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

OMB No 1545 0052

2015

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

| For ca | alendar year 2015, or tax year beginning | , 2015 | 5, and ending | , | |
|-------------------|---|---|---------------------------------------|--|--|
| AMBI | ROSIANI-PASTORE FOUNDATION I | NC | | A Employer identification no 82-0510166 | ımber |
| 1075 | W. ODEN BAY ROAD DPOINT, ID 83864-6496 | | | B Telephone number (see in: (208) 265-86 | |
| | · | | | C If exemption application is | s pending, check here |
| G Ch | neck all that apply: Initial return Final return | Initial return of a form | mer public charity | D 1 Foreign organizations, che | eck here . ► |
| | Address change | Name change | | 2 Foreign organizations mee here and attach computati | eting the 85% test, check |
| H Ch | leck type of organization: X Section 50 Section 4947(a)(1) nonexempt charitable | 1(c)(3) exempt private | | E If private foundation statu | |
| I Fai | r market value of all assets at end of year J Aco | counting method. X C | | under section 507(b)(1)(A | |
| (fro ► s | om Part II, column (c), line 16) | Other (specify) | | F If the foundation is in a 6 | |
| Part | 17,01,003. (, a, t, | , column (d) must be o | | under section 507(b)(1)(B | |
| | Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) | (a) Revenue and expenses per books | (b) Net investmen income | t (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 Contributions, gifts, grants, etc, received (attach schedule). | 1,000. | | | 7 |
| | 2 Ck X If the foundation is not required to attach Sch B | | · · · · · · | * | |
| | 3 Interest on savings and temporary cash investments | | | | N 24 3 34 1 |
| | 4 Dividends and interest from securities | 92,781. | 92,78 | 92,781. | |
| | b Net rental income or (loss) | , * · · · · · · · · · · · · · · · · · · | 7 | , v^ , - 1- | |
| R | 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 6 502 075 | 342,804. | | | 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| E V | assets on line 6a 6, 592, 975. 7 Capital gain net income (from Part IV, line 2) | | 342,80 | 1 *** | |
| E N | 8 Net short-term capital gain | , , , , , , , , , , , , , , , , , , , | | 0. | |
| Ŭ | 9 Income modifications | | | | \$2000 |
| - | 10 a Gross sales less returns and allowances | | | | |
| | b Less Cost of goods sold | | [3, 3 ³ - 3 * * * * * * | | |
| | C Gross profit or (loss) (attach schedule) | | , . | * | 3.64 4 74.0 |
| | 11 Other income (attach schedule) | 022 | 000 | , [| |
| | SEE STATEMENT 1 12 Total. Add lines 1 through 11 | 922. 437,507. | 922 436,50 | | |
| | 13 Compensation of officers, directors, trustees, etc. | 0. | 150/00 | 327702. | |
| | 14 Other employee salaries and wages | | · · · · · · · · · · · · · · · · · · · | | |
| | 15 Pension plans, employee benefits | | | | FIVED |
| A D M | b Accounting fees (attach sch) SEE ST 2 | 2,812. | 2,812 | 2. | 10 |
| I N | C Other prof fees (attach sch) | | | 22 | 1-9 2016 |
| PS | 17 Interest | 0.450 | 0.456 | MAY WAY | 1 3 2010 |
| E R A | 18 Taxes (attach schedule)(see instrs) SEE STM 3 19 Depreciation (attach | 9,459. | 9,459 |). | |
| T | schedule) and depletion | | | | |
| N V | 20 Occupancy 21 Travel, conferences, and meetings | | | | |
| A E N X D P | 22 Printing and publications | | | | |
| A E X P E | 23 Other expenses (attach schedule) | 1 266 | 1 266 | | |
| N | SEE STATEMENT 4 | 1,266. | 1,266 | ? <u>.</u> | |
| S E S | expenses Add lines 13 through 23 | 13,537. | 13,537 | | * *** |
| | 25 Contributions, gifts, grants paid PART XV | 48,846. | | | 48,846. |
| | 26 Total expenses and disbursements Add lines 24 and 25 | 62,383. | 13,537 | 0. | 48,846. |
| | 27 Subtract line 26 from line 12 | | | , | |
| | a Excess of revenue over expenses and disbursements | 375,124. | * | ` | |
| | b Net investment income (if negative, enter 0) | | 422,970 | | |
| | C Adjusted net income (if negative, enter -0) | , , , | | 92,781. | |

