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Form 990-PF

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation THE ROLLING DOG FARM		A Employer identification number 81-0537598	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 150		B Telephone number (see instructions)	
City or town, state or province, country, and ZIP or foreign postal code LANCASTER, NH 03584		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 3,638,464		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .	652,043			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	2,994	2,994	2,994	
	4 Dividends and interest from securities . . . . .	13	13	13	
	5a Gross rents . . . . .	9,900	9,900	9,900	
	b Net rental income or (loss) <u>-14,803</u>				
	6a Net gain or (loss) from sale of assets not on line 10	-5,916			
	b Gross sales price for all assets on line 6a <u>35,446</u>				
	7 Capital gain net income (from Part IV, line 2) . . .				
	8 Net short-term capital gain . . . . .			21	
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	659,034	12,907	12,928	
	13 Compensation of officers, directors, trustees, etc	156,806			156,806
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule). . . . .				
	b Accounting fees (attach schedule). . . . .	7,929			7,929
	c Other professional fees (attach schedule) . . . . .	2,871			2,871
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	22,371			22,371
	19 Depreciation (attach schedule) and depletion . . .	124,971	6,965		
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings. . . . .	96			96
	22 Printing and publications . . . . .	6,883			6,883
	23 Other expenses (attach schedule). . . . .	132,472	17,738		114,734
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	454,399	24,703		311,690
	25 Contributions, gifts, grants paid . . . . .	0			0
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	454,399	24,703		311,690
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	204,635			
	b <b>Net investment income</b> (if negative, enter -0-)		0		
	c <b>Adjusted net income</b> (if negative, enter -0-) . . .			12,928	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	1,202	30,074	30,074
	2	Savings and temporary cash investments . . . . .	1,466,107	1,606,533	1,606,533
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ 65,297 Less allowance for doubtful accounts ▶ _____	93,647	65,297	65,297
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .	4,435	4,695	4,695
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	3,407	6,169	6,169
	c	Investments—corporate bonds (attach schedule) . . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans. . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ 2,498,981 Less accumulated depreciation (attach schedule) ▶ _____ 573,285	1,865,338	1,925,696	1,925,696
15	Other assets (describe ▶ _____)				
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	3,434,136	3,638,464	3,638,464	
Liabilities	17	Accounts payable and accrued expenses . . . . .	4,644	4,788	
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule). . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities(add lines 17 through 22) . . . . .	4,644	4,788	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .	3,429,492	3,633,676	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances(see instructions) . . . . .	3,429,492	3,633,676	
31	Total liabilities and net assets/fund balances(see instructions) . . . . .	3,434,136	3,638,464		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1	3,429,492
2	Enter amount from Part I, line 27a . . . . .	2	204,635
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	3,634,127
5	Decreases not included in line 2 (itemize) ▶ _____	5	451
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	3,633,676

Part IV

Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	<div><div>If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7</div></div>	2	-5,916
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) <div>If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . .</div>		3	21

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	357,067	1,131,520	0 31556
2013	346,073	776,679	0 44558
2012	354,118	381,197	0 92896
2011	314,366	300,936	1 04463
2010	417,227	389,440	1 07135

2	Total of line 1, column (d). . . . .	2	3 806085
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 761217
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. . . . .	4	1,533,328
5	Multiply line 4 by line 3. . . . .	5	1,167,195
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	
7	Add lines 5 and 6. . . . .	7	1,167,195
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	311,690

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/>			
		and enter "N/A" on line 1			
		Date of ruling or determination letter _____			
		(attach copy of letter if necessary—see instructions)			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	0
c		All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	
3		Add lines 1 and 2. . . . .		3	
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	
6		Credits/Payments			
a	2015 estimated tax payments and 2014 overpayment credited to 2015		6a		
b	Exempt foreign organizations—tax withheld at source. . . . .		6b		
c	Tax paid with application for extension of time to file (Form 8868). . . . .		6c		
d	Backup withholding erroneously withheld. . . . .		6d		
7		Total credits and payments. Add lines 6a through 6d. . . . .		7	
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed. . . . .		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded		11	

