

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No. 1545-0052

2015

Departmentfof the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

<u> </u>	or cale	endar	year 2015, or t	tax year beginnir	ıg	, 2	<u>2015, an</u>	d ending	<u> </u>				
1	iame of fo	oundatio	on								umber		
-	THE HUDSON INSTITUTE OF MINERALOGY (dha MINDAT ORG) Number and street (or P.O. box number if mail is not delivered to street address) Room/suite								57-1197493 B Telephone number (see instructions)				
			•		to street a	ddress)	Roc	m/suité	E	•	•		
7	1113 CAMBRIDGE HILL LANE City or town, state or province, country, and ZIP or foreign postal code									(43 <u>4)</u> 964-08	75		
	-	ESWICKVA 22947								C If exemption application is pending, check here.			
_			4141	lastial materia		Initial return of a f				, ,,,			
•	3 Che	еск ан	that apply:	Initial return		-	rormer p	Joile char	ונא נ	1 Foreign organizations, ch	eck here ▶		
				Final return	}-	Amended return				2 Foreign organizations me	citing the 950/ test shock		
_				Address chan		Name change				here and attach computa			
ı	1 Che		e of organization			(c)(3) exempt privat				•	L		
_		Sec	tion 4947(a)(1)	nonexempt charit	able trus		<u>-</u>		tion	If private foundation statu			
			value of all assets		J Acc	ounting method:	X Cash	Ac	crual	under section 507(b)(1)(A	t), check here		
	(Iron	n Part I	I, column (c), line 1	6)		Other (specify)	<u> </u>] (If the foundation is in a 60)-month termination		
	► \$,412.	(Part I,	column (d) must be	on cash	basis.)		under section 507(b)(1)(8	s), check here 🟲 🔝		
ſ	Part I	्र Aı	nalysis of Re	evenue and		(a) Revenue and	1 /1) Net inv	estment	(c) Adjusted net	(d) Disbursements		
_		E	penses (The	total of amounts	in :	expenses per boo		inco		income	for charitable		
		COL	lumns (b), (c), a rily equal the an	nd (d) may not ne nounts in column	ces-		- 1				purposes		
			ee instructions).)		(u)						(cash basis only)		
-		1	Contributions, gifts, gran	its, etc, received (attach sche	edule) • •	34,21	15. 783	13 33 23	(W. W. Y. S		· 医中国双克罗德德氏验疗工具		
		2		undation is not required to a		Mary 18 1/4 1/4 1/4 1/4 1/4							
Ø				,							4. 网络线线		
(C)		3	-	temporary cash investments							· 文		
SCANNED		4		rom secunties	• • • •						St. March St.		
5			Gross rents Net rental income			38 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, , , , , , , , , , , , , , , , , , , ,	450 (5) 200	(11,20	Control of the second of the s	1 3454 5 1425 1 577 1 3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
F			or (loss) · · · ·			1048							
	R		Net gain or (loss) from s Gross sales price fo	ale of assets not on line 10		The Author of Links	0. j <u>r</u> -	<u>6a St</u>					
ر ـــ	E V	"	assets on line 6a ·	· · ·	515.		41.38 Sec		Sand Bridge				
Ū.	Ē	7		ome (from Part IV, line 2		A CHARLES TO SERVICE OF THE PARTY OF THE PAR		CATTON IN A APPLICATION IN	* ************************************	一个一个			
, Januari	N U	8 9	Net short-term capit Income modification	algaın		TWO SPACES	2. 4. 4: 30.		15 3 - 23 10	£4	\$ 2, \$ 2 4 8 18 , Jag () }		
	E	l	0	1			F2	2000 100 100 100 100 100 100 100 100 100	1 8,6 ≥ 2 12, 1 22, 11 11 11 11 11 11 11 11 11 11 11 11 11	\$2.5 -0-4-7-7-8-2-10025248875.75 197			
Q O	_	10 a	returns and allowances								国际经济发展的		
2016		Ь	Less Cost of	-			3 7 8 18 18	2714	123.65%	V (VV 1886488)	1 4 5 5 6 5 6 5 5 5 6 5 5 5 5 5 5 5 5 5 5		
্ক		_	goods sold · · ·	tach schedule)		20 6 6 7 4 8 4 8 9 8 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	\$100 mgs 1 \$150 pt	12	1687779888 168883 - Gar	<u>E 1 1.2.70 PA PAPAT 1.2.2222</u> BB	7 & 1 3 Color 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
		11		th schedule) · · · ·			- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		87 \ 3 3	<u> </u>			
		''	Outer moonie (attac	ar scaledule,		12 (13/6) L		,					
		12	Total Add lines 1	through 11		34,21	15				19 44 12 13 4 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5		
-		13		ficers, directors, trustee		34,21	-				7 33% 1 3 3		
		14		alaries and wages	•						 		
		15	• •	loyee benefits				·					
		1	•	chedule) · · · · ·						-			
	A D			lach sch)				-					
	M			ach sch) · · · · ·		<u> </u>							
	OI	17	•								 		
	P S	18		(see instrs)						4	<u> </u>		
	RR	19	Denreciation (attach	,						-	N 4887 (1967 1987 19		
	A A	. ັ	schedule) and deple	etion L-19.	Stmt.	13	31.						
	N A	20											
	GÉ	21		, and meetings · · ·									
	A E N X D P	22		itions									
		23	Other expenses (att				_			,	16.000		
	E N		See Line 23 St			16,96	00.				16,960.		
	S E	24	Total operating an	d administrative s 13 through 23 · · ·		17,09	a 1				16 960		
	S	25	Contributions, gifts, gran	=				机的建筑的	3.2 10 1888		16,960. 5,635.		
			Total expenses an				- J.	and the state of the same	4.5 (************************************	ONLINE CARROL & LANGEL SE . ESTA BARTA CARES .	1		
		26		o disbursements. ;		22,72	26.			1	22,595.		
•		27	Subtract line 26 from				321 25		YZKIAT	PARTERING SERVICE	DEPOS SERVICES AND		
			Excess of revenue	over expenses		Water State of the							
		1	and disbursement	s		11,48	39.						
		b	Net investment inc	ome (if negative, enter	-0-)		33.50	476.4	Solve B.				
_		c	Adjusted net incor	me (if negative, enter -0	-)	FIGHT MEDICAL				**	多是农民的种种的企业		