| Form | 990 | -PF (2015) AMBROSIANI-PASTORE FOUNDATION | | | | | 10166 Page 2 |
|-------------------|---------------|---|----------|--|--|----------------------------|--|
| Par | t II | Balance Sheets Attached schedules and amounts in the description of the column should be for end of-year amounts only | on | Beginning of year | | | of year (c) Fair Market Value |
| | 1 | (See instructions) Cash — non-interest-bearing | | (a) Book Value 2,835,405. | (b) Book Valu 415, 3 | | 415, 381. |
| | 1 | | } | 2,833,403. | 415,5 | οι. | 415,301. |
| | 2 | | - | | | | |
| | 3 | | | , , , , , , | and the state of t | | ъ |
| | ١. | Less: allowance for doubtful accounts | | 2,000. | | | |
| | 4 | Pledges receivable Less: allowance for doubtful accounts | | _ ~ 2 | | | |
| | 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 sch) | | is a streng per | y saut y | | \ |
| A S E T | ľ | Less: allowance for doubtful accounts | | | | | |
| š | 8 | Inventories for sale or use . | . [| | | | |
| E | 9 | Prepaid expenses and deferred charges. | | | | | |
| Ś | 10: | a Investments — U.S. and state government obligations (attach schedule) | } | | | | |
| | | b Investments — corporate stock (attach schedule). | | 9,119,779. | 11,916,9 | 27. | 4,346,128. |
| | ١, | c Investments — corporate bonds (attach schedule). | | | | | |
| | 11 | Investments — land, buildings, and equipment basis | | | | , * | |
| | | Less: accumulated depreciation (attach schedule) | | um 1995 bis z 6 Aun 1997 y Papaketandek takisukturana (| to an a statemental designment and the second | amad some | CELL ARE ONLY WINDOWS OF OUR STATE |
| | 12 | Investments – mortgage loans | | | | | |
| | 13 | Investments – other (attach schedule) | ľ | | | | |
| | 14 | | Ī | | 200 T 300 C | < | 14 |
| | | Less: accumulated depreciation (attach schedule). | | a y nak (22 torjan 1880), ya Si Monan Makabunun ki Miladilin tika dilili d | Signal To a T decade of the Samuel State of th | a n bin/in n ki | Committee of the second |
| | 15 | | | | | | |
| | 16 | Total assets (describe Total assets (to be completed by all filers — see the instructions Also, see page 1, item I) | '} ' | 11,957,184. | 12,332,3 | 08. | 4,761,509. |
| L | 17 | Accounts payable and accrued expenses | | · · · · · · · · · · · · · · · · · · · | | | 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| A | 18 | Grants payable | [| | | | |
| B | 19 | Deferred revenue | [| | | | |
| - ! | 20 | Loans from officers, directors, trustees, & other disqualified persons . | , [| | | | |
| ī | 21 | Mortgages and other notes payable (attach schedule) | Ī | | | | |
| Ţ | 22 | Other liabilities (describe ► |) | | | | |
| E S | 22 | Tabel liabilities (add leas 17 through 22) | | 0. | | 0. | |
| | 23 | Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here | <u>-</u> | 9. | | <u> </u> | |
| | | and complete lines 24 through 26 and lines 30 and 31. | 4 | | | | |
| NF | 24 | Unrestricted . | . [| | · | | , , , , , , , |
| N F E U T N | 25 | Temporarily restricted . | | | | | *************************************** |
| Ð | 26 | Permanently restricted | | | | | |
| A B S L T A | | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. | ► X | | | | |
| ĔÛ | 27 | Capital stock, trust principal, or current funds | | | | | * |
| T A S N | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | . - | | | | 1 (3.2 |
| C | 29 | Retained earnings, accumulated income, endowment, or other funds | . ' | 11,957,184. | 12,332,3 | 08. | 1 ,, |
| O E R S | 30 | Total net assets or fund balances (see instructions) | · | 11,957,184. | 12,332,3 | | , , |
| 🍹 | 31 | Total liabilities and net assets/fund balances (see instructions) | | 11,957,184. | 12,332,3 | | |
| Part | | Analysis of Changes in Net Assets or Fund Ba | lance | | | | <u> </u> |
| | | I net assets or fund balances at beginning of year – Part II | | | oree with | | |
| 1 | rota: end- | i net assets or fund balances at beginning of year — Part II of-year figure reported on prior year's return) | , colui | mi (a), mie so (must di | | 1_ | 11,957,184. |
| 2 | Ente | r amount from Part I, line 27a | | | ſ | 2 | 375,124. |

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)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize)

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30

6 12, 332, 308.

| (a) List and descri 2-story brick wareho | be the kind(s) of property sold (e.g., rebuse; or common stock, 200 shares ML | C Company) 1 P | How acquired — Purchase — Donation | (C) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|---|---|---|--|---|---------------------------------------|
| 1a SEE STATEMENT 5 | | | | | |
| b | | | | | |
| <u> </u> | | | | | |
| d | | | | | |
| e | | | | | <u> </u> |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (e) plus (f) m | |
| a | | | | | |
| b | | | | | |
| <u>c</u> | | | | | |
| d | | | | | |
| e | | . U 6 d-1 10/21/60 | | | |
| (i) F M V. | owing gain in column (h) and owned by (i) Adjusted basis | (k) Excess of col. (i) | — , | (I) Gains (Col. ain minus col (k), b | |
| as of 12/31/69 | as of 12/31/69 | over col (j), if any | | an -0-) or Losses (fi | |
| a | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | - | | |
| | | enter in Part I, line 7 | | T | |
| 2 Capital gain net income or (r | net capital loss) If (loss), enter | er -0- in Part I, line 7 | 2 | | 342,804 |
| 3 Net short-term capital gain o | or (loss) as defined in sections 1222(5) | and (6). | | | |
| If goin also enter in Bart I. I | ine 8, column (c) (see instructions) If | (loss) optor 0 | | | |
| in Part I, line 8 | ine 8, column (c) (see instructions) in | (loss), eriter -o- | 3 | -3 | 1,122,405 |
| Part V ? Qualification Und | er Section 4940(e) for Reduced | Tax on Net Investment | Income | • | |
| | e this part blank. section 4942 tax on the distributable an ualify under section 4940(e). Do not co | | period? . | | X No |
| | n each column for each year; see the inst | | ies. | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (col. | (d) Distribution (b) divided by c | |
| 2014 | 170,827. | 13,641,4 | 47. | | 0.01252 |
| 2013 | 198,722. | 9,889,1 | | | 0.02009 |
| 2012 | 285,846. | 8,737,4 | | | 0.03271 |
| 2011 | 1,793,279. | 9,508,7 | 31. | | 0.18859 |
| 2010 | 479,981. | 8,659,2 | 05. | | 0.05543 |
| 2 Total of line 1, column (d) | | | 2 | - | 0.30935 |
| | the 5-year base period - divide the to | stal on line 2 by 5, or by the | | | · · · · · · · · · · · · · · · · · · · |
| number of years the foundati | ion has been in existence if less than 5 | 5 years | . 3 | | 0.06187 |
| 4 Enter the net value of noncha | aritable use assets for 2015 from Port | X, line 5 | 4 | 10 | ,169,129 |
| 5 Multiply line 4 by line 3 | aritable-use assets for 2015 from Fart | | | | 7 = 05 / ==5 |
| | | | 5 | | |
| 6 Enter 1% of net investment in | ncome (1% of Part I, line 27b) | | 5 | | 629,174 |
| 6 Enter 1% of net investment in7 Add lines 5 and 6 | | | | | 629,174 4,230 |
| | ncome (1% of Part I, line 27b) | | 6 | | 629,174 4,230 633,404 48,846 |