Part VII-A

Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		Yes	No
		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .			No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ _____ (2) On foundation managers \$ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions): CO, MT, NH, WA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .	9	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. . . . .	10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶WWW.ROLLINGDOGFARM.ORG	13	Yes	
14	The books are in care of ▶STEVEN P SMITH Telephone no ▶ Located at ▶PO BOX 150 LANCASTER NH ZIP+4 ▶03584			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶	15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes", enter the name of the foreign country ▶	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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 ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>	1b		No
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? . . . . . <input type="checkbox"/>	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . . <input type="checkbox"/>	2b		No
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i> ) . . . . . <input type="checkbox"/>	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes

No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes

No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

Yes

No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A) ? (see instructions).

Yes

No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes

No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

No

Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

Yes

No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes

No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b



No

Part VIII

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

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
STEVEN P SMITH  PO BOX 150 LANCASTER, NH 03584	Executive Direc 60 00	68,203	10,200	
ALAYNE M MARKER  PO BOX 150 LANCASTER, NH 03584	OPERATIONS DIRE 60 00	68,203	10,200	
LAURA WHALE 2680 COLT DRIVE EAST HELENA, MT 59635	Director 2 00	0		

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

Total

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

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Part VIII

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

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

Part IX-A

Summary of Direct Charitable Activities

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

	Expenses
1 SEE STATEMENT 10	0
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3 <div></div>	



**Part X**

**Minimum Investment Return**  
(All domestic foundations must complete this part. Foreign foundations,see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	3,596
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	1,553,082
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	1,556,678
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	1,556,678
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	23,350
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	1,533,328
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	76,666

**Part XI**

**Distributable Amount**  
(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	

**Part XII**

**Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	311,690
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	311,690
<b>5</b>	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). . . . .	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	311,690
<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010. . . . .				
b From 2011. . . . .				
c From 2012. . . . .				
d From 2013. . . . .				
e From 2014. . . . .				
f Total of lines 3a through e. . . . .				
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ _____				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions). . . . .				
c Treated as distributions out of corpus (Election required—see instructions). . . . .				
d Applied to 2015 distributable amount. . . . .				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .				
10 Analysis of line 9				
a Excess from 2011. . . . .				
b Excess from 2012. . . . .				
c Excess from 2013. . . . .				
d Excess from 2014. . . . .				
e Excess from 2015. . . . .				

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . .

2001-02-02

b

Check box to indicate whether the organization is a private operating foundation described in section ☒ 4942(j)(3) or ☐ 4942(j)(5)

<b>2a</b>	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			<b>(e) Total</b>
		<b>(a) 2015</b>	<b>(b) 2014</b>	<b>(c) 2013</b>	<b>(d) 2012</b>	
		12,928	15,465	9,503	750	38,646
<b>b</b>	85% of line 2a . . . . .	10,989	13,145	8,078	638	32,850
<b>c</b>	Qualifying distributions from Part XII, line 4 for each year listed . . . . .	311,690	357,067	346,073	354,118	1,368,948
<b>d</b>	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b>	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	311,690	357,067	346,073	354,118	1,368,948
<b>3</b>	Complete 3a, b, or c for the alternative test relied upon					
<b>a</b>	"Assets" alternative test—enter					
	<b>(1)</b> Value of all assets . . . . .					
	<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b>	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					0
<b>c</b>	"Support" alternative test—enter					
	<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .	652,043	897,812	1,033,961	822,968	3,406,784
	<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .	652,043	897,812	1,033,961	822,968	3,406,784
	<b>(3)</b> Largest amount of support from an exempt organization	25,000	51,000	25,000	15,000	116,000
	<b>(4)</b> Gross investment income	3,007	2,220	1,804	739	7,770