Dar	1131	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End o	
Eart	ų č	Dalance Sileets	(See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	11	Cash - non-interest-l	bearing	1,857.	15,443.	15,443.
	2	Savings and tempora	ry cash investments			
	3	Accounts receivable				
		Less: allowance for d	oubtful accounts			
	4	Pledges receivable.		Marie Committee of the	11. 13 12 14 15 16 16 16 16 16 16 16 16 16 16 16 16 16	Brick And Try
		Less: allowance for de	oubtful accounts			
	5	Grants receivable .				
	6	Receivables due from offic disqualified persons (attac	cers, directors, trustees, and other this chedule) (see instructions)			
	7	Other notes and loans rec			THE CONTROL OF THE CO	
A		Less: allowance for d	oubtful accounts			
S	8	Inventories for sale or	ruse			
A S S E T	9	Prepaid expenses an	d deferred charges			
S	10 a	Investments – U.S. a obligations (attach sc	nd state government hedule)			
	l t	Investments - corporate	stock (attach schedule)			
i			bonds (attach schedule)			
1	1	Investments - land, t		·爱尔斯特·克尔斯特·拉克	18	
	''	equipment: basis				
		Less: accumulated depred (attach schedule)				
	12	Investments - mortg	age loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment: basis 🔭 3,669.			
		Less: accumulated depred (attach schedule)			3,538.	3,538.
	15	Other assets (describ	pe ► L-15 Stmt)	62,066.	56,431.	56,431.
	16	see the instructions.	ompleted by all filers — Also, see page 1, item I)	63,923.	75,412.	75,412.
L	17		d accrued expenses			
À	18	• •		· · · · · · · · · · · · · · · · ·		
В	19					
Ļ	20		tors, trustees, & other disqualified persons			
T	21		s payable (attach schedule)			
i	22	Other liabilities (desc	ribe			
E S	23	Total liabilities (add	lines 17 through 22)			
		Foundations that fo	llow SFAS 117, check here ▶			
		and complete lines	24 through 26 and lines 30 and 31.			
N F E U	24		1	-		
ΤN	25		d			
A D	26		o not follow SFAS 117, check here . F X			
A S B S A		and complete lines	27 through 31.	1		
EL	27	-	incipal, or current funds			
E L T A S N	27		or land, bldg., and equipment fund		•	
С	28	·	nulated income, endowment, or other funds	63,923.	75,412.	
O E R S	29	• •	fund balances (see instructions)	63,923.	75,412.	
K 3	30		net assets/fund balances	03,923.	13,412.	
	"	(see instructions)		63,923.	75,412.	
Par	t III	Analysis of Chan	iges in Net Assets or Fund Balanc	es	· · · · · · · · · · · · · · · · · · ·	
1	Tota end-	I net assets or fund bai of-year figure reported	ances at beginning of year - Part II, column on prior year's return)	(a), line 30 (must agree w	vith 1	63,923.
2	Ente	r amount from Part I. In	ne 27a		2	11,489.
3			ne 2 (ttemize)			==
4	hhA	lines 1, 2, and 3				75,412.
5		eases not included in line 2 (5	
6	Tota	I net assets or fund bal	ances at end of year (line 4 minus line 5) - F	Part II, column (b), line 30	6	75,412.