| Part VI Excise Tax Based on Investment Income (Section 490(a), 4940(b), 4940(b), or 4948 — see instructions) a Exempt prevent foundations that in section 495(c), cite Size: a Exempt prevent of united of determands in teles. Bit of united of during of determands in teles. (attach copy of letter if necessary — see instructions) b Domestic foundations that meet the section 4947(a)(f) trusts and taxable foundations only. Others enter 4% of let 1, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(f) trusts and taxable foundations only. Others enter -0.) A did lines 1 and 2 Tax under section 4947(a)(f) trusts and taxable foundations only. Others enter -0.) A did lines 1 and 2 Substitle A (income) tax (domestic section 4947(a)(f)) trusts and taxable foundations only. Others enter -0.) 5 Tax based on investment incomes. Subtract time 4 from line 3 iff zero or less, enter -0. 5 Tax based on investment incomes. Subtract time 4 from line 3 iff zero or less, enter -0. 5 Tax based on investment incomes. Subtract time 4 from line 3 iff zero or less, enter -0. 5 Tax based on investment incomes. Subtract time 4 from line 3 iff zero or less, enter -0. 5 Tax based on investment incomes. Subtract time 4 from line 3 iff zero or less, enter -0. 6 C Creditor-Payments a Jill setting that prime and 2014 everpayment or detail of source 1 Tax due, if the time and 2014 everpayment or estemated tax. Check there is a fine of the compton or payments for undernayment of estimated tax. The compton of the compton or payments for undernayment of estimated tax. The compton or payments for undernayment of estimated tax. The compton of the compton or payments for undernayment of estimated tax. The compton of the compton of the compton of the compton of the compton or payments for the compton of the compton o | Form 990-PF (2015) AMBROSIANI-PASTORE FOUNDATION INC. 82-051 | | | F | age • |
|---|--|------------|----------|------------|--------------|
| bit of number of retiremation latter. (attach copy of letter if inecessary – see instrs) bit Domestic foundations that meet the saction 450(b) requirements in Part V, check here. " and enter 1% of Part I, line 270 c it is distributed foundations enter 2% of line 270, Eering foreign organizations enter 4% of Part I, line 17, col. (b) 2 2 2 3 3 4 3 4 3 4 4 3 4 4 4 5 4 5 4 5 4 5 4 | Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instr | uctions | 5) | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here. | 1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line i | | | | |
| check here. * | Date of ruling or determination letter. (attach copy of letter if necessary — see instrs) | 1 | | | |
| c All other domestic foundations enter 2% of line 27b. Exercit fireign organizations enter 4% of Part I, Jine 12, cut. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.) 3 Add lines 1 and 2 4 Subbitle A (incrome) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.) 5 As based on investment income. Subtract line 4 from line 3 iff zero or less, enter -0. 5 Ry 459. 6 Credits/Payments a 2015 stemated tax pints and 2014 everpayment credited to 2015 b Exempt foreign organizations — tax withheld at source c Tax pard with application for extension of time to fite (Form 8668) d Galcutory withhelding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d. 8 Enter any penalty for underpayment of estimated tax Check here A 10 Overpayment, If line? Is more than the total of lines 5 and 8, select the amount overpaid. 10 Overpayment, If line? Is more than the total of lines 5 and 8, select the amount overpaid. 10 During the tax year, did the foundation attempt to influence any national, state, or local flegislation or did it participable or intervene in any political campiagn. 1 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participable or intervene in any political campiagn. 1 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1 If the answer is "Yes" to 4 or 1b, attach a detailed description of the activities. 1 Did the foundation in connection in connection on the activities and copies of any materials published or distributed by the foundation in connection on the activities. 1 C X 1 C X 1 C X 1 C X 2 Enter the removement (if any) of its on political expenditures (section 4955) imposed during the year: (i) On the foundation madagers, or previously reported to the IRS? 2 X 3 X 4 X 4 X 5 X 1 Y | b Domestic foundations that meet the section 4940(e) requirements in Part V, | | | 8, | 459. |
| 2 0.0 3 Add lines 1 and 2 4 Subtitle A (nicome) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.) 5 Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. 5 Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. 5 Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. 5 Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0. 5 Tax based on investment lax more and 2014 overpayment created to 2015 6 Credits/Payments 6 Line or less, and 2014 overpayment created to 2015 6 Line or less, and a 2014 overpayment or estimated tax Check here. If I for line or less, and a subtract lax or lax o | <u>-</u> | | | | |
| foundations only, Others enter -0-) 3 Add lines 6 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits? Ayments a 2016 estimated tax prits and 2014 overpayment credited to 2015 b Exempt foreign organizations — Lax withheld at source c Tax pand with application for extension of time to file (Form 8868) 6 c 6 c 6 d 7 Total credits and payments. Add lines 6a through 6d. 7 Total credits and payments. Add lines 6a through 6d. 8 Enter any penalty for underpayment of estimated tax Check here [X] if Form 2220 is attached 8 5 3, 683. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than 100 during the year (and the foundation of line 6 in the 100 during the year (and the foundation of line 6 in the 100 during the year (and the foundation of line 6 in the 100 during the year (and the | c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) | | | | |
