27b		1					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% o		J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -0-)		2				
-	Add lines 1 and 2			3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -0-)		4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5				0.
6	Credits/Payments:	ı						
а	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	-					
d	Backup withholding erroneously withheld	6d						_
	Total credits and payments. Add lines 6a through 6d			7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach	ed		8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			9				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1		10				
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refun	ded 🚩	_11				
	rt VII-A Statements Regarding Activities					-	N 1	<u> </u>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislate	tion or did it participate or	intervene	ın			Yes	No
	any political campaign?					1a		<u>X</u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose	s (see instructions for the	definition)?		1b		<u>X</u>
	If the answer is "Yes" to ${\it 1a}$ or ${\it 1b}$, attach a detailed description of the activities and	copies of any materials	publish	ed or				
	distributed by the foundation in connection with the activities					İ		
C	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 y							
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶		0.	-		İ	1	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditum anagers. \blacktriangleright \$ 0.	re tax imposed on foundat	ion					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	37				2		Х
٠	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 ins	strument, articles of incorp	oration, i	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	;				3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•				4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					5		<u>X</u>
	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 eith	er,						
	By language in the governing instrument, or							
	\bullet By state legislation that effectively amends the governing instrument so that no mandatory	directions that conflict with	the stat	e law				
	remain in the governing instrument?					6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	olete Part II, col. (c), and	i Part X\	/		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions ID	s) ►						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atti	orney General (or designat	e)					
_	of each state as required by General Instruction G? If "No," attach explanation					8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of sect	tion 4942(j)(3) or 4942(j)(5) for cal	endar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," co	mplete Part XIV				9	X	
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule	listing their names and addres	ses C	TMT		10	X	
					For	m 99(ノーピト	(2015)

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ied)	
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section influence). Influence the outcome of any specific public election (see section 4955); of any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes. Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions). Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit 	n 4945(e))? or to carry on, directly or indire ? n described in section or educational purposes, or f	ectly, Ye Ye Ye Ye Ye Ye	s X No s X No s X No s X No	
section 53 4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h c if the answer is "Yes" to question 5a(4), does the foundation claim exemption f expenditure responsibility for the grant? 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 a personal benefit contract?	ictions)? iere rom the tax because it maintal N 5-5(d)	ined I/A Ye	N/A ► □ s □ No s X No	b
 b Did the foundation, during the year, pay premiums, directly or indirectly, on a part of the form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax seen. 	s X No	b X		
b. If "Yes," did the foundation receive any proceeds or have any net income attribute.			N/A 7	b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>'</i>	
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	/=) Evpopes
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
DAVID R. BOREN	MANAGER			
777 W. MAIN ST. STE 900	1 00		_	•
BOISE, ID 83702	1.00	0.	0.	0.
JONATHAN R. BOREN	DIRECTOR			
777 W. MAIN ST. STE 900		_		_
BOISE, ID 83702	1.00	0.	0.	0.
JENNIFER E CLAWSON	DIRECTOR			
777 W. MAIN ST. STE 900				
BOISE, ID 83702	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none.	enter "NONE."		
(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	action to position			
NONE				
Total number of other employees paid over \$50,000			•	0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
	al information auch as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers product.		Expenses
1 N/A		
2		
3		
4		
Port IV P Common of December Deleted Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions 3		
Total. Add lines 1 through 3	>	0.

Form 990-PF (2015)

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	-			0.
2 Undistributed income, if any, as of the end of 2015			0	
a Enter amount for 2014 only			0.	
b Total for prior years				
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 [.] ► \$ N/A				
a Applied to 2014, but not more than line 2a			0.	
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				0.
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:				
& 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>.</u>			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)	0,			
8 Excess distributions carryover from 2010	_			
not applied on line 5 or line 7	0.		 	
9 Excess distributions carryover to 2016	_			
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		<u> </u>	<u> </u>	Form 990-PF (2015)

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	Unrelated b	usiness income		ed by section 512, 513, or 514	(e)
nter gross amounts unless otherwise indicated. Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b	1 1		1 1		
c					
	1 1				· · ·
-	1			_	<u>.</u>
f				_	· · · · · · · · · · · · · · · · · · ·
g Fees and contracts from government agencies			1		
Membership dues and assessments			+ +		-
Interest on savings and temporary cash			 +		
investments					
Dividends and interest from securities		·	+ +		
					
Net rental income or (loss) from real estate			1		
a Debt-financed property			 		
b Not debt-financed property			4		- "
Net rental income or (loss) from personal					
property			+ +		
Other investment income					
Gain or (loss) from sales of assets other					
than inventory			 		
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a					
b					
c			1		
d			ļ. <u> </u>	·	
· · · · · · · · · · · · · · · · · · ·	1 1		\vdash		
е					
e		0.		0.	<u> </u>
eSubtotal. Add columns (b), (d), and (e)		0.	.]		<u> </u>
eSubtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e)	ons.)	0.			
e				13 _	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit ine No. Explain below how each activity for which	ies to the Accom	plishment of E	xempt	13 _	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit	ies to the Accom	plishment of E	xempt	13 _	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit ine No. Explain below how each activity for which	ies to the Accom	plishment of E	xempt	13 _	
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Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit ine No. Explain below how each activity for which	ies to the Accom	plishment of E	xempt	13 _	
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Form 990-PF (2015) SAGE RESEARCH FOUNDATION, INC. Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