Form 990-PF (2015)

. _P ar	(a) List and describe t	LOSSES FOR TAX ON INVESTMENT the kind(s) of property sold (e.g., real ; or common stock, 200 shares MLC	estate,	(b) How acc P — Purcl D — Dona	nase	(C) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr.)
1 a				<i>D D O O O O O O O O O O</i>	20011		
b		· - · · · · · · · · · · · · · · · · · ·					
C							
d							
е			_,	 			
<u>-</u>	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale			(h) Gain or (e) plus (f) mi	(loss) nus (g)
a							
b							
d							
e							
		g gain in column (h) and owned by th	e foundation on 12/31/69			//\ Cara /Cal	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			(I) Gains (Col ain minus col. (k), bi an -0-) or Losses (fro	ut not less
a	-			_	-		-
b							
С							
d							
е	·					r	
	Capital gain net income or (net c	If (loss), enter	enter in Part I, line 7 er -0- in Part I, line 7	• • • •	2		· · · · · · · · · · · · · · · · · · ·
3	Net short-term capital gain or (lo	ss) as defined in sections 1222(5) an	d (6):				
	If gain, also enter in Part I, line 8 in Part I, line 8	, column (c) (see instructions). If (loss	s), enter -0-	• • •	3		
		r Section 4940(e) for Reduce oundations subject to the section 494			ome		
Was If 'Ye	s,' the foundation does not qualify	on 4942 tax on the distributable amou	lete this part.		• • •	· · · Tyes	☐ No
1		each column for each year; see the in	4.5	y entries.		7-1	
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asso	ets	(col.	(d) Distribution (b) divided by co	
	2014	6,126.	<u></u>	1,778.			3.445444
	2013	193,176.		L,348.			43.305638
	2012	10,691.		3,618.			2.954947
	2011	5,988.		5,472.			1.094298
	2010	7,627.					
2					2	1	150.800327
3	Average distribution ratio for the number of years the foundation I	5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the ears		3		37.700082
4	Enter the net value of noncharita	able-use assets for 2015 from Part X,	line 5		4		8,520.
5	Multiply line 4 by line 3				5		321,205.
6	Enter 1% of net investment income	me (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7		321,205.
8	Enter qualifying distributions from	m Part XII, line 4			8		22,595.
	If line 8 is equal to or greater that Part VI instructions.	an line 7, check the box in Part VI, line	th, and complete that part t	using a 1%	tax r	ate. See the	

Par	t VISS Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see	inst	ruction	ns)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.		1. E.	7.77 1.728.m	3	12 12
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)	[
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1				
	check here . ► and enter 1% of Part I, line 27b	2	120	33,77	V. 7.4.	<u> </u>
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	المحكمات	1	and at	مان أن در	44 - 2
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others 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:	1.2 Y X		泛海豚		28 9 11
	2015 estimated tax pmts and 2014 overpayment credited to 2015		1.75			300
b	Exempt foreign organizations — tax withheld at source	30		2	ر که در او دور در او دور	10,000 M
С	Tax paid with application for extension of time to file (Form 8868) 6 c 0 .	13 y 3			15 k 33k. G 1286	1800 A
d	Backup withholding erroneously withheld		1545			ا د میراند
7	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 attached	8	\top			
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 overpald	10				0.
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
Par	t.VII-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			152	Yes	No
ıa	participate or intervene in any political campaign?		. 	1 a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		х
	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.					
	Did the foundation file Form 1120-POL for this year?			1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			V-11-		10 2
_	(1) On the foundation \(\brace \\$ \) Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				3 6	\\ \
	foundation managers * \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		• • •	2	(4.5)	X
	If 'Yes,' attach a detailed description of the activities.			() j	100	3 8 m
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					Xin. X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a		X
b	off 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b		
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.			ر در دانی ر	\$ m.ds	أثم معالمرية
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				10 A	
	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?			6	X	
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			7	$\frac{x}{x}$	
	Enter the states to which the foundation reports or with which it is registered (see instructions)		•	. egg. s	37 m	7.7.3
va	NY - New York		_		多為	त्सर्ध
			_	4 8 12	18. A.	*101/101
b	olf the answer is 'Yes' to line 7, has the foundation fumished 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			8 b	Х	10 00
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part X	(5) ′/V .		9	(A) (A)	3.15划 X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	<u></u> .	<u></u>	10		_x_
BAA			Fo	rm 990)-PF (2	2015)

	1			
orn	n 990-PF (2015) THE HUDSON INSTITUTE OF MINERALOGY 57-119749	3	F	Page :
<u>Kai</u>	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		х
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		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	. 13	Х	
14	The books are in care of ANTHONY J. NIKISCHER Telephone no. (434)	_9 <u>64</u>	-087	5
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		T.,	
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?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pài	rt 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
1 a	During the year did the foundation (either directly or indirectly):	200	3	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	34.73 34.53	\$25.55 \$25.55 \$25.55 \$25.55	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	13.7	100	ؿ ؿؙڴڒ _ڿ ؠ؞
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	18 20		
	(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.)			
1	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)?	44.53 1 b		A Company
	Organizations relying on a current notice regarding disaster assistance check here	12 / A	8 3573	182 12
•	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?	1 c		ر الأراثية X
2		3.86. 3.86.	\$5.7.3 \$2.3.3 \$3	
6	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?		\$22. \$1.2 \$1.5 \$1.5	
	If 'Yes,' list the years ► 20 , 20 , 20			
ŀ	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.)	2 b		
•	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			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
I	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.)	3 b		
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its	4 a		x

Form 990-PF (2015)

