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# EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation

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

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

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

OMB No 1545-0052

For	calendar year 2015 or tax year beginning		, and ending		
Na	me of foundation			A Employer identification	n number
_1	EWMAN FOUNDATION			75-2680607	7
Nu	mber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_	00 EL PASEO			940-566-09	990
	y or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is a	pending, check here
_I	ENTON, TX 76205				
G	Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		2. Foreign organizations m	eeting the 85% test
	Address change	Name change		2. Foreign organizations mocheck here and attach or	omputation
H	Check type of organization: X Section 501(c)(3) ex			E If private foundation sta	
늗		Other taxable private founda	· 1 1	under section 507(b)(1	)(A), check here
	air market value of all assets at end of year J Accounting	-	Accrual	F If the foundation is in a	
-		her (specify)	2000	under section 507(b)(1	)(B), check here
	the state of the s	· · · · · · · · · · · · · · · · · · ·			1 (d) n
P	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	1,225,494.		N/A	
	2 Check fithe foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	71,695.	71,695.		STATEMENT 1
	5a Gross rents	1,535.	1,535.		STATEMENT 2
	b Net rental income or (loss) <1,954.>				STATEMENT 3
<u>o</u>	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	49,999.			
enc	D assets on line 6a 023,034.				
Revenue	7 Capital gain net income (from Part IV, line 2)		49,999.		ļ
_	8 Net short-term capital gain			<u> </u>	
	9 Income modifications Gross sales less returns			-	
	10a and allowances		<del> </del>	,	
	b Less Cost of goods sold c Gross profit or (loss)				
	11 Other income	38.	38.		STATEMENT 4
	12 Total. Add lines 1 through 11	1,348,761.	123,267.		
		0.	0.		0.
	13 Compensation of officers projectes, the last officers of the last of the last officers of the last of the last officers of the last				
	15 Pension plans, employee benefits				
ses	16a 69a fees NOV 1 5 2016				
penses	b Accounting fees STMT 5	6,120.	3,060.		0.
	c Other professional liness - STMT 6	10,057.	10,057.		0.
<u>8</u>	17 Interest	160.	160.		0.
Administrative Ex	18 Taxes STMT 7	2,283.	183.		0.
inis	19 Depreciation and depletion	2,043.	2,043.	ļ	ļ <u> </u>
Ę	20 Occupancy				
and	22 Printing and publications   23 Other expenses   STMT   8	7,930.	7,865.		<del>                                  </del>
Operating	23 Other expenses STMT 8	1,330.	1,003.		0.
era	24 Total operating and administrative expenses. Add lines 13 through 23	28,593.	23,368.		0.
Ö	25 Contributions, gifts, grants paid	177,625.	23,300.		177,625.
	26 Total expenses and disbursements.		<del></del>		1.,,023.
	Add lines 24 and 25	206,218.	23,368.		177,625.
_	27 Subtract line 26 from line 12:	<del></del>	<del> </del>		1
	Excess of revenue over expenses and disbursements	1,142,543.			
	b Net investment income (if negative, enter -0-)		99,899.		
	c Adjusted net income (if negative, enter -0-)			N/A	
523	01				5 000 DE (0045)

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

Form **990-PF** (2015)

Department of the Treasury Internal Revenue Service

			Beginning of year	End of	year
<u>P</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			
	2	Savings and temporary cash investments	100,877.	185,016.	185,016.
	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	93.	0.	0.
əts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			·
⋖	ŀ	Investments - U.S. and state government obligations			
	l t	Investments - corporate stock STMT 9	402,893.		
	٥	Investments - corporate bonds STMT 10	281,822.	381,522.	391,560.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans	60 464	012-016	000 202
	13	Investments - other STMT 11	68,464.	213,246.	222,323.
	14	Land, buildings, and equipment, basis			
		Less accumulated depreciation			
	l .	Other assets (describe )			
	16	Total assets (to be completed by all filers - see the	054 140	2 026 611	2 005 220
_	47	instructions. Also, see page 1, item I)	034,149.	2,036,611.	4,085,328.
		Accounts payable and accrued expenses			erandariles authorizand er en e e ereke auth
	18	Grants payable			
Liabilities	19 20	Deferred revenue			
三	21	Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable			
Ë		Other liabilities (describe STATEMENT 12)	0.	39,919.	
		DITITION (USSONIES )		33,313.	
	23	Total liabilities (add lines 17 through 22)	0.	39,919.	
_	<del>                                     </del>	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
Net Assets or Fund Balances	25	Temporarily restricted			
Ba		Permanently restricted			
Ē		Foundations that do not follow SFAS 117, check here			
亞		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	854,149.	1,996,692.	
ž	30	Total net assets or fund balances	854,149.	1,996,692.	
_	31	Total liabilities and net assets/fund balances	854,149.	2,036,611.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	854,149.
	•	r amount from Part I, line 27a		2	1,142,543.
		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	1,996,692.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,996,692.
					Form <b>QQO_DE</b> (2015)