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number or email address of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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

Form **990-PF** (2015)

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b>	Program service revenue					
<b>a</b>	_____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>f</b>	_____					
<b>g</b>	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments. . . . .					
<b>3</b>	Interest on savings and temporary cash investments . . . . .			14	2,994	
<b>4</b>	Dividends and interest from securities. . .			14	13	
<b>5</b>	Net rental income or (loss) from real estate					
<b>a</b>	Debt-financed property. . . . .					
<b>b</b>	Not debt-financed property. . . . .					-14,803
<b>6</b>	Net rental income or (loss) from personal property . . . . .					
<b>7</b>	Other investment income. . . . .					
<b>8</b>	Gain or (loss) from sales of assets other than inventory . . . . .					-5,916
<b>9</b>	Net income or (loss) from special events					
<b>10</b>	Gross profit or (loss) from sales of inventory . . .					
<b>11</b>	Other revenue <b>a</b> _____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>12</b>	Subtotal Add columns (b), (d), and (e). .				3,007	-20,719
<b>13</b>	<b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .					-17,712

(See worksheet in line 13 instructions to verify calculations )

[illegible]



Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
39 KROGER	P	2015-03-30	2015-04-06
52 STARBUCKS	P	2015-04-15	2015-04-20
52 APPLE HOSPITALITY	P	2015-06-29	2015-07-01
77 BROOKFIELD ASSET MGMT VOTING A	P	2015-12-09	2015-12-15
50 NIKE	P	2015-12-29	2015-12-30
50 UNITED TECHNOLOGIES CORP	P	2015-12-19	2015-12-30
LIVESTOCK SALES	P	2001-01-01	2015-12-31
GROUND ROLLER	P	2008-02-29	2015-12-04
COMPOST TEA UNIT	P	2009-01-01	2015-08-21
HORSE WAGON	P	2009-06-18	2015-05-15

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
3,001		2,998	3
2,487		2,520	-33
972		989	-17
2,425		2,508	-83
3,178		3,213	-35
4,853		4,667	186
5,940			5,940
750	3,500	3,500	750
1,800	3,994	4,195	1,599
450	834	1,000	284

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
			3
			-33
			-17
			-83
			-35
			186
			5,940
			750
			1,599
			284

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	(d) Date sold (mo , day, yr )
OBSOLETE ASSETS	P	2001-01-01	2015-01-01
PIONEER H	P	2011-11-09	2015-05-20
MANURE SPREADER	P	2011-11-30	2015-06-23
DISC MOWER	P	2012-06-24	2015-08-17
HORSE DRAWN WORK SLED	P	2012-05-15	2015-12-05
HORSE STOCK	P	2012-03-15	2015-05-20
PTO & MOWER	P	2012-03-15	2015-01-01

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
	14,606	25,296	-10,690
1,495	2,380	4,648	-773
2,100	2,336	4,565	-129
1,850	3,724	8,230	-2,656
650	738	1,440	-52
395	429	926	-102
3,100	2,181	5,389	-108

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-10,690
			-773
			-129
			-2,656
			-52
			-102
			-108



**TY 2015 Accounting Fees Schedule****Name:** THE ROLLING DOG FARM**EIN:** 81-0537598**Software ID:** 15000324**Software Version:** 2015v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING AND TAX PREP	7,376	0	0	7,376
BOOKKEEPING	553	0	0	553

**TY 2015 Compensation Explanation****Name:** THE ROLLING DOG FARM**EIN:** 81-0537598**Software ID:** 15000324**Software Version:** 2015v2.0

Person Name	Explanation
STEVEN F SMITH	SMITH RECEIVED COMPENSATION FOR HIS WORK AS A FULL-TIME NON-PROFIT MANAGER AND ANIMAL CARE PROVIDER, NOT FOR HIS ROLE AS AN OFFICER OR DIRECTOR