Form 990-PF (2015) THE HUDSON INSTITU			57-11	97493 Page					
Part VII-B: Statements Regarding Activit		n 4720 May Be Red	uired (continued)						
5 a During the year did the foundation pay or incur a	•								
(1) 'Carry on propaganda, or otherwise attempt to			Yes X	No					
 (2) Influence the outcome of any specific public on, directly or indirectly, any voter registration (3) Provide a grant to an individual for travel, stu 	n drive?			No					
(4) Provide a grant to an organization other than				No No					
in section 4945(d)(4)(A)? (see instructions)									
educational purposes, or for the prevention of	of cruelty to children or a	nimals?	Yes X	No					
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?				5 b					
Organizations relying on a current notice regardi			▶ [_						
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	ility for the grant?	• • • • • • • • • • • • •	Yes]No					
If 'Yes,' attach the statement required by Regular 6 a Did the foundation, during the year, receive any	funds, directly or indirect	lv. to pay premiums							
on a personal benefit contract? b Did the foundation, during the year, pay premium			, , , , , , , , , , , , , , , , , , , ,	No 6b X					
If 'Yes' to 6b, file Form 8870.				全部 沙山西州北					
7 a At any time during the tax year, was the foundati			<u> </u>	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
b If 'Yes,' did the foundation receive any proceeds									
Rart VIII Information About Officers, D and Contractors	rectors, irustees,	Foundation Manag	gers, Highly Paid I	=mpioyees, 					
1 List all officers, directors, trustees, foundation				T					
(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					
ANTHONY J. NIKISCHER									
1113 CAMBRIDGE HILL LANE KESWICK VA 22947	CHAIRPERSON 10.00	0.	0.	0.					
JOLYON RALPH									
128 MULLARDS CLOSE	DIRECTOR 1.00	0.	0.	0.					
MITCHAM SURREY, CR4 4FD UNITED KINGDOM ALFREDO PETROV	1.00	· · ·	<u> </u>	0.					
13480 TRAM VIEW ROAD	DIRECTOR								
DESERT HOT SPRINGS CA 92240	1.00	0.	0.	0.					
See Information about Officers, Directors, Trustees, Etc.									
		0.	0.	0.					
2 Compensation of five highest-paid employee	s (other than those inc								
(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			,						
			•						
Total number of other employees paid over \$50,000 .				None					
BAA	TEEA0306 10			Form 990-PF (2015)					

and Contractors (continued)	instructions) If none onto NOME!	
3 Five highest-paid independent contractors for professional services (see (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of Service	(c) compensation
MONE	-	
	-	
	-	
	-	
	-	
	-	
Total number of others receiving over \$50,000 for professional services		None
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statisti organizations and other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
- · · · · · · · · · · · · · · · · · · ·		
1`		
2		
3		
4		
Bart∛IX-B∃ Summary of Program-Related Investments (see inst	ructions)	
Describe the two largest program-related investments made by the foundation during	ng 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		
ВАА		Form 990-PF (2015)

57-1197493

Form 990-PF (2015) THE HUDSON INSTITUTE OF MINERALOGY

Par	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn fou	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: Average monthly fair market value of securities	253	
		1 a	
	Average of monthly cash balances	1 b	8,650.
	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	8,650.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c	34.3	
	(attach detailed explanation)	15 July 1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	8,650.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	130.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,520.
6	Minimum investment return. Enter 5% of line 5	6	426.
Par	tiXI ☑ Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here □ and do not complete this part.)	found	lations
1	Minimum investment return from Part X, line 6	1	426.
2 a	Tax on investment income for 2015 from Part VI, line 5	3.3	
b	Income tax for 2015. (This does not include the tax from Part VI.) 2 b	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
c	Add lines 2a and 2b	2 c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	426.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	426.
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	426.
Par	t·XII₺ Qualifying Distributions (see instructions)	,	
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	22 <u>,</u> 595.
	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	165 3a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	22,595.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	22,595.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo qualifies for the section 4940(e) reduction of tax in those years.	undation	
BAA			Form 990-PF (2015)

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 · · · · · · · · · · · · · · · · · ·				426.
2	Undistributed income, if any, as of the end of 2015:		公司是是1995年1111年1111日		
а	Enter amount for 2014 only			0.	
b	Total for prior years: 20 , 20 , 20	美國在於中國共產黨			であった。金融機能の代表
3	Excess distributions carryover, if any, to 2015:			THE TANKS	
а	From 2010				
	From 2011 5,714.				
	From 2012				
	From 2013 193,109.				
	From 2014 6,037.				
f	Total of lines 3a through e	222,588.			
4	Qualifying distributions for 2015 from Part				
	XII, line 4: \$ 22,595.				
а	Applied to 2014, but not more than line 2a			L. Daniela Sande et Minate Carl at Min	
b	Applied to undistributed income of prior years (Election required — see instructions)				
C	Treated as distributions out of corpus (Election required — see instructions)				
	i de la companya de	等。 多数 化多元性激素	11320111893225	声的"各种种"的"	426.
	Remaining amount distributed out of corpus	22,169.			1. 8 % Pag 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5	Excess distributions carryover applied to 2015	The second larger of solar securities	834 MAN 14 27 1420		·
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	244,757.	C) 68 4 . C 48 6 . C 48 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	\$ 50 Per 1 P	BANKSON SAMES THE
	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				
d	Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
е	Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f	Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				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)	7,218.			
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	237,539.			
10	Analysis of line 9:				
а	Excess from 2011 5,714.				
b	Excess from 2012 10,510.				
C	Excess from 2013 193,109.				
c	Excess from 2014 6,037.				
е	Excess from 2015 22,169.				