Part IV Capital Gains and	Losses for Tax on Inv	vestmen	t Income			·-			- Tage o
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b)	How at - Purc - Don	cquired chase ation	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)	
1a		•							
b SEE ATTACHED ST	ATEMENT								
C									
d		. –	<del></del>	<u> </u>					
e	/A Description allowed	(-\ O-		Ц_			(1) 0	(1)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (	
b					-				
С									
d				_					
e 625,894.		. (	575,89	5.					49,999.
Complete only for assets showing gair	<del></del>							ol. (h) gaın not less thar	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)				Losses	(from col. (	h))
a									
b									· · ·
C									
d									40.000
e				_					49,999.
2 Capital gain net income or (net capital le	OSS) $ \begin{cases} If gain, also enter \\ If (loss), enter -0-1 \end{cases} $	n Part I, line in Part I, line	7 : 7	}	2				49,999.
3 Net short-term capital gain or (loss) as		(6):		5					
If gain, also enter in Part I, line 8, colum	ın (c).			<b> </b>				NT / N	
Part V   Qualification Unde	r Section 4940(a) for	Reduced	Tay on Not	Inv	– J – ⇔etn	ent Inc	ome	N/-A	
If section 4940(d)(2) applies, leave this pai Was the foundation liable for the section 4 if "Yes," the foundation does not qualify un	342 tax on the distributable amo der section 4940(e). Do not com	plete this pa	art					<b></b> .	Yes X No
1 Enter the appropriate amount in each c	<u> </u>	tructions be	tore making any ei				_		741
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distri		Net value of no		rıtable-			Distrib (col. (b) div	(d) ution ratio ided by col. (c))
2014		,989.				5,112			.376026
2013	136	,684.		<u> </u>	<u>, 19</u>	6,381	<u>-</u>		.114248
2012		3,575.				2,031 8,523			.094786
2011 2010		,136.				6,969			.056490
2010	1 / 2	, 130 •			, 4,	0,000	+		•030430
2 Total of line 1, column (d)	haan aassad adamda kha kakal aassa	. loop O boo E	h Abb	-4	-		2		.691275
3 Average distribution ratio for the 5-year the foundation has been in existence if	·	ı ııııe ∠ by 5,	or by the number	υι ye	ars		3		.138255
4 Enter the net value of noncharitable-use	assets for 2015 from Part X, lin	ne 5 _					4		1,821,943.
5 Multiply line 4 by line 3							5		251,893.
6 Enter 1% of net investment income (1% of Part I, line 27b)				6		999.			
7 Add lines 5 and 6					7		252,892.		
	Wil line 4								
8 Enter qualifying distributions from Part If line 8 is equal to or greater than line 7	•	b, and comp	plete that part using	ga 1º	% tax r	rate.	8		177,625.
See the Part VI instructions.			_						orm <b>990-PF</b> (2015
JEUJE I 11764-10								Г	OTHER LANDS

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	1948	- see I	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	↓		1,9	98.
	of Part I, line 27b		1			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					٠.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	——		4 6	<u> </u>
3	Add lines 1 and 2	3	↓		1,9	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	↓		4 0	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	<u> </u>		1,9	98.
	Credits/Payments:		1			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 1,526.	4	1			
b	Exempt foreign organizations - tax withheld at source	↓ .	ł			
C	Tax paid with application for extension of time to file (Form 8868)  6c 2,500.	4				
đ	Backup withholding erroneously withheld 6d 6d	1	l			
7	Total credits and payments. Add lines 6a through 6d		↓		4,0	<u> 26.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	<u> </u>			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<u> </u>			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<del> </del>		2,0	28.
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax   2,028. Refunded	11				0.
	rt VII-A Statements Regarding Activities					<del></del>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	e in			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition			1b		Х
	If the answer is "Yes" to 1a or 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.					۱.,
	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			-3-E-		
	(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation managers. $\blacktriangleright$ \$ 0 .	<u>.</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					ŀ
	managers. ► \$0.					,,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		T / B	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	Г	A/N	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		
_	If "Yes," attach the statement required by General Instruction T					
Б	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or  Provided by allowing the defeat with a mondath and a mondate of dispersions that conflict with the state.					·
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the conflict with the conflict	e iaw		ا ، ا	х	
_	remain in the governing instrument?			<u>6</u> 7	X	<u> </u>
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 X	,		<u> </u>	Λ	<del> </del>
0-	Catanatha ababa ta urbuch the foundation arounds as with urbuch it is required (see instructions)					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			o.	Х	
^	of each state as required by General Instruction G? If "No," attach explanation	anda-		8b		$\vdash$
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call year 2015 or the tayable year beginning in 2015 (see instructions for Part XIV/2 if #See # complete Root XIV/2	Elludi		ا ۾ ا		x
10	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			10		$\frac{\hat{x}}{x}$
_10_	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses			- QQ(	\ DE	