ז מוט ז	ne organization directly or indir	ectly engage in any	of the following	j with any other organizatio	n described in sec	11011 50 1(0) 01		163	140
the C	Code (other than section 501(c)	(3) organizations) c	or in section 52	7, relating to political organi	izations?				
a Tran	sfers from the reporting founda	ation to a noncharita	ible exempt org	anization of:				İ	
(1)	Cash						1a(1)		<u>X</u>
(2)	Other assets						1a(2)		<u>X</u>
b Othe	r transactions:								
(1)	Sales of assets to a noncharital	ole exempt organiza	tion				1b(1)		<u>X</u>
(2)	Purchases of assets from a nor	ncharitable exempt i	organization				1b(2)		X
(3)	Rental of facilities, equipment,	or other assets					1b(3)		<u>X</u>
(4)	Reimbursement arrangements						1b(4)		<u>X</u>
(5)	Loans or loan guarantees						1b(5)		X
	Performance of services or me	mbership or fundra	ısıng solicitatioi	าร			1b(6)		X
	ing of facilities, equipment, ma	•	-				1c		X
	answer to any of the above is	-			vays show the fair	market value of the goods, o	other ass	ets,	
	ervices given by the reporting for								
	mn (d) the value of the goods,				•				
a) Line no	(b) Amount involved	•		exempt organization	(d) Description	n of transfers, transactions, and	sharing an	angemer	nts
•	<u> </u>	.,,	N/A				-		
			247,22	·		······································			
		-							
									
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	-								
									
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								-	
					-	_ ·- ·- · · · · · · · · · · · · · · · ·			
	<u> </u>				<u> </u>				
2a Is th	e foundation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organi	zations described	r			7
ın se	ection 501(c) of the Code (other	r than section 501(c	c)(3)) or in sect	ion 527?		Ļ	Yes	LX	No
b If "Y	es," complete the following sch								
	(a) Name of org	janization		(b) Type of organization		(c) Description of relations	ulb		
	N/A								
					_ :				
				-					
	Under penalties of perjury, I declare					ivia	y the IRS	discuss t	his
Sign	and belief it is true, correct, and cor	polete Declaration of p	reparer (other than	taxpayer) is based on all inform	nation of which prepar	, 0	irn with thown below		
Here	Mund	Den		#9-22,2011	6 manag		Yes		οN
ļ	Signature of officer or trustee	,		Date	Title				
	Print/Type preparer's na	ame	Preparer's si	gnature /	Date	Check if PTIN			
	MICHAEL R.		Ma	1 robuts		self- employed			
Paid	LINDSTROM		MICHAE	L R. LINDST	09/20/16	P0	1269	764	
Prepa		E BATLLY			111	Firm's EIN ▶ 45-0	_		
Use C	1 5								
	Firm's address ▶ 87	7 W MATI	N ST. S	TE. 800	-				
			83702	12. 000		Phone no 208-3	44-7	150	
		TI CHILL	03104	· · · · · · · · · · · · · · · · · · ·	-		orm 99 0		(2015)
						'	J. 111 OO		(2010)

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.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization	Employer identification number							
SAGE RESEARCH FOUNDATION, INC.	47-4102058							
Organization type (check one)								
Filers of: Section:								
Form 990 or 990 EZ								
4947(a)(1) nonexempt charitable trust not treated as a private foundation								
527 political organization								
Form 990-PF X 501(c)(3) exempt private foundation	X 501(c)(3) exempt private foundation							
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 General Rule	ile See instructions							
X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling property) from any one contributor Complete Parts I and II See instructions for determining a contributor								
Special Rules								
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amound or (ii) Form 990-EZ, line 1 Complete Parts I and II	or 16b, and that received from							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ 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 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 Forestify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B	orm 990-PF, Part I, line 2, to							

Name of organization

Employer identification number

SAGE RESEARCH FOUNDATION, INC.

47-4102058

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	DAVID R. BOREN 777 W MAIN ST, STE 900 BOISE, ID 83705	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part If 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

SAGE RESEARCH FOUNDATION, INC.

47-4102058

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt 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
	ALCO ALCO ALCO ALCO ALCO ALCO ALCO ALCO	\$	
(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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
		\$	
523453 10-2	6-15	Schedule B (Form	990, 990-EZ, or 990-PF) (2015

Name of orgai	nization	Employer identification number					
SAGE RI	ESEARCH FOUNDATION, IN	^ .	47-4102058				
Part III	Exclusively religious, charitable, etc., contributer Complete completing Part III, enter the total of exclusively religious	ibutions to organizations described in olumns (a) through (e) and the followin s, charitable, etc., contributions of \$1,000 or les	section 501(c)(7), (8), or (10) that total more than \$1,000 for				
(a) No.	Use duplicate copies of Part III if additional	al space is needed					
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, ar	nd ZIP + 4	Relationship of transferor to transferee				
-							
(a) No. from Part I	(b) Purpose of gift (c) Use of		t (d) Description of how gift is held				
	(e) Transfer of gift						
-	Transferee's name, address, ar	nd 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, ar	nd ZIP + 4	Relationship of transferor to transferee				
-							
(a) No. from Part I	(b) Purpose of gift (c) Use of g		(d) Description of how gift is held				
-							
-	(e) Transfer of gift						
-	Transferee's name, address, ar	Relationship of transferor to transferee					

FORM 990-PF	LEGAL	FEES	Si	PATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
LEGAL FEES	15,076.	0.	0.	15,076.		
TO FM 990-PF, PG 1, LN 16A	15,076.	0.	0.	15,076.		
FORM 990-PF	OTHER EXPENSES		STATEMENT 2			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
FORM 1023 FILING FEE	850.	0.	0.	850.		
TO FORM 990-PF, PG 1, LN 23	850.	0.	0.	850.		
	F SUBSTANTIA PART VII-A,	L CONTRIBUTORS	S ST	TATEMENT 3		
NAME OF CONTRIBUTOR	ADDR	ADDRESS				
DAVID R. BOREN		777 W. MAIN ST. STE 900 BOISE, ID 83702				