Part XIV. Private Operating Foundations (see instructions and Part VII-A, question 9) N/A	Form 990-PF (2015) THE HUDSON INSTIT	TUTE OF MINE	RALOGY		57-1197493	Page 10
is effective for 2015, enter the date of the ruling. b Check bots of indicate whether the foundation is a private operating foundation described in section 4942(3)(3)	<u> </u>	`			<u> </u>	N/A
2.3 Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for institution from Part X for insti	is effective for 2015, enter the date of the ruli	ng			<u></u> •[
income from Part I or the minimum investment steam from Part X for better steam from Part X for a for each year listed	_		ing foundation descri		4942(j)(3) or	4942(j)(5)
investment return from Part X for each year listed 5 85% of line 2a Challifying distributions from Part XII, line 4 for each year listed 6 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2d 8 Complete 3a, b, or c for the alternative test – enter: (1) Value of all assets (2) Value of assets qualifying under 1) Value of assets qualifying under 2) Value of assets qualifying under 1) Value of assets qualifying under 2) Value of assets qualifying under 3 Assets listernative test – enter: (1) Value of assets qualifying under 3 Performent literative test – enter: (1) Total support other than gross investment enter about no Part X, line 6 for each year lister 4 Total support other than gross investment enter about no Part X, line 6 for each year listed 5 Support support other than gross investment enter about no Part X, line 6 for each year listed 6 Support alternative test – enter: (1) Total support from an exemption of the company of the part of the	2 a Enter the lesser of the adjusted net			,		
c Qualifying distributions from Parl XII, line 4 for each year istated. d Amouts included in line 2-not used directly for salive conduct of exempt schilds. c Qualifying distributions made directly for active conduct of exempt schilds. d Camplete 3a, b, or of for the alternative lest – enter: (1) Yalue of all assets (2) Yalue of assets qualifying under section 4942(J)(X)(B)(D). b Endowment alternative lest – enter: (1) Yalue of assets qualifying under section 4942(J)(X)(B)(D). b Endowment alternative lest – enter: (1) Yalue of assets qualifying under section 4942(J)(X)(B)(D). b Endowment alternative lest – enter: (1) Total support other than gross dividends, rantis, payments on securities loans (section 512(A)(D), or royal/else). c Support alternative lest – enter: (1) Total support other than gross dividends, rantis, payments on securities loans (section 512(A)(D), or royal/else). (2) Support temp general public and 5 or nere exert opinitarious as provided (section 512(A)(D), or royal/else). (3) Largeet ast public for the providence 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 2% of the total contributions received by the foundation before the close of any tax year (but only if they 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 2% of the total contributions received by the foundation before the close of any tax year (but only if they 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 2% or greater interest. 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. c Informa	investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
line 4 for each year isted	b 85% of line 2a					
for active conduct of exempt activities	 Qualifying distributions from Part XII, line 4 for each year listed 					
for active conduct of exempt activities. Subtract line 2d from line 2c. 3 Complete 3a, b. or c for the attendative test - enter: (1) Value of assets qualifying under section 4942(0)(8(b)). b Endowment altendative test - enter 23 of minimum investment return shows in Part X, line 9 for activities in Part X, line 9 for activitie						
alternative test relied upon: a 'Assets' atternative test — enter: (1) Value of all assets (2) Value of all assets (2) Value of assets qualifying under section 4942()(3(8)(8)) b 'Endowment' attenuative test — enter 23 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 of 12(a)(5)), or royalties). (2) Support one general pelies and 5 or section of the section of	for active conduct of exempt activities.					
(1) Value of all assets						
(2) Value of assets qualifying under section 4942((3)(5)(6))	a 'Assets' alternative test — enter:			1		
section 4942()(3)(8)(6) b Endowmer' alternative test — enter 23 of minimum investment return shown in Part X, line for each year fisted c Support' alternative test — enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section of \$12(a)(5)), or royalles). (2) Support from general public and 5 or more exempt organizations as provided in section 4942(b)(6)(6)(6)(6). (3) Largest amount of support from an exempt organization (4) Gross investment income 1 Information Regarding Foundation Managers: a List any managers of the foundation who law contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who ave contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who ave contributed more than \$5,000). (See section 507(d)(2).) c Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs: Check here \(^{\text{N}} \sum \frac{1}{3} \) if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. 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 tiems 2a, b. c., and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: THE HUDSON INSTITUTE OF MINERALOGY C/O ANTHONY NIKISCHER 1113 CAMBRIDGE HILL LANE KESWICK VA 22947 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED d Any submission deadlines:						
minimum investment return shown in Part X, line 6 for each year islad of	section 4942(j)(3)(B)(i)					
(1) Total support other than gross investment income (inderest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). (2) Support tom general public and 5 or more evenet organizations as provided in section 494(6)(3(8))). (3) Largest amount of support from an exempt organization . (4) Gross investment income . (5) Supplementary Inforrmation (Complete this part only if the foundation 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 \$5,000). (See section 507(d)(2).) 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, Glft, Loan, Scholarship, etc, Programs: Check here * [X] 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 e-mail address of the person to whom applications should be addressed: THE HUDSON INSTITUTE OF MINERALOGY C/O ANTHONY NIKISCHER 1113 CAMBRIDGE HILL LANE KESMICK VA 22947 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED c Any submission deadlines:	minimum investment return shown in Part X,					
investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). (2) Support from general public and 5 or more evempt organization as sprowded in section 4942(i)(3)(iiii). (3) Largest amount of support from an exempt organization	c 'Support' alternative test — enter:					
(2) Support from general public and 5 or more exempt lorganizations as provided in section 4942([i](5)(ii)(ii)(ii)(ii)(ii)(ii)(ii)(ii)(ii)(investment income (interest, dividends, rents, payments on securities loans (section					
an exempt organization	more exempt organizations as provided					
Part:XV: Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.) 1	(3) Largest amount of support from					· · ·
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).) 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 ▶ X 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 e-mail address of the person to whom applications should be addressed: THE HUDSON INSTITUTE OF MINERALOGY C/O ANTHONY NIKISCHER 1113 CAMBRIDGE HILL LANE KESWICK VA 22947 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	(4) Gross investment income					
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).) 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 X 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 e-mail address of the person to whom applications should be addressed: THE HUDSON INSTITUTE OF MINERALOGY C/O ANTHONY NIKISCHER 1113 CAMBRIDGE HILL LANE KESWICK VA 22947 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	Part XV Supplementary Information assets at any time during the	(Complete this e year – see ir	part only if the structions.)	foundation had	l \$5,000 or more	in
Check here X 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 e-mail address of the person to whom applications should be addressed: THE HUDSON INSTITUTE OF MINERALOGY C/O ANTHONY NIKISCHER 1113 CAMBRIDGE HILL LANE KESWICK VA 22947 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	a List any managers of the foundation who have close of any tax year (but only if they have co	e contributed more than note than 10% or more of the	n \$5,000). (See section e stock of a corporation	on 507(d)(2).)		
Check here X 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 e-mail address of the person to whom applications should be addressed: THE HUDSON INSTITUTE OF MINERALOGY C/O ANTHONY NIKISCHER 1113 CAMBRIDGE HILL LANE KESWICK VA 22947 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:		4 Olff Laan Cala	Involving and December			
THE HUDSON INSTITUTE OF MINERALOGY C/O ANTHONY NIKISCHER 1113 CAMBRIDGE HILL LANE KESWICK VA 22947 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	Check here X if the foundation only ma requests for funds. If the foundation makes gromplete items 2a, b, c, and d.	kes contributions to ifts, grants, etc (see	preselected charitab instructions) to indivi	le organizations and iduals or organization	ns under other condition	olicited ons,
1113 CAMBRIDGE HILL LANE KESWICK VA 22947 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	•		•		oe addressed:	
b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT ATTACHED c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:		NERALOGY C/C	ANTHONY NIK	ISCHER		
c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:						
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	• •	mitted and informal	tion and materials the	y should include:	-	
	c Any submission deadlines:					
ΒΔΔ TEFA0310 10/13/15 Form 990-PF (2015)	d Any restrictions or limitations on awards, such	h as by geographica	al areas, charitable fie	elds, kinds of instituti	ons, or other factors:	
	RAA	,	FA0310 10/13/15		Fo	orm 990-PF /2015\