4a

X

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2015.)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 990-PF (2015) NEWMAN FOUNDATION	75-2680607	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manage Paid Employees, and Contractors (continued)	rs, 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) Comp	ensation
NONE		
	<u>-</u>	
		<del></del>
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities	<b>▶</b>	0
Land the state of	at an the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information su number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	cn as the Expenses	
2		
3	<del></del>	
4	_	
Doct IV PI C	L	<del></del>
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	<del></del>
1 N/A		
2		
All other program related investments. Con instructions		
All other program-related investments. See instructions.		
·		
Total. Add lines 1 through 3	<b>•</b>	0.
	Form <b>990-P</b>	<b>F</b> (2015)

	AN FOUNDATION		75-2	2680607 Page 8
Part X Minimum Invest	ment Return (All domestic founda	tions must complete this part Foreig	n foundations, se	ee instructions.)
1 Fair market value of assets not use	d (or held for use) directly in carrying out c	charitable, etc., purposes:		
a Average monthly fair market value	of securities	-	1a	1,467,019.
b Average of monthly cash balances			1b	173,570.
c Fair market value of all other assets	5		1c	209,099.
d Total (add lines 1a, b, and c)			1d	1,849,688.
e Reduction claimed for blockage or	other factors reported on lines 1a and			
1c (attach detailed explanation)		1e	0.	
2 Acquisition indebtedness applicable	e to line 1 assets		2	0.
3 Subtract line 2 from line 1d			3	1,849,688.
4 Cash deemed held for charitable ac	ctivities. Enter 1 1/2% of line 3 (for greater a	amount, see instructions)	4	27,745.
5 Net value of noncharitable-use as	ssets. Subtract line 4 from line 3. Enter here	e and on Part V, line 4	5	1,821,943.
6 Minimum investment return. Ente	r 5% of line 5		6	91,097.
Part XI Distributable Am	nount (see instructions) (Section 4942	(j)(3) and (j)(5) private operating foundati	ons and certain	
foreign organizations ch	eck here 🕨 🔙 and do not complete th	ns part)		
1 Minimum investment return from F	Part X, line 6		1	91,097.
2a Tax on investment income for 2019	5 from Part VI, line 5	$\begin{vmatrix} 2a \end{vmatrix} = 1,9$	98.	
b Income tax for 2015. (This does no	ot include the tax from Part VI.)	2b		
c Add lines 2a and 2b		-	2c	1,998.
3 Distributable amount before adjust	ments. Subtract line 2c from line 1		3	89,099.
4 Recoveries of amounts treated as of	qualifying distributions		4	0.
5 Add lines 3 and 4			5	89,099.
6 Deduction from distributable amou	int (see instructions)		6	0.
7 Distributable amount as adjusted.	Subtract line 6 from line 5. Enter here and	on Part XIII, line 1	7	89,099.
Part XII Qualifying Distri	butions (see instructions)			
1 Amounts paid (including administr	ative expenses) to accomplish charitable, e	tc., purposes:	- 200	
a Expenses, contributions, gifts, etc.	- total from Part I, column (d), line 26		1a	177,625. 0.
b Program-related investments - total			1b	0.
2 Amounts paid to acquire assets us	ed (or held for use) directly in carrying out	charitable, etc., purposes	. 2	
3 Amounts set aside for specific chair				
a Suitability test (prior IRS approval	required)		3a	
<b>b</b> Cash distribution test (attach the re		•	3b	<u></u>
-	a through 3b. Enter here and on Part V, II	ine 8, and Part XIII, line 4	4	177,625.
	tion 4940(e) for the reduced rate of tax on i			<del></del>
income. Enter 1% of Part I, line 27	• •		5	0.
6 Adjusted qualifying distributions.	•		6	177,625.
	used in Part V, column (b), in subsequent	years when calculating whether the found	lation qualifies for t	<del></del>
4040(a) reduction of tay in t				

## 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				89,099.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 8,671.				
b From 2011				
c From 2012 54,308.				
dFrom 2013 78,187.				
eFrom 2014 343,555.				
f Total of lines 3a through e	484,721.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ►\$ 177,625.				
a Applied to 2014, but not more than line 2a			0.	
<b>b</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				89,099.
e Remaining amount distributed out of corpus	88,526.			00,000
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	573,247.			
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	İ	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				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	8,671.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	564,576.			
10 Analysis of line 9:	·····			
a Excess from 2011				
b Excess from 2012 54,308.				
c Excess from 2013 78,187.				
d Excess from 2014 343,555.				
e Excess from 2015 88,526.				