| foundations only, Others enter -0-) 3 Add lines 6 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits? Ayments a 2016 estimated tax prits and 2014 overpayment credited to 2015 b Exempt foreign organizations — Lax withheld at source c Tax pand with application for extension of time to file (Form 8868) 6 c 6 c 6 d 7 Total credits and payments. Add lines 6a through 6d. 7 Total credits and payments. Add lines 6a through 6d. 8 Enter any penalty for underpayment of estimated tax Check here [X] if Form 2220 is attached 8 5 3, 683. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Overpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than the total of lines 5 and 8 creat the amount overpaid. 10 Userpayment. If line 7 is more than 100 during the year (and the foundation of line 6 in the 100 during the year (and the foundation of line 6 in the 100 during the year (and the foundation of line 6 in the 100 during the year (and the | 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | | | |
| A Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0.) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0. 5 R, 459. 6 R, 4837. 7 Total credits and payments. Add lines 6a through 6d. 7 R, 4, 837. 8 Enter any penalty for underpayment of estimated tax. Check here | foundations only. Others enter -0-) | | | | 0. |
| 5 Tax based on investment income. Subtract tine 4 from line 3 if zero or less, enter -0- Credits/Payments a 2015 eluminate fix prits and 2014 overpayment credited to 2015 b Exempt foreign organizations — tax withheld at source C Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d. G d Backup withholding erroneously withheld to the found on the file of | 3 Add lines 1 and 2 . | | | 8,4 | 459. |
| 6 Credits/Payments a 2015 estimated tax prints and 2014 overpayment credited to 2015 b Exempt foreign organizations — tax withfield at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here | · · · · · · · · · · · · · · · · · · · | | | | 0. |
| a 2015 estimated tar pints and 2014 overpayment credited to 2015 b Exempt foreign organizations — tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 6 c c 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax Check here | | <u> </u> | | 8,4 | 459. |
| b Exempt foreign organizations — lax withheld at source c Tax pand with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld d Backup withholding erroneously withheld To Total credits and payments. Add lines 6a through 6d Total credits and payments. Add lines 6a through 6d Total credits and payments. Add lines 6a through 6d Be Enter any penalty for underpayment of estimated tax Check here If I form 2220 is attached Be Enter any penalty for underpayment of estimated tax Check here I form 2220 is attached Total credits and payments. Add lines 5a attached Total credits and payments. Add lines 5a attached Total credits and payments. Add lines 6a attached tax Check here Total fall tax bear and the foundation in the standard tax Total fall tax bear and the foundation attempt to influence any nationals, state, or local legislation or did it participate or intervene in any political campaign? Ab Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities C Did the foundation in C firm 1120-POL for this year? If Yes, attach a detailed description of the activities (section 4955) imposed during the year: (1) On the foundation in S (2) On 10 (2) On foundation managers. S (0) E Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. S (0) E 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 and conformed copy of the changes A but the foundation managers. S (1) or political expenditure tax imposed on foundation managers. S (1) or political expenditure tax imposed on foundation managers. S (1) or political expenditure tax imposed on foun | | | | | , |
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| with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV 8 a Enter the states to which the foundation reports or with which it is registered (see instructions) ID b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses | By language in the governing instrument, or | | | ^ | |
| Ba Enter the states to which the foundation reports or with which it is registered (see instructions) ID b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses 10 X | 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 | χ. | 1 |
| b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses 10 X | 7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV | | 7 | Х | |
| 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 <i>General Instruction G? If 'No,' attach explanation</i> 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 X 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses | 8 a Enter the states to which the foundation reports or with which it is registered (see instructions). | | | | . 1 |
| 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 <i>General Instruction G? If 'No,' attach explanation</i> 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 X 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses | ID | - | | | , ý |
| (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i> 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)? <i>If 'Yes,' complete Part XIV</i> 10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i> 10 X | b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | - | . | | |
| for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV 9 X X 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses 10 X | (or designate) of each state as required by General Instruction G? If 'No,' attach explanation | | 8 b | X | |
| for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV 9 X X 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses 10 X | 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(3). | (1)(5) | | | |
| and addresses 10 X | for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part | XÌV _ | 9 | | _X_ |
| | and addresses | . | 10 | | v |
| | | | | PF (20 | |