**TY 2015 Compensation Explanation****Name:** THE ROLLING DOG FARM**EIN:** 81-0537598**Software ID:** 15000324**Software Version:** 2015v2.0

Person Name	Explanation
ALAYNE M MARKER	MARKER RECEIVED COMPENSATION FOR HER WORK AS A FULL-TIME NON-PROFIT MANAGER AND ANIMAL CARE PROVIDER, NOT FOR HER ROLE AS AN OFFICER OR DIRECTOR

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

TY 2015 Depreciation Schedule

Name: THE ROLLING DOG FARM

EIN: 81-0537598

Software ID: 15000324

Software Version: 2015v2.0

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDINGS - RENTAL	2013-05-06	188,411	11,419	SL	27 5000	6,851	6,851		
RANGE - RENTAL	2013-06-06	800	181	SL	7 0000	114	114		

## TY 2015 General Explanation Attachment

**Name:** THE ROLLING DOG FARM

**EIN:** 81-0537598

**Software ID:** 15000324

**Software Version:** 2015v2.0

Identifier	Return Reference	Explanation
	General Explanation Supplemental Information for Form 990-PF	<p>STATEMENT 10FORM 990-PF, PART IX-ASUMMARY OF DIRECT CHARITABLE ACTIVITIES FOR 2015990-PF NarrativeRolling Dog Farm - A Special Place for Disabled AnimalsThis was one of our quietest, most uneventful years on the veterinary front in a long time We spent about \$37,000 in veterinary expenses, roughly half of the previous year We had very few emergencies, fewer surgeries, and no new chronic medical conditions that emerged All of which made us very grateful indeedWe are blessed that our disabled dogs who do have existing chronic diseases Aurora with protein-losing nephropathy (a rare kidney disorder), Sophie with diabetes, and Darla with recurring mast cell cancers continue to do very well We took in two disabled animals in 2015 Taco, a blind elderly Jack Russell terrier mix from Tennessee who was the victim of neglect, and Mabel, a blind Poodle mix from Texas who had been picked up as a stray After arriving here, Taco developed an unusual liver problem that fortunately responded to several medications, and he is now perfectly healthy Mabel has so far been the picture of good health since coming to us We lost four of our elderly dogs during the year, along with one of our two remaining blind horses We ended the year with 19 disabled dogs and one blind horse Lena, who was the very first disabled animal who came to us back in 2000 On the revenue side, we brought in a total of \$659,034, with \$145,662 of that from a single bequest This continues a trend in recent years of bequests forming an increasingly large part of our revenue base Our total operating expenses were \$454,399 (Actual cash expenses for charitable purposes were significantly less, amounting to \$311,690, since depreciation alone accounted for \$124,971 of the total expense ) Direct expenses were \$366,186 and indirect (administrative and outreach) expenses were \$63,513 Our direct-to-indirect ratio was 85% to 15% Net income was \$204,635 Cash on hand grew to just over \$1.6 million This is our crucial operating reserve, which provides long-term financial security for the animals should future economic upheaval erode donations As always, we are so appreciative of the generous gifts that kind-hearted and compassionate people make for our disabled animals That is what makes this special place for them possible Thank you so much for your support!Steve Smith and Alayne Marker, Co-founders</p>

**TY 2015 Land, Etc.  
Schedule****Name:** THE ROLLING DOG FARM**EIN:** 81-0537598**Software ID:** 15000324**Software Version:** 2015v2.0

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Auto./Transportation Equip.	124,627	77,026	47,601	47,601
Machinery and Equipment	236,831	117,136	119,695	119,695
Buildings	1,417,719	379,123	1,038,596	1,038,596
Land	719,804		719,804	719,804