523581 11-24-15

	FOUNDATION		<del> </del>	75-26	80607 Page 10
Part XIV   Private Operating I	Foundations (see in	structions and Part VII	l-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective f	•	•	<b>&gt;</b>		
b Check box to indicate whether the four	dation is a private operati	ng foundation described i	n section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for		1			<del></del>
each year listed			1		İ
b 85% of line 2a	· · · · · · · · · · · · · · · · · · ·				
c Qualifying distributions from Part XII,				·	
line 4 for each year listed					İ
d Amounts included in line 2c not				+	
used directly for active conduct of					
exempt activities					
•			<del></del>	<del>  </del>	
e Qualifying distributions made directly					
for active conduct of exempt activities.				1	
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		<u></u>			
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter			. , , , , , , , , , , , , , , , , , , ,		
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:		·	· · ·	-	
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)	1				
(2) Support from general public				<u> </u>	
and 5 or more exempt				1	
organizations as provided in	}		•	1	
section 4942(j)(3)(B)(iii)			ļ		<del></del>
(3) Largest amount of support from				1	
an exempt organization					
(4) Gross investment income	<u> </u>	<u> </u>			
Part XV   Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
at any time during	the year-see insti	ructions.)			
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w	no have contributed more	than 2% of the total conti	ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed	more than \$5,000). (See s	ection 507(d)(2).)	-		•
SEE STATEMENT 13					
b List any managers of the foundation w	no own 10% or more of th	e stock of a corporation (	or an equally large portion	of the ownership of a pa	rtnership or
other entity) of which the foundation ha			an equally longe point	5. 4.0 5oromp or a pa	and only of
NONE					
2 Information Regarding Contribu	tion Grant Giff Loo-	Scholarchia etc. D-	'Agrame'		
Check here ► X if the foundation				ot nonnet wonelseted received	nata fan franks 16
the foundation makes gifts, grants, etc.	(see instructions) to indiv	uduals or organizations in	nder other conditions on	ot accept unsolicited requi	4 2212 101 101102" 11
	<del></del>		<del></del>	_ <u> </u>	· · · · · · · · · · · · · · · · · · ·
a The name, address, and telephone nun	idei di e-iliali address ot I	ше регоон то мнот аррік	Cations snould de addres	seu.	
<del></del>				<del></del>	
<b>b</b> The form in which applications should	be submitted and informati	tion and materials they sh	iould include:		
<del></del>	<del></del>	<u> </u>			
c Any submission deadlines:					
			<u> </u>	- · · · · · · · · · · · · · · · · · · ·	
d Any restrictions or limitations on award	ls, such as by geographica	al areas, charitable fields,	kınds of institutions, or o	ther factors:	

3 Grants and Contributions Paid During the		Payment		
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 business)	or substantial contributor	recipient	33.12.12.13.1	
a Paid during the year				
ALZHEIMERS ASSOCIATION	NONE	₽C	PROGRAM SUPPORT	
322 8TH AVE, 7TH FLR				
NEW YORK, NY 10001				1,00
AMERICAN CANCER SOCIETY	NONE	PC	PROGRAM SUPPORT	
2922 MARTIN LUTHER KING JR BLVD #128 DALLAS, TX 75215				1,50
				1,30
AMERICAN HEART ASSOCIATION	NONE	₽C	PROGRAM SUPPORT	
7272 GREENVILLE AVE			0021001	
DALLAS, TX 75204		ļ		1,00
CHILDREN'S CANCER FUND	NONE	PC	PROGRAM SUPPORT.	
2900 LIVE OAK ST				
DALLAS, TX 75204				1,00
DENTON AFRICAN AMERICAN SCHOLARSHIP	NONE	PC	PROGRAM SUPPORT	
P.O. BOX 1217 DENTON, TX 76202				2 50
	NTINUATION SHEE	T(S)	▶ 3a	2,500 177,62
<b>b</b> Approved for future payment				
NONE				
	ļ			
Total	· <del>-</del>	<u> </u>	<u>▶</u> 3b	m <b>990-PF</b> (20

Part XVI-A	Analysis of Income-Producing	Activities
------------	------------------------------	------------

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		by section 512, 513, or 514	(e)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a			1 1	** *	
b	-	<del></del>	<del></del>		-
C	-				
d	·				
e	-		<del></del>		
f			<del>                                     </del>		······································
g Fees and contracts from government agencies	-				
2 Membership dues and assessments			<del>                                     </del>		••
3 Interest on savings and temporary cash	<del></del>		<del></del>		
investments					
4 Dividends and interest from securities			14	71,695.	
5 Net rental income or (loss) from real estate:			+	, _ , _ ,	
a Debt-financed property					(H)
b Not debt-financed property	i i		16	<1,954.>	
6 Net rental income or (loss) from personal	-		+-+	- 12/2021	
property					
7 Other investment income			14	38.	<del></del>
8 Gain or (loss) from sales of assets other	-		<del>                                     </del>		<del>.</del> <del></del>
than inventory			18	49,999.	
9 Net income or (loss) from special events	1		+ - 4		<del>-</del>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
h	-				
C	•				
d	-		<del></del>		
e	·		<del></del>		
12 Subtotal. Add columns (b), (d), and (e)	·	0		119,778.	0.
13 Total. Add line 12, columns (b), (d), and (e)			<del>-1 1, .</del>	13	119,778.
(See worksheet in line 13 instructions to verify calculations.)					223,,,00
· · · · · · · · · · · · · · · · · · ·	4				
Part XVI-B Relationship of Activities	to the Acco	emplishment of I	Exempt P	'urposes	
Line No. Explain below how each activity for which inc	ome is reported ii	column (e) of Part XVI	-A contribute	d importantly to the accomp	lishment of

	the foundation's exempt purposes (other than by providing funds for such purposes).
	·
$\longrightarrow$	
523621 11-24	Form <b>990-PF</b> (20