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| Forr | n 990-PF (2015) <u>AMBROSIANI-PASTORE FOUNDATION INC.</u> 82-0510 | 166 | í | Page : |
|------|--|----------------|----------------|---------|
| | rt VII-A Statements Regarding Activities (continued) | | | |
| , | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | 11 | | Х |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions) | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A | 13 | X | İ |
| 14 | | - <u>265-8</u> | 694 | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year | | | N/A |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No X |
| - | See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country | | | , , |
| Pai | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | ļ | Yes | No |
| 1 a | a 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? | |); | , |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No | 1 | , | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No | | , | |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) | | · | |
| b | olf any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1 b | N | /Ã |
| | Organizations relying on a current notice regarding disaster assistance check here | | ,, | .^^ . |
| C | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? | 1c | | X |
| 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)). | | ** | 2 N25 |
| а | 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? | , , | * | 4 |
| | If 'Yes,' list the years ► 20 , 20 , 20 | | Č, | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.) | 2 b | N | /Ã |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | \ - | |
| | ► 20 _ , 20 _ , 20 _ , 20 | | 9 % | , |
| 3 a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | , | |
| b | of f'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015). | 3 b | N | /A_ |
| 4 a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4 a | | Х |
| 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? | 4 b | | X |

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Form 990-PF (2015)

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|--|--|--|--|----------------|---------------------------|
| Form 990-PF (2015) AMBROSIANI-PASTOR | E FOUNDATION IN | NC. | 82-0 | 510166 | Page |
| Part VII-B Statements Regarding Activit | | | | | |
| 5 a During the year did the foundation pay or inci | ur any amount to | | · · |] | |
| (1) Carry on propaganda, or otherwise attem | | | Yes | X No | |
| (2) Influence the outcome of any specific put on, directly or indirectly, any voter registr | ation drive? . | | ⊢ ⊢ | X No | |
| (3) Provide a grant to an individual for travel | , study, or other similar | purposes? | Yes | X No | |
| (4) Provide a grant to an organization other t in section 4945(d)(4)(A)? (see instruction | han a charitable, etc, o s) . | rganization described | Yes | X No | ,,,, |
| (5) Provide for any purpose other than religion educational purposes, or for the prevention | ous, charitable, scientific on of cruelty to children | c, literary, or or animals? | Yes | X No | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or ii (see instructions)? | the transactions fail to n a current notice regar | qualify under the exceptions disaster assistance | otions e | 5 b | N/A |
| Organizations relying on a current notice rega | arding disaster assistan | ce check here | ► [| | - N/A |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon | the foundation claim exisibility for the grant? | cemption from the | N/A. Yes | | ., |
| If 'Yes,' attach the statement required by Reg | ulations section 53.494 | 5-5(d) | | - . 4 | İ |
| 6 a Did the foundation, during the year, receive a on a personal benefit contract? | ny funds, directly or ind | lirectly, to pay premium | ns Yes | X No | |
| b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870 | iums, directly or indirec | ctly, on a personal bene | efit contract?. | 6b | X |
| 7a At any time during the tax year, was the found | dation a party to a prob | ubited tax shelter transa | action? Yes | X No | |
| b If 'Yes,' did the foundation receive any proces | | | | N/A 7b | - 100mm ² 40 / |
| Part VIII Information About Officers, D | | | | | 5, |
| - | | | | | |
| 1 List all officers, directors, trustees, foundation | (b) Title, and average | (c) Compensation | (d) Contributions to | (e) Expense | o possupt |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | other al | llowances |
| JACK AMBROSIANI | PRESIDENT/TR | 0. | 0. | | 0 |
| 1075 W. ODEN BAY ROAD | 20.00 | | | | |
| SANDPOINT, ID 83864 | | | | | |
| MARY J. AMBROSIANI | VICE PRES/SE | 0. | 0. | | 0 |
| 1075 W. ODEN BAY ROAD | 25.00 | | | | |
| SANDPOINT, ID 83864 | | | | | |
| | | | | | |
| | | | | - | |
| · | | | | | |
| · | | | | | |
| 2 Compensation of five highest-paid employees (of | ther than those included | on line 1 – see instruction | ns). If none, enter 'NON | _! E.' | |
| (a) Name and address of each employee | (b) Title, and average | (c) Compensation | (d)Contributions to | (e) Expense | account, |
| paid more than \$50,000 | hours per week devoted to position | | employee benefit plans and deferred compensation | other all | lowances |
| NONE | | - | | | |
| · | | | | | |
| | | | | - | _ |
| | | | | | |
| | | | | + | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | J | |