Recipient			If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home	or busines	s)	substantial contributor	recipient		
a Paid during the year						
SOMERS HS						
120 PRIMROSE STREET						
LINCOLNDALE	NY	10540		NONE	EDUCATIONAL	600.
NYMC						
PO BOX 770 PLANETARI				1		
NEW YORK	NY	10021		NONE	EDUCATIONAL	625.
MN MINERAL CLUB						
2051-138 AVE NW						
ANDOVER	MN	55304		NONE	EDUCATIONAL	290.
SMITHSONIAN-NMNH						
PO BOX 37012						
WASHINGTON	DC	20013		NONE	EDUCATIONAL	300.
AMNH- E&P SCIENCES						
CPW & 79 STREET						
NEW YORK	NY	10024		NONE	EDUCATIONAL	300.
U OF A GEOSCEINCES						
1040 E 4 STREET						
TUCSON		85721		NONE	EDUCATIONAL	300.
NW FMS CHAPTER - NEW	SOME					
16605 127 AVE SE		00050				
RENTON		98058		NONE	EDUCATIONAL	120.
CJ HOOKER MIDDLE SCH	OOL					
41 LINCOLN AVE	2717	10004	i,	NONE	DDUGA TOWN	• • •
GOSHEN		10924		NONE	EDUCATIONAL	100.
L. MAHEW NASA ASTROE		INST				
2200 COLO. AVE. UCB		80309		NONE	EDUCATIONAL	76
BOULDER See Line 3a statement	CO	00309	,	NONE	EDUCATIONAL	75.
See Line 3a statement						
						2,925.
						2,323.
				•		
Total						5,635.
b Approved for future paymen				Γ		3,033.
2 · · · · · · · · · · · · · · · · · · ·	.•					
				1		
Total					3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross	amounts unless otherwise indicated.	Unrelate	ed business income	Exclude	ed by section 512, 513, or 514	T - · · · · · · · ·
•		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
-	am service revenue:			code		
а ь						
c			-			
d						
е						
f				ļ		
	and contracts from government agencies					
	pership dues and assessments					
	t on savings and temporary cash investments ends and interest from securities	-	- ·			
	ental income or (loss) from real estate:			30.33		
	financed property	VI	7,77			
b Not d	ebt-financed property					
	ntal income or (loss) from personal property					
	investment income					
	r (loss) from sales of assets other than inventory					0.
	come or (loss) from special events s profit or (loss) from sales of inventory	-				
	revenue:	41-27 14946	\$\forall \$\forall \text{\$\forall \text{\$\finit \text{\$\forall \text{\$\foral	12.6.85	All his transfer of the factor of the	188 458 B 2 2 5 6 6
a	revenue.	50 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	10 300 CX	7. 20 Six (18 - 17 - 1)	182 1 20 2 80 3 C 43 1.5 5 .
L				1		
c						
db						
e		100 min 2 may				
12 Subto	otal. Add columns (b), (d), and (e)	Charlet Harry		1788 & &	42	0.
	. Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations					0.
· · · · · · · · · · · · · · · · · · ·						_
Part XVI	<u>-B℃</u> Relationship of Activities to the	e Accomp	lishment of Exemp	ot Purp	ooses	
Line No. ▼	Explain below how each activity for which inco accomplishment of the foundation's exempt p	ome is report urposes (oth	ed in column (e) of Part er than by providing fund	XVI-A co	ontributed importantly to ch purposes). (See instru	the uctions.)
8	INCREASED PUBLIC AWARENESS A	AND APPR	ECIATION OF MI	NERAL	S	
	THROUGH OUTREACH AND EDUCAT					
						