Part XVII		egarding Transfers To	and Transactions a	nd Relationships With No	ncharitable
	Exempt Organ			<u> </u>	
		rectly engage in any of the following			Yes No
	•	)(3) organizations) or in section 52		izations?	
a Transiers (1) Cash	• •	ation to a noncharitable exempt or	gamzauon oi.		<sub>1a(1)</sub>     X
(1) Casii (2) Othei					1a(1) X 1a(2) X
b Other tran		•			14(2) 12
	s of assets to a noncharita	ble exempt organization			1b(1) X
(2) Purcl	hases of assets from a no	ncharitable exempt organization			1b(2) X
(3) Renta	al of facilities, equipment,	or other assets			1b(3) X
• •	bursement arrangements				1b(4) X
• •	is or loan guarantees				1b(5) X
• •		embership or fundraising solicitation			1b(6) X 1c X
-		uling lists, other assets, or paid em		vays show the fair market value of the g	
				e in any transaction or sharing arrange	
		other assets, or services received.			
(a)Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transaction	ns, and sharing arrangements
		N/A			
				<del></del>	
					<del></del>
		<del> </del>			<del></del> -
			· · · ·		
					<del></del>
	<u> </u>				
2a Is the four	ndation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organiz	rations described	
	•	r than section 501(c)(3)) or in sect	• •		Yes X No
b If "Yes," co	omplete the following sch				
	(a) Name of org	janization	(b) Type of organization	(c) Description of re	lationship
	N/A			<del></del>	
				· · · · · · · · · · · · · · · · · · ·	
				statements, and to the best of my knowledge	May the IRS discuss this
Sign   👠	elier, it is true, correct, and cor	nplete Declaration of preparer (other tha	in taxpayer) is based on all inform.	ation of which preparer has any knowledge	return with the preparer shown below (see instr )?
Here	1 am 1	/ fee range	1/1/8/1/6	PRESIDENT	X Yes No
Sign	nature of officer or trustee	•	Date	Title	
	Printy ype preparer's na		\ I		PTIN
Paid	1 2	NOT AN Heid	ul Nolan 1	self- employed	D00034071
Paid Preparer	HEYDI J. D	VER AND TIDWELL			P00934271 5-0786316
Use Only	ram shame > wEA	HIGMOTT ONA ZGV.	і, шшғ	FIRM'S EIN > /	7-0100310
	Firm's address ▶ 1.2	221 MERIT DRIVE	. SUITE 1400		
		LLAS, TX 75251	,	Phone no. 97	2-490-1970
			···	•	Form <b>990-PF</b> (2015)

523622 11-24-15

#### 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

N	EWMAN FOUNDATION	75-2680607
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	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	
, ,	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	ule. See instructions.
General Rule		
•	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor	•
Special Rules		
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amout Z, line 1 Complete Parts I and II.	, or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III.	•
year, contributior is checked, enter purpose. Do not o	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as exclusively for religious, charitable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because ble, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000. If this box s, chantable, etc.,
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fet 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 (Form 990, 990-EZ, or 990-PF) (2015)

2

	B (Form 990, 990-EZ, or 990-PF) (2015)  ganization	l Fi	Pamployer identification number
	N FOUNDATION		75-2680607
Part I	Contributors (see instructions). Use duplicate copies of Part I	ıf addıtıonal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES AND ANN NEWMAN		Person X
	700 EL PASEO	\$1,225,494	<del></del>
	DENTON, TX 76205		(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 Oncash 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)	(d)

523452 10-26-15

Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

#### **NEWMAN FOUNDATION**

75-2680607

-		t 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. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>*</b>	
(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. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Cabadia D	/F 000 000 F7 000 PR (0045)				_	
Name of orga	(Form 990, 990-EZ, or 990-PF) (2015) nization		-		Page 4 Employer identification number	
	FOUNDATION			:	75-2680607	
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete completing Part III, enter the total of exclusively religion. Use duplicate copies of Part III if addition	columns (a) through (e) and us, chantable, etc., contributions of	the following line	entry. For organization	s	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Desc	ription of how gift is held	
	Transferee's name, address, a	(e) Transfe	-	elationship of tra	nsferor to transferee	
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift (d) Do		(d) Desc	ription of how gift is held	
- ·	Transferee's name, address, a	(e) Transfe	_	elationship of trai	nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	(c) Use of gift		ription of how gift is held	
	(e) Transfer of gift					
-  -  -	Transferee's name, address, a	nd ZIP + 4	R	elationship of trai	nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	(c) Use of gift		ription of how gift is held	
		(e) Transfe	r of gift			