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

0

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued) | Employees, |
|--|---------------------------|
| 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 | |
| 1011 | |
| | |
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| ~ | |
| | - |
| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services | 0 |
| | |
| 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 N/A | |
| ************************************** | - |
| | - |
| | |
| 2 | _ |
| | _ |
| | |
| 3 | _ |
| | |
| | _ |
| 4 | 7 |
| · | - |
| | - |
| | |
| 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 | |
| N/A | - |
| 865 | _[|
| 2 | |
| | - |
| | - |
| | |
| All other program-related investments. See instructions | |
| 3 | |
| | |
| | ` |
| Total. Add lines 1 through 3 | 0. |
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| , | see instructions.) | | |
|--------|---|---------|---------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities | 1 a | 0 604 310 |
| | O Average of monthly cash balances | 1 b | 8,684,318. 1,639,671. |
| | Fair market value of all other assets (see instructions) | 1 c | 1,639,671. |
| | Total (add lines 1a, b, and c) | 1 d | 10,323,989. |
| | Reduction claimed for blockage or other factors reported on lines 1a and 1c | * ' ' | 10,323,909. |
| | (attach detailed explanation) 1 e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 10,323,989. |
| 4 | Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | 154,860. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4. | 5 | 10,169,129. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 508,456. |
| | t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operar | | |
| | and certain foreign organizations check here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | ung i | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 508,456. |
| 2: | Tax on investment income for 2015 from Part VI, line 5 2a 8,459. | | |
| | Income tax for 2015. (This does not include the tax from Part VI.) 2b | | |
| | Add lines 2a and 2b | 2 c | 8,459. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 499,997. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 499, 997. |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 499,997. |
| Par | t XII Qualifying Distributions (see ınstructions) | | |
| 1 a | Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 | 1 a | 48,846. |
| b | Program-related investments — total from Part IX-B | 1 b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes | 2 | |
| 3 a | Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) | 3 a | |
| Ė | Cash distribution test (attach the required schedule) | 3 b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 48,846. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) | 5 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 48,846. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years. | ndation | |
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· 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 | , , , , , | | | 400 007 |
| 2 Undistributed income, if any, as of the end of 2015: | <u> </u> | , | | 499,997. |
| a Enter amount for 2014 only | | £ | ő. | |
| b Total for prior years: 20 , 20 , 20 | 11 (15) | 0. | | |
| 3 Excess distributions carryover, if any, to 2015: | *** ** ** | | | 3.4 |
| a From 2010 | · | | | 1.50, 1 2, 3 |
| b From 2011 534, 769. | ┤ · · · · · · · · | | | 112 |
| c From 2012 | | | * * * | , , , |
| d From 2013 | | | | |
| e From 2014 | | <i>3</i> / | 1 1 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| f Total of lines 3a through e | 534,769. | | 1 /3 PS | ** |
| 4 Qualifying distributions for 2015 from Part | | 1 3 | | ", |
| XII, line 4 ► \$ 48,846. | | | , 3% | |
| a Applied to 2014, but not more than line 2a . | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | 0. | |
| h Annied to conductivitied conserve of seing conserve | | | | \$ \$300 BROWN \$1 500 |
| 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. | , | 8, ** | * |
| d Applied to 2015 distributable amount | ; ,,,, | | * , * | 48,846. |
| e Remaining amount distributed out of corpus | 0. | | \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | '\ ' ' ' ' ' |
| 5 Excess distributions carryover applied to 2015 | 451,151. | | | 451,151. |
| (If an amount appears in column (d), the | 3 - 3 | 1 |) v. | |
| same amount must be shown in column (a).) | - * * | | <u>'</u> | |
| 6 Enter the net total of each column as | 31 2 2 2 2 2 | , , | • | |
| 6 Enter the net total of each column as indicated below: | | * * | .`- | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 83,618. | | , , , , , , , | |
| b Prior years' undistributed income. Subtract line 4b from line 2b | , ^ , ^ | 0. | > 5 | |
| | | <u>~-</u> - | | |
| 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 | , hot | 0. | . \ | |
| · | | | · / | |
| d Subtract line 6c from line 6b Taxable amount — see instructions | | 0. | ŕ | |
| - Hadishibated assess for 2014. Cultimatelian to from | | | | |
| e Undistributed income for 2014. Subtract line 4a from line 2a Taxable amount — see instructions | * | | 0. | |
| | · · · · · · · · · · · · · · · · · · · | | | |
| f Undistributed income for 2015. Subtract lines | | , , | , , , | |
| 4d and 5 from line 1. This amount must be distributed in 2016 | *** | | , i | 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. | | ۰, ۰ | • |
| 8 Excess distributions carryover from 2010 not | | | | |
| applied on line 5 or line 7 (see instructions) | 0. | * | y | *** |
| 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . | 83,618. | | | \$ v |
| 10 Analysis of line 9 | | | , , | > · · · |
| a Excess from 2011 83, 618. | _ * | | | · · · · · · |
| b Excess from 2012 | | | · | > |
| c Excess from 2013 | | | | ; |
| d Excess from 2014 | | | | 4 |
| e Excess from 2015 | | | | |
| BAA | · | · · · · · · · · · · · · · · · · · · · | ······································ | Form 990-PF (2015) |

| Part XIV Private Operating Foundat | ions (see instr | uctions and Part | t VII-A, question | 9) | N/A |
|--|-----------------------|-------------------------|------------------------|----------------------------|--|
| 1a If the foundation has received a ruling or determined is effective for 2015, enter the date of the | rmination letter that | ıt ıs a prıvate operatı | ing foundation, and th | ne ruling | |
| b Check box to indicate whether the foundate | - | erating foundation d | lescribed in section | 4942(j)(3) or | 4942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | 1 10 1207(07 01 | 10.1207(07 |
| income from Part I or the minimum investment return from Part X for | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | _ | |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a 'Assets' alternative test — enter. | | | | | |
| (1) Value of all assets. | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test — enter: | | | | | · · · · - · · · · · · · · · · · · · · · |
| (1) Total support other than gross investment income (interest, dividends, rents, payments | | | | | |
| on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). | | | | | |
| (3) Largest amount of support from an exempt organization. | | | | | |
| (4) Gross investment income . | | | | | <u>. </u> |
| Part XV Supplementary Information (assets at any time during the | (Complete this | part only if the | foundation had | \$5,000 or more | in |
| 1 Information Regarding Foundation Manag | | | | | |
| a List any managers of the foundation who have | contributed more th | an 2% of the total co | ntributions received b | y the foundation befo | ore the |
| close of any tax year (but only if they have SEE STATEMENT 6 | 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 corneration | o (or an equally large | nortion of the owners | thin of |
| a partnership or other entity) of which the i | oundation has a 10 | 0% or greater intere | est. | portion of the owners | inp of |
| | | | <u>.</u> | | |
| 2 Information Regarding Contribution, Gran Check here X if the foundation only making requests for funds. If the foundation makes | es contributions to p | preselected charitable | e organizations and d | oes not accept unsolutions | cited r conditions |
| complete items 2a, b, c, and d. | | | | | |
| a The name, address, and telephone number or | e-mail address of th | e person to whom ap | plications should be | addressed. | |
| | | | | | |
| | | | | | |
| b The form in which applications should be so | ubmitted and inforr | mation and material | s they should includ | le. | |
| c Any submission deadlines | | | | | |
| | | | | | |
| d Any restrictions or limitations on awards, su | uch as by geograph | nical areas, charitab | le fields, kinds of in | stitutions, or other f | actors. |
| | | | | | |