TY 2015 Other Decreases Schedule

**Name:** THE ROLLING DOG FARM

**EIN:** 81-0537598

**Software ID:** 15000324

**Software Version:** 2015v2.0

Description	Amount
NET UNREALIZED GAINS & LOSSES ON INVESTMENTS	451

## TY 2015 Other Expenses Schedule

**Name:** THE ROLLING DOG FARM

**EIN:** 81-0537598

**Software ID:** 15000324

**Software Version:** 2015v2.0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANIMAL BUILDINGS MAINT & INSURANCE	12,749			12,749
ANIMAL BUILDINGS UTILITIES	6,996			6,996
ANIMAL CARE & FARRIER	1,060			1,060
ANIMAL FEED	6,896			6,896
ANIMAL SUPPLIES	2,895			2,895
ANIMAL TRANSPORT	500			500
AUTOMOBILE EXPENSE	6,093			6,093
BANK AND E-COMMERCE FEES	265			265
COMPUTING & SOFTWARE	3,270			3,270
DUES & SUBSCRIPTIONS	452			452
EMPLOYEE HEALTH INSURANCE	16,743			16,743
INSURANCE	6,513			6,513
OFFICE SUPPLIES	1,001			1,001
PASTURE & GROUNDS MAINTENANCE	1,600			1,600
POSTAGE AND DELIVERY	6,269			6,269
Rental Expenses	17,738	17,738		17,738
RENTAL EXPENSES- ADJUSTMENT				-17,738
TELEPHONE	2,012			2,012
TRACTOR & EQUIPMENT EXPENSE	640			640
VETERINARY	37,185			37,185
WEB SITE	1,595			1,595



**TY 2015 Other Professional Fees Schedule****Name:** THE ROLLING DOG FARM**EIN:** 81-0537598**Software ID:** 15000324**Software Version:** 2015v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	2,871	0	0	2,871

**TY 2015 Taxes Schedule****Name:** THE ROLLING DOG FARM**EIN:** 81-0537598**Software ID:** 15000324**Software Version:** 2015v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	10,435			10,435
PROPERTY TAXES	11,674			11,674
TAX & LICENSE	262			262

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF.</b>  ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.</b>	OMB No 1545-0047
		<b>2015</b>

<b>Name of the organization</b> THE ROLLING DOG FARM	<b>Employer identification number</b> 81-0537598
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Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

<b>Name of organization</b> THE ROLLING DOG FARM	<b>Employer identification number</b> 81-0537598
---	---

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table   	  \$  	<b>Person</b> <b>Payroll</b> <b>Noncash</b>  (Complete Part II for noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	   	  \$  	<b>Person</b> <b>Payroll</b> <b>Noncash</b>  (Complete Part II for noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	   	  \$  	<b>Person</b> <b>Payroll</b> <b>Noncash</b>  (Complete Part II for noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	   	  \$  	<b>Person</b> <b>Payroll</b> <b>Noncash</b>  (Complete Part II for noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	   	  \$  	<b>Person</b> <b>Payroll</b> <b>Noncash</b>  (Complete Part II for noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	   	  \$  	<b>Person</b> <b>Payroll</b> <b>Noncash</b>  (Complete Part II for noncash contribution )

<b>Name of organization</b> THE ROLLING DOG FARM	<b>Employer identification number</b> 81-0537598
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**Part II** **Noncash Property**  
(see instructions) Use duplicate copies of Part II if additional space is needed

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

<b>Name of organization</b> THE ROLLING DOG FARM	<b>Employer identification number</b> 81-0537598
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Part III

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

Use duplicate copies of Part III if additional space is needed

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

Additional Data

Software ID: 15000324  
Software Version: 2015v2.0  
EIN: 81-0537598  
Name: THE ROLLING DOG FARM