523454 10-26-15

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

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(a) List and	] ( ) ( ) ( )	uired (c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
_	rick warehouse; or common stock, 2	D - Donati	UII I	1	
1a 723 SHS - CITI		ED SCHEDULE	P		10/19/15
b WELLS FARGO #5 c BROOKFIELD ASS		P		12/31/15	
		P	VARIOUS	05/12/15	
d WELLS FARGO #5			P	VARIOUS	12/31/15
f DISTRIBUTION I			P	VARIOUS	12/31/15
		S-THREE FOUNDATION			12/31/15
h CAPITAL GAINS		S-THREE FOUNDATIO	JNS P	_	12/31/15
	DIAIDENDS				
			-		
<del></del>		·			<del> </del>
<u>k</u>			<del></del>	<del></del>	<del> </del>
				<del></del>	
<u>m</u>				<del>  </del>	-
<u>n</u>					
0	(f) Depreciation allowed	(a) Cost or other book		(h) Corn or (loos)	
(e) Gross sales price	(or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)	
a 17,981.		18,191.			<210.>
b 282,616.		285,649.			<3,033.>
c 18.					18.
d 269,346.		227,573.			41,773.
e 51,977.		44,482.			7,495.
f 3,545.					3,545.
g 350.					350.
h 61.					61.
<u> </u>					
1					
k					
1					
m			<del></del>		
<u>n</u>					
O Complete and the contract of		the ferred street on 10/01/00			<del> </del>
Complete only for assets showin	ng gain in column (h) and owned by t		(l Gaine (eve	) Losses (from col. (h) ess of col. (h) gain ove	) ur col (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (¡), ıf any		out not less than "-0-")	co. (k),
а					<210.>
b		-			<3,033.>
С				•	18.
d					41,773.
е					7,495.
f					3,545.
g					350.
h					61.
ı					
J					
k					
1					
m					
n					
0					
	f If gain, also enter	in Part I line 7			
2 Capital gain net income or (net ca	apital loss) { if (loss), enter "-0	-" in Part I, line 7	2		49,999.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) an	d (6):			
If gain, also enter in Part I, line 8,	column (c).	<b>}</b>			
If (loss), enter "-0-" in Part I, line 8		J	3	N/A	

## NEWMAN FOUNDATION

Part XV Supplementary Informati				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
DENTON BENEFIT LEAGUE	NONE	₽C	PROGRAM SUPPORT	
P.O. BOX 725	NON2		T NOOLULI BOTTONI	
DENTON, TX 76202	.,	ļ	ļ	10,000
DENTON COMMUNITY HEALTH CLINIC	NONE	PC	PROGRAM SUPPORT	
25 S. LOCUST ST., SUITE 200				1,000
ENTON, TX 76201				
DENTON FESTIVAL FOUNDATION, INC	NONE	PC	PROGRAM SUPPORT	
P.O. BOX 725				
DENTON, TX 76202				500
DENTON PUBLIC SCHOOL FOUNDATION	NONE	₽C	PROGRAM SUPPORT	
.307 N. LOCUST DENTON, TX 76201				500
OCTORS WITHOUT BORDERS	NONE	PC	PROGRAM SUPPORT	
P.O. BOX 725				
DENTON, TX 76202				1,500
FRIENDS OF DENTON PUBLIC LIBRARY	NONE	PC	PROGRAM SUPPORT	
502 OAKLAND DENTON, TX 76201				500
GREATER DENTON ARTS COUNCIL	NONE	PC	PROGRAM SUPPORT	
100 E. HICKORY STREET				
DENTON, TX 76201				1,000
INTERFAITH MINISTRIES 3217 MONTROSE BLVD	NONE	PC	PROGRAM SUPPORT	
HOUSTON, TX 77006				500
	-			<u>-</u>
KERA	NONE	PC	PROGRAM SUPPORT	•
3000 HARRY HINES BLVD				
DALLAS, TX 75201		<del> </del>		10,000
LEUKEMIA AND LYMPHOMA SOCIETY 8111 LBJ FREEWAY, STE 425	NONE	PC	PROGRAM SUPPORT	
DALLAS, TX 75251				1,500
Total from continuation sheets		-		170,625.

Part'XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
OUR DAILY BREAD	NONE	₽C	PROGRAM SUPPORT	
P.O. BOX 2222				
GRAND RAPIDS, MI 49501				500
SALESMANSHIP CLUB OF DALLAS	NONE	₽C	PROGRAM SUPPORT	
400 S ZANG BLVD				
DALLAS, TX 75201				25,000
SALVATION ARMY OF DENTON	NONE	₽C	PROGRAM SUPPORT	
2801 N. ELM STREET		i		
DENTON, TX 76209				500
SMILE TRAIN	NONE	₽C	PROGRAM SUPPORT	
41 MADISON AVE 28TH FLOOR	10.12	ſ	I ROUIGET BOTTORT	
NEW YORK, NY 10010				500
SNOWMASS WILDCAT FIRE PROTECTION	NONE	₽C	PROGRAM SUPPORT	
5275 OWL CREEK ROAD,		<u> </u>		
SNOWMASS VILLAGE, CO 81615		<del>                                     </del>		500
TRINITY UNIVERSITY ONE TRINITY PLACE	NONE	PC	PROGRAM SUPPORT	
SAN ANTONIO, TX 78212				105,000
UNITED WAY OF DENTON COUNTY	NONE	PC	PROGRAM SUPPORT	
1314 TEASLEY LANE			NOOJUM DOLLOKI	
DENTON, TX 76205				10,000
UNIVERSITY OF NORTH ATHLETIC TEXAS	NONE	₽C	PROGRAM SUPPORT	
SCHOLARSHIP FUND				
801 NORTH TEXAS BLVD				
DENTON, TX 76203				625
NEXUS RECOVERY CENTER	NONE	PC	PROGRAM SUPPORT	
4525 LEMMON AVE, STE 201				50,
DALLAS, TX 75219				500
THE DALLAC BOIDS STORY	NONE	200	DROGRAM GWARAF	
THE DALLAS FOUNDATION 3963 MAPLE AVE, STE 390	NONE	PC	PROGRAM SUPPORT	
DALLAS, TX 75219				500
Total from continuation sheets				