Page 11

| 3 Grants and Contributions Paid During | the Year or Approved for Fu | ture Paymer | nt | |
|--|---|--------------------------------------|----------------------------------|---------|
| Recipient | If recipient is an individual show any relationship to an foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | substantial contributor | recipient | CONTIDUCTO | |
| a Paid during the year | | | | |
| SEE SCHEDULE ATTACHED | | NPF | SEE ATTACHED SCHEDULE | 48,846 |
| Tatal | | <u> </u> | ► 3a | 10 016 |
| Total | · · · · · · · · · · · · · · · · · · · | | | 48,846. |
| | | | | |
| Total | - | | ▶ 3h | |

Part XVI-A Analysis of Income-Producing Activities

| Enter a | ross amounts unless otherwise indicated | Unrelate | d business income | Excluded by | section 512, 513, or 514 | 4-5 |
|--------------------------------------|---|-------------------------|--|---------------------------------------|--------------------------|--|
| 5 | | (a) Business code | (b) Amount | (c) Exclu- sion | (d) Amount | (e) Related or exempt function income (See instructions) |
| | rogram service revenue: | | - | code | | |
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| f _ | | | | | | |
| g Fe | ees and contracts from government agencies | | | | | |
| 2 M | embership dues and assessments . | | | | | |
| | erest on savings and temporary cash investments . | | | | | |
| | vidends and interest from securities | | | 14 | 92,781. | ······································ |
| | et rental income or (loss) from real estate | ***** | 1: 3, | | | |
| | ebt-financed property | | | | | |
| | ot debt-financed property | | | | | |
| | t rental income or (loss) from personal property | | | | | |
| | ther investment income | | | 10 | 242 004 | |
| | on or (loss) from sales of assets other than inventory et income or (loss) from special events | | | 18 | 342,804. | |
| | ross profit or (loss) from sales of inventory | | ······································ | | | |
| | her revenue: | | | | | |
| | ISKA GAS STORAGE PARTNER | | | 1 | -1,058. | * * * * \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| - | ETURN OF ATTORNEY FEES | | | 1 1 | 1,980. | |
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| | | | | <u> </u> | 406 500 | |
| 12 St | btotal. Add columns (b), (d), and (e) | | | | 436,507. | |
| 13 To | tal. Add line 12, columns (b), (d), and (e) | | | <u> </u> | 436,507. 13 _ | 436,507. |
| 13 To | | | | | | 436,507. |
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Form 990-PF (2015) AMBROSIANI-PASTORE FOUNDATION INC. 82-0510166 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| 1 0 | old the organization direc | tly or indirectly | engage in any of the fol | llowing with | any other organizati | on | | Yes | No |
|---|---|--|--|--|---|---|---------------------------|----------|----------|
| Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | | | | | | | |
| | | | n a noncharitable evemi | at organizat | ion of | | | | , |
| Transfers from the reporting foundation to a noncharitable exempt organization of. (1) Cash | | | | | | | 1 a (1) | | X |
| - | 2) Other assets | | | | • | • • | 1 a (2) | | X |
| | Other transactions | | | | | • | | | <u>^</u> |
| (1) Sales of assets to a noncharitable exempt organization . | | | | | | | 1 b (1) | | x |
| (2 | 2) Purchases of assets fi | rom a noncharit | able exempt organization | on | | | 1 b (2) | | X |
| (3) Rental of facilities, equipment, or other assets | | | | | | | 1 b (3) | | X |
| (4 | 4) Reimbursement arrani | gements | | | | | 1 b (4) | | Х |
| (5) Loans or loan guarantees | | | | | | | 1 b (5) | | X |
| • | Performance of service | | , | | | | 1 b (6) | | X |
| c S | haring of facilities, equip | ment, mailing li | sts, other assets, or pa | id employee | es | | 1 c | l | <u>X</u> |
| d If th a | the answer to any of the ne goods, other assets, or s ny transaction or sharing | above is 'Yes,' services given by arrangement. | complete the following the reporting foundation show in column (d) the | schedule. (If the founda value of the | Column (b) should all ation received less that goods, other assets. | ways show the fair n fair market value ii , or services receive | market val n ed. | ue of | |
| (a) Line | | | of noncharitable exempt organ | | | nsfers, transactions, and | | ngemen | ts |
| N/A | , , | | | | | | | | |
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| 2 n lc | the foundation directly or i | ndirectly affiliate | d with or rolated to one | or more tax | exempt erapuzations | · | - | | |
| de | escribed in section 501(c) |) of the Code (o | other than section 501(c) |)(3)) or in se | ection 527? | | . Yes | X | No |
| b If | 'Yes,' complete the follow | | | | | | | | |
| | (a) Name of organiza | ation | (b) Type of org | anization | (0 |) Description of rel | ationship | | |
| N/A | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Under penalties of perjury, I deci correct, and complete Declaration | lare that I have exam on of preparer (other | than taxpayer) is based on all i | npanying sched nformation of w | fules and statements, and to which preparer has any know | the best of my knowledg rledge | e and belief, it | is true, | |
| Sign | | Λ <i>i</i> | | | L | | May the If | | |
| Here | ere Lack Au May () 20 PRESIDENT | | | | | | preparer s (see instri | shown b | elow |
| | Signature of officer or trustee | | Date | \ / | Title | | X | Yes | No |
| | Print/Type preparer's n | ame | Peparer's signature | <u> </u> | Date | Check If | PTIN | | |
| Paid | SHANNON SPE | RAKER, CPA | Orcima | Dank | W 5-12-16 | self-employed | P00298 | 946 | |
| Prepa | rer Firm's name | CLARK, ANI | DERSON, MCNELIS | `& to., | P.A. | Firm's EIN ► 82-0 | 403050 | | |
| • | se Only Firm's address 560 W CANFIELD AVE # 100 | | | | | | | | |
| | - 1 | COEUR D AI | LENE, ID 83815- | 7892 | | Phone no (208 | 772-64 | 160 | |
| BAA | | | | | <u> </u> | | Form 990 |)-PF (2 | 2015) |