						
						
					····	
		· · · · · ·				
		<u> </u>				
 			<u> </u>			
						
					· · · · · · · · · · · · · · · · · · ·	

Form 990-PF (2015) THE HUDSON INSTITUTE OF MINERALOGY 57-1197493 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

											1. 1. 1. 1.		
de:	scribed	ganization directly in section 501(c) political organiza	of the Code (oth	gage in any c er than secti	of the followin on 501(c)(3)	g with any organizatio	other o	rganization n section 527,				Yes	No (S)
a Tra	ansfers	from the reporting	g foundation to a	noncharitabl	le exempt org	ganization o	of:					أعشعشه	
(1)	Cash										1 a (1)		Х
(2)	Other	rassets				<i>.</i>					1 a (2)		X
b Ot	her trar	nsactions:									12 22 182 " " .	2 V. \$	G1, (%)
(1)	Sales	of assets to a no	ncharitable exem	npt organizati	ion						1 b (1)	× 11/48	x
		nases of assets fro		. •							<u></u>		X
		al of facilities, equi		•	-						1 b (3)		$\frac{\hat{x}}{x}$
, ,		bursement arrang	•								1 b (4)		
		s or loan guarante								• • • • • •	<u>`</u>		<u>X</u>
		· ·								• • • • •	1 b (5)		<u>X</u>
		rmance of service	•		-						1 b (6)		X
¢ Sh	aring o	f facilities, equipm	nent, mailing lists	, other asset	s, or paid em	ployees	• • •		• • • • • •	• • • •	1 c		<u>X</u>
the	e aoods	wer to any of the a s, other assets, or action or sharing a	services given b	v the reportin	ng foundation	. If the four	ndation	received less th	an fair mark	et value i	alue of n		
(a) Line	no.	(b) Amount involved	(c) Name	of nonchantabl	e exempt organ	ization	(d)	Description of tran	sfers, transacti	ons, and s	haring arran	gements	S
										-			
				•									
	\dashv												
	_							·····					
-	_												
		<u> </u>				——— -		· ·					
	+												
	_												
	-												
													
													
de	scribed Yes,' c	ndation directly or d in section 501(c) omplete the follow	of the Code (oth ing schedule.	ed with, or re er than secti	lated to, one on 501(c)(3))	or more ta	x-exem on 527?				لسا	X	No
	(a)	Name of organiza	ation	(b)	Type of orga	nization		(0) Description	of relati	onship		
							_						
Sign	Under pe correct, a	enalties of perjury, I declarate of complete. Declarate	lare that I have examin on of preparer (other th	ed this return, inc ian taxpayer) is b	cluding accompaniased on all inform	nying schedule nation of which	s and stat preparer	ements, and to the be has any knowledge.	est of my knowle	dge and bel	May the II	RS discu	ss
Here	X		XI		106/0	1/16	▶ ,	HAIRPERSO	N		this return preparer s	hown be	low
	Signat	ure of officer or trustee			Date	1/10		tle			(see Instr	Yes	1 1
L	ga.	Print/Type preparer's r	name	Pren	arer's signature		•	Date		77. 7	PTiN	. 05	No
		1			1.150	COM	l	İ	Check	r		0.66	
Paid			DILAPI, CP		marco	4 W	<u> </u>	06/24/16	self-emplo	·	P00115	<u>U68</u>	
Prepai	rer	Firm's name	DILAPI &	CO., PC	• 6				Firm's EIN	13-37	41717		
Use O		Firm's address	399 KNOLL	WOOD ROA	AD								
	_	<u> </u>	WHITE PLA	INS		N.	Y 10	603	Phone no	(914)	421-9	022	
RΛΛ	•										Form 996	DE /0	10451