<del></del>	AND INTE	REST	FROM SECUR	ITIES	STATEME	ENT	1
GROSS AMOUNT	GAINS	}	(A) REVENUE PER BOOKS		ST- ADJ	UST	
4. 42. 2. 65,778.		0. 0. 0. 40.	4. 42. 2. 65,738.		2.		
5,930.		21.		5,90	09.		<del>-</del>
	RENTAL I	NCOME	•	-	STATEME	ENT	2
PROPERTY				ACTIVITY NUMBER			OME
S, LP				1 2 3 4			77. 58
, PART I, I	INE 5A					1,5	35.
F	ENTAL EX	PENSE	S		STATEME	INT	3
				MOUNT	TOTA	L	
- FILING FE - REGISTERE	E D AGENT			655.			
<ul> <li>BANK CHAR</li> </ul>	A A			2. 10.			
	### AMOUNT  4.  42. 2. 65,778. 5,930.  71,756.  PROPERTY  S, LP  PART I, I	GROSS GAINS AMOUNT DIVIDEN  4.  42. 2. 65,778. 5,930.  71,756.  RENTAL I  PROPERTY  S, LP  , PART I, LINE 5A  RENTAL EX	AMOUNT DIVIDENDS  4. 0. 42. 0. 2. 0. 65,778. 40. 5,930. 21. 71,756. 61.  RENTAL INCOME  PROPERTY  S, LP  RENTAL EXPENSE  ACTIV NUMB  ASSET MANAGEMENT  FILING FEE	GROSS AMOUNT DIVIDENDS REVENUE PER BOOKS  4. 0. 4.  42. 0. 42. 2. 0. 2. 65,778. 40. 65,738. 5,930. 21. 5,909.  71,756. 61. 71,695.  RENTAL INCOME  RENTAL INCOME  RENTAL EXPENSES  ACTIVITY NUMBER AD  ASSET MANAGEMENT - FILING FEE	GROSS GAINS REVENUE NET INVERAMOUNT DIVIDENDS PER BOOKS MENT INCOME  4. 0. 4.  42. 0. 42. 2. 0. 2. 65,778. 40. 65,738. 65,75,930. 21. 5,909. 5,90  71,756. 61. 71,695. 71,60  RENTAL INCOME  RENTAL INCOME  ACTIVITY NUMBER  1 2  S, LP 3 4  , PART I, LINE 5A  RENTAL EXPENSES  ACTIVITY NUMBER AMOUNT  - ASSET MANAGEMENT  - FILING FEE 3.  REGISTERED AGENT	GROSS GAINS PER BOOKS MENT INVEST- ADDRESS MENT INCOME NET  4. 0. 4. 4.  42. 0. 42. 42. 2. 0. 2. 2. 65,778. 40. 65,738. 65,738. 5,930. 21. 5,909. 5,909.  71,756. 61. 71,695. 71,695.  RENTAL INCOME STATEME  PROPERTY ACTIVITY GROWN NUMBER RENTAL  1 2 2 3 4 4  , PART I, LINE 5A  RENTAL EXPENSES STATEME  ACTIVITY NUMBER AMOUNT TOTAL  ACSSET MANAGEMENT  - ASSET MANAGEMENT  - FILING FEE 3 REGISTERED AGENT	GROSS GAINS REVENUE NET INVEST- ADJUST AMOUNT DIVIDENDS PER BOOKS MENT INCOME NET INC  4. 0. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.

.NEWMAN FOUNDATION				75-2680607
PCP - THREE FOUNTAINS, LP - F. PCP - THREE FOUNTAINS, LP - R.			5. 2.	
AGENT FEES PCP - THREE FOUNTAINS, LP - DO PCP - THREE FOUNTAINS, LP - PD			14.	
COSTS PCP - THREE FOUNTAINS, LP - RI LOSS	ENTAL		3. 1,536.	
- ST LEGACY RESERVES, LP - SECTION EXPENDITURES	UBTOTAL - 59(E)(2)	3	429.	1,898.
	UBTOTAL -	4		429.
TOTAL RENTAL EXPENSES				3,489.
NET RENTAL INCOME TO FORM 990	-PF, PART	I, LINE 5B	_	<1,954.>
FORM 990-PF	OTHER	INCOME	٤	STATEMENT 4
DESCRIPTION			(B) NET INVEST- MENT INCOME	ADJUSTED
PHOENIX K-1 - ROYALTY INCOME PHOENIX K-1 - ROYALTY EXPENSE PHOENIX K-1 - ORDINARY INCOME		445. <163.> <964.>	<163.>	•
LEGACY RESERVES K-1 - ROYALTY INCOME LEGACY RESERVES K-1 - ORDINARY		85.	85.	
INCOME	<del>.</del>	635.	635.	
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	38.	38.	
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	6,120	3,060	,	0.
TO FORM 990-PF, PG 1, LN 16B	6,120	3,060		0.