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>			<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
	LONGFIELD FAMILY CHAR FOUNDATION PO BOX 1020 ISLE OF PALMS, SC 29451	\$ 20,000	
<u>2</u>			<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
	THE POWELL FOUNDATION 6843 N KNOX AVENUE LINCOLNWOOD, IL 60712	\$ 25,000	
<u>3</u>			<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
	ROBERT NUGENT PO BOX 7022 RANCHO SANTA FE, CA 92067	\$ 6,000	
<u>4</u>			<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
	NANCY COGSWELL 232 E MAIN STREET WARNER, NH 03278	\$ 9,000	
<u>5</u>			<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
	PATRICIA WEST 109 SMITH FOREST LANE ALPHARETTA, GA 30004	\$ 11,224	
<u>6</u>			<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
	THE ADELAAR FOUNDATION 15 FENIMORE ROAD SCARSDALE, NY 10583	\$ 5,000	

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7			<b>Person</b> <input checked="" type="checkbox"/>
	JEFF BERRY AND ERIC POLITZER		<b>Payroll</b> <input checked="" type="checkbox"/>
	2131 KEW DRIVE	\$ 5,000	<b>Noncash</b>
	LOS ANGELES, CA 90046		(Complete Part II for noncash contribution )
8			<b>Person</b> <input checked="" type="checkbox"/>
	SVANEE'S FOUNDATION		<b>Payroll</b> <input checked="" type="checkbox"/>
	PO BOX 77012	\$ 5,000	<b>Noncash</b>
	SEATTLE, WA 98177		(Complete Part II for noncash contribution )
9			<b>Person</b> <input checked="" type="checkbox"/>
	FREDRICK MITCHELL		<b>Payroll</b> <input checked="" type="checkbox"/>
	211 MAIN STREET FLOOR 10	\$ 5,000	<b>Noncash</b>
	SAN FRANCISCO, CA 94105		(Complete Part II for noncash contribution )
10			<b>Person</b> <input checked="" type="checkbox"/>
	JEWISH COMMUNITY FOUNDATION		<b>Payroll</b> <input checked="" type="checkbox"/>
	4950 MURPHY CANYON ROAD	\$ 10,000	<b>Noncash</b>
	SAN DIEGO, CA 92123		(Complete Part II for noncash contribution )
11			<b>Person</b> <input checked="" type="checkbox"/>
	SIMONE FRIEDMAN		<b>Payroll</b> <input checked="" type="checkbox"/>
	1255 25TH STREET NW 1027	\$ 5,500	<b>Noncash</b>
	WASHINGTON, DC 20037		(Complete Part II for noncash contribution )
12			<b>Person</b> <input checked="" type="checkbox"/>
	SHIRLEY K SCHLAFER FOUNDATION		<b>Payroll</b> <input checked="" type="checkbox"/>
	727 WILLITS STREET	\$ 5,000	<b>Noncash</b>
	BIRMINGHAM, MI 48009		(Complete Part II for noncash contribution )



(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>			<b>Person</b> <input checked="" type="checkbox"/>
	<u>KINDY FRENCH</u>		<b>Payroll</b> <input type="checkbox"/>
	<u>2330 CALIFORNIA STREET NW</u>	<u>\$ 5,000</u>	<b>Noncash</b>
	<u>WASHINGTON, DC 20008</u>		(Complete Part II for noncash contribution )
<u>14</u>			<b>Person</b> <input checked="" type="checkbox"/>
	<u>DARLENE HOWARD</u>		<b>Payroll</b> <input type="checkbox"/>
	<u>4924 WOLF ROAD</u>	<u>\$ 5,000</u>	<b>Noncash</b>
	<u>WESTERN SPRINGS, IL 60558</u>		(Complete Part II for noncash contribution )
<u>15</u>			<b>Person</b> <input checked="" type="checkbox"/>
	<u>ESTATE OF ROSALIE DEAN</u>		<b>Payroll</b> <input type="checkbox"/>
	<u>601 SOUTH FIRST ST PO BOX 515</u>	<u>\$ 145,662</u>	<b>Noncash</b>
	<u>HAMILTON, MT 59040</u>		(Complete Part II for noncash contribution )