Schedule B

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

Schedule of Contributors

Employer identification number

OMB No. 1545-0047

2015

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

THE HUDSON INSTITUTE OF MINERALOGY 57-1197493 Organization type (check one): Filers of: Section: 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 Form 990-PF 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. 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 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, chantable, 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).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part
_	JDSON INSTITUTE OF MINERALOGY	_ · ·	er identification number 197493
	Contributors (see instructions). Use duplicate copies of Part I if additional space		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROCK H. CURRIER	-	Person X Payroll
	1212 S MAYFLOWER AVE.	\$ <u>5,000</u> .	_
	ARCADIA CA 91006	-	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
DAA	TECA0702 1042/45	0.1-1-1-0.75	noncash contributions.)

1 of Part I

Additional Information

STATEMENT TO PART XV; QUESTION 2B

REQUESTS FOR SPECIMENS MUST BE MADE IN WRITING ON EDUCATIONAL INSTITUTION LETTERHEAD, FIRST BY EMAIL AND FOLLOWED BY HARDCOPY, AND REQUESTS

MUST INCLUDE THE SPECIFICS OF WHAT IS NEEDED, HOW THEY WILL BE USED

IN THE CLASSROOM, AND ANY OTHER SUPPORTING INFORMATION THAT WILL ENABLE

THE INSTITUTE TO PROPERLY EVALUATE YOUR REQUESTS IN AN EXPEDITIOUS

MANNER.

Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
OFFICE SUPPLIES	27.			27.
BANK FEES	116.			116.
ACCOUNTING	850.			850.
PROFESSIONAL SERVICES	15,250.			15,250.
PAYPAL FEES	717.			717.

Total <u>16,960.</u> <u>16,960.</u>

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(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
Person X Business. DAVID VON BARGEN 9730 W. LAYTON AVE.	DIRECTOR		_	
MILWAUKEE WI 53228 Person. X Business .	1.00	0.	0.	0.
CHESTER S. LEMANSKI, JR. 309 MASSACHUSETTS ROAD BROWNS MILLS NJ 08015 Person. X Business.	DIRECTOR 1.00	0.	0.	0.
ROCK H. CURRIER 212 MAYFLOWER AVE ARCADIA CA 91006	DIRECTOR 1.00	0.	0.	0.
Person. X Business . VANDALL T. KING		J		<u> </u>
138 MELVILLE STREET PO BOX 90888 ROCHESTER NY 14609 Person X Business	DIRECTOR 1.00	0.	0.	0.
DR. ROBERT WOODSIDE #10, 15563 MARINE DRIVE WHITE ROCK BC CANADA V4BIC9	DIRECTOR 1.00	0.	0.	0.
Person X Business . LAN YEE CHAU ROOM 402, 4/F TS-VIC CHIU HO BUILDING 160-164 HELLINGSTON STREET	DIRECTOR			
CENTRAL HONG KONG	1.00	0.	0.	0.

Total

^	^	0
U.	U.	0.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient	If recipient is an individual,	Foun- dation	Purpose of grant or contribution	Person or Business
Name and address	show any	status		Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year P. CANADIAN NAT MUSEUM 380 SUSSEX DRIVE OTTAWA, ONT, CANADA KIN 9N4		 NONE	EDUCATIONAL	Person or Business X
JAMES MADISON UNIVERSITY 800 S MAIN STREET HARRISONBURG VA 22807		 NONE	EDUCATIONAL	Person or Business X 2,850.

Total

2,925.

Form 990-PF, Line 19 Allocated Depreciation

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Life	Current Depr	Net Invest Income	Adjusted Net Income
CANON IMAGING SYSTEM	11/30/15	3669		200DB	7.00	131		

Total

Form 990-PF, Page 2, Part II, Line 14 L-14 Stmt

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
CANON IMAGING SYSTEM	3,669.	131.	3,538.
Total	3,669.	131.	3,538.

Form 990-PF, Page 2, Part II, Line 15 Other Assets Stmt

	Beginning	End of	f Year
Line 15 - Other Assets:	Year Book Value	Book Value	Fair Market Value
MINERALS & EQUIPMENT	62,066.	56,431.	56,431.

57-1197493

3

Form 990-PF, Page 2, Part II, Line 15 Other Assets Stmt

Continued

	Beginning	End o	of Year
Line 15 - Other Assets	Year Book Value	Book Value	Fair Market Value
Total	62,066.	56,431.	56,431