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMENT FEES	10,057.	10,057.		0.	
TO FORM 990-PF, PG 1, LN 160	10,057.	10,057.		0.	
FORM 990-PF	TAX	ES	S	PATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAX PAID EXCISE TAXES	183. 2,100.	183.		0.	
TO FORM 990-PF, PG 1, LN 18	2,283.	183.		0.	
FORM 990-PF	OTHER E	XPENSES	S'	rātement 8	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PHOENIX K-1 - PARTNERSHIP ADMINISTRATION MISCELLANEOUS	4,311.	4,311.		0.	
PCP - WYNNEWOOD K-1 - ASSET MANAGEMENT FEE PCP - WYNNEWOOD K-1 - FILING	655.	655.		0.	
FEE PCP - WYNNEWOOD K-1 -	3.	3.		0.	
REGISTERED AGENT FEES PCP - WYNNEWOOD K-1 - BANK CHARGES	1. 2.	1.		0.	
PCP - WYNNEWOOD K-1 - D&O/FINDRA	10.			0.	
PCP - WYNNEWOOD K-1 - DEBT-FINANCED DISTRIBUTIONS	491.	491.		0.	
PCP - THREE FOUNTAINS, LP - ASSET MANAGEMENT FEES	338.	338.		0.	
PCP - THREE FOUNTAINS, LP -					

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PCP - THREE FOUNTAINS, LP - REGISTERED AGENT FEES	2.		2.			0.
PCP - THREE FOUNTAINS, LP - D&O/FINDRA	14.		14.			0.
PCP - THREE FOUNTAINS, LP - PRINTING COSTS	3.		3.			0.
PCP - THREE FOUNTAINS, LP - RENTAL LOSS LEGACY RESERVES, LP -	1,536.	1,	,536.			0.
SECTION 59(E)(2) EXPENDITURES	429.		429.			0.
TO FORM 990-PF, PG 1, LN 23	7,930.	7,	,865.			0.
EODM 000 DE	CORDORAME	CMOCK		<del> </del>	CMAMENENM	
FORM 990-PF	CORPORATE	STOCK			STATEMENT	9
DESCRIPTION			B00	K VALUE	FAIR MARKE VALUE	т
SECURITIES ACCOUNT #6654-5078 INDEPENDENT BANKERS ASSOCIATION ACCESS 1ST CAPITAL BANK STOCK SECURITIES ACCOUNT #5447-2501	ON		1	0. 25,000. 75,000. ,156,827.	25,0 75,0 1,186,4	00.
_TOTAL TO FORM 990-PF, PART II	, LINE_10B_		1	,256,827.	1,286,4	29. 
FORM 990-PF	CORPORATE	BONDS			STATEMENT	10
DESCRIPTION			BOO	K VALUE	FAIR MARKE VALUE	Т
MERRILL LYNCH 7% CUM PERP				52,070.	52,0	
BARCLAY BANK 7.75% ARCH CAPITAL GROUP 6.75% PREF	מסספח			50,000.	50,0	
OWEST CORP 7% PREFERRED	UNKED			25,000. 52,140.	26,8 51,9	
BANK OF AMER 6.625% PREFERRED				50,472.	53,4	
JP MORGAN 6.7% PREFERRED				52,140.	54,9	
JP MORGAN 6.15%				49,700.	51,8	
QWEST CORP 6.625%				50,000.	50,3	60.
TOTAL TO FORM 990-PF, PART II	, LINE 10C			381,522.	391,5	60.

FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
PHOENIX 2010 PARTNERS, LP PCP - WYNNEWOOD, LP PCP - THREE FOUNTAINS, LP BROOKFIELD INFRASTRUCTURE PARTNERS LEGACY RESERVES LP SPRINGSTONE	COST COST COST COST COST COST	0. 0. 0. 2. 13,244. 200,000.	13,012. 0. 7,212. 36. 2,094. 199,969.
TOTAL TO FORM 990-PF, PART II, LINE 13		213,246.	222,323.
FORM 990-PF OTH	ER LIABILITIES		STATEMENT 12
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
PCP - WYNNEWOOD, LP	-	0.	39,919.
TOTAL TO FORM 990-PF, PART II, LIN	E 22	0.	39,919.
FORM 990-PF PART XV - LINE 1A LIST OF FOUNDATION MANAGERS			STATEMENT 13

NAME OF MANAGER

JAMES K. NEWMAN GLORIA A. NEWMAN