| 2015 | FEDERAL STATEMENTS | PAGE 1 |
|--|--|---------------------------------|
| CLIENT 1535 | AMBROSIANI-PASTORE FOUNDATION INC. | 82-051016 |
| STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME | | *** |
| NISKA GAS STORAGE PARTNE RETURN OF ATTORNEY FEES | (A) (B) NET REVENUE INVESTMENT PER BOOKS INCOME \$ -1,058. \$ -1,058. 1,980. 1,980. \$ 922. \$ 922. | (C) ADJUSTED NET INCOME |
| STATEMENT 2 FORM 990-PF, PART I, LINE 16 ACCOUNTING FEES | В | |
| BOOKKEEPING & ACCOUNTING | | (D) CHARITABLE PURPOSES \$ 0. |
| STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES | | |
| FOREIGN TAX PAID | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 9,459. \$ 9,459. TOTAL \$ 9,459. \$ 9,459. \$ 0 | (D) CHARITABLE PURPOSES . \$ 0. |
| STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES | | |
| LIABILITY INSURANCE | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME \$ 1,266. \$ 1,266. \$ 1,266. \$ 1,266. \$ 1,266. \$ 0. | (D) CHARITABLE PURPOSES \$ 0. |

2015

FEDERAL STATEMENTS

PAGE 2

CLIENT 1535

AMBROSIANI-PASTORE FOUNDATION INC.

82-0510166

STATEMENT 5 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| <u>ITEM</u> 1 2 3 4 5 6 7 | IEM (A) DESCRIPTION SCOTTRADE, INC. SHORT TERM SCOTTRADE, INC. LONG TERM 200,000SH DRYSHIPS WELLS FARGO SHORT TERM 5,000SH NISKA GAS STORAGE WELLS FARGO LONG TERM BANK OF AMERICA SETTLEMENT | | | | ACÓU PURC: PURC: PURC: PURC: PURC: PURC: PURC! | IRED ACHASED HASED HASED HASED HASED | C) DATE COUIRED VARIOUS VARIOUS VARIOUS VARIOUS VARIOUS /02/2015 VARIOUS VARIOUS | (D) DATE SOLD VARIOUS VARIOUS 11/23/2015 VARIOUS 2/06/2015 VARIOUS VARIOUS VARIOUS | |
|--|--|---------------------------|---|----------|--|--------------------------------------|--|--|--|
| 8 | SCHERING PLOUGH SETTLMENT | | | | PURC | HASED | VARIOUS | VARIOUS | |
| <u>ITEM</u> 1 2 3 4 5 6 7 | (E) GROSS SALES 152,967. 2875485. 29,873. 1096388. 7,948. 2422995. 4,466. 2,853. | (F) DEPREC. ALLOWED | (G) COST BASIS 746,267. 918,090. 752,480. 1615777. 17,664. 2199893. 0. | 1957395. | (I) FMV <u>12/31/69</u> | (J) ADJ. BAS. 12/31/69 | (K) EXCESS (I) - (J) TOTAL | (L) GAIN (LOSS) \$-593,300. 1957395. -722,607. -519,389. -9,716. 223,102. 4,466. 2,853. \$ 342,804. | |

STATEMENT 6 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

JACK AMBROSIANI MARY J. AMBROSIANI

AMBROSIANI - PASTORE FOUNDATION, INC. 2015 GRANT LOG

ED - Educational Development Y&FD - Youth & Fa T - Transition M - Maintenance

Y&FD - Youth & Family Development M - Maintenance

CI - Capital Improvements

1,500 00 10/27/2015 8,000 00 12/22/2015 6,035 00 12/17/2015 500 00 9/27/2015 6,500 00 7/28/2015 2,000 00 9/23/2015 Payment Date 11,280 00 6/3/2015 6/3/2015 13,031 00 48,846 00 Amount Paid Type G ტ G G G G တ Category Y&FD Y&FD 8 묘 유 Project / Purpose Get REAL Program Boundary County School District #101 Get REAL Program 6577 Main St., Suite 101 Bonners Ferry, ID 83805 Get REAL Program Total Bonner County Homeless Task Force Lake Pend Oreille School Dist #84 Lake Pend Oreille School Dist #84 Lake Pend Oreille School Dist #84 Post Falls School District #273 Post Falls School District #273 Idaho Business for Education Organization Sandpoint, Id 83864 Sandpoint, Id. 83864 Sandpoint, Id 83864 Sandpoint, Id. 83864 Post Falls, ID 83854 Post Falls, ID 83854 Boise, Idaho 83701 901 Triangle Drive, 901 Triangle Drive, 901 Triangle Drive, P O Box 1682 303 Florence, PO Box 40 PO Box 40