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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

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

▶ Information about Form 990-PF and its instructions is at 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 CODY CHANGE ATTITUDES NOW INC		A Employer identification number 83-0322736	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 41		Room/suite	B Telephone number (see instructions) (307) 899-4372
City or town, state or province, country, and ZIP or foreign postal code CODY, WY 82414		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		<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change	
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		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 220,049		J Accounting method <input checked="" type="checkbox"/> Cash <input 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)	259,250			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	1,158	1,158	1,158	
	4 Dividends and interest from securities	12,365	12,365	12,365	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 	8,733			
	b Gross sales price for all assets on line 6a 20,716				
	7 Capital gain net income (from Part IV, line 2) . . .				
	8 Net short-term capital gain				
	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)	 5,645	345	5,645	
	12 Total.Add lines 1 through 11	287,151	13,868	19,168	
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages	131,500			131,500
	15 Pension plans, employee benefits	16,248			16,248
	16a Legal fees (attach schedule).	 2,500			2,500
	b Accounting fees (attach schedule).				
	c Other professional fees (attach schedule)				
	17 Interest	638	638	638	
	18 Taxes (attach schedule) (see instructions) . . .	 17,160	431	431	16,729
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	 75,302	1,746	7,046	68,256
	24 Total operating and administrative expenses. Add lines 13 through 23	243,348	2,815	8,115	235,233
	25 Contributions, gifts, grants paid	22,452			22,452
	26 Total expenses and disbursements.Add lines 24 and 25	265,800	2,815	8,115	257,685
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	21,351			
	b Net investment income (if negative, enter -0-)		11,053		
	c Adjusted net income(if negative, enter -0-) . . .			11,053	

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			
	2	Savings and temporary cash investments	207,549	220,049	220,049
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (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			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	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)	917,359	909,009	
	Liabilities	14	Land, buildings, and equipment basis ▶ _____ 30,811 Less accumulated depreciation (attach schedule) ▶ _____	30,811	30,811
15		Other assets (describe ▶ _____)			
16		Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	1,155,719	1,159,869	220,049
17		Accounts payable and accrued expenses			
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)		0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	207,549	220,049	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	948,170	939,820	
30	Total net assets or fund balances(see instructions)	1,155,719	1,159,869		
31	Total liabilities and net assets/fund balances(see instructions)	1,155,719	1,159,869		

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	1,155,719
2	Enter amount from Part I, line 27a	2	21,351
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	1,177,070
5	Decreases not included in line 2 (itemize) ▶ _____	5	17,201
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	1,159,869

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				
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			
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			
b			
c			
d			
e			

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

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	326,281	1,047,032	0 311625
2013	290,616	908,253	0 319973
2012	173,746	677,725	0 256367
2011	156,719	615,254	0 254722
2010	148,231	584,171	0 253746

2	Total of line 1, column (d).	2	1 396433
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 279287
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	1,149,527
5	Multiply line 4 by line 3.	5	321,048
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	111
7	Add lines 5 and 6.	7	321,159
8	Enter qualifying distributions from Part XII, line 4.	8	271,173

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 ☐ 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 ☐ and enter 1% of Part I, line 27b

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-)

3

Add lines 1 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-

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

3,210

d

Backup withholding erroneously withheld.

6d

7

Total credits and payments. Add lines 6a through 6d.

8

Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.

9

Tax due. If the total of lines 5 and 8 is more than line 7, enter **amount owed**

10

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**.

11

Enter the amount of line 10 to be **Credited to 2015 estimated tax** ☐ 0 **Refunded** ☐

1

221

2

3

221

4

5

221

7

3,210

8

9

10

2,989

11

2,989

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?

b

Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for 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 file **Form 1120-POL** for this year?

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.

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*

4a

Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b

If "Yes," has it filed a tax return on **Form 990-T** for this year?

5

Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T.

6

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 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?

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.*

8a

Enter the states to which the foundation reports or with which it is registered (see instructions)
☐ _____

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.*

Yes

No

1a

No

1b

No

1c

No

2

No

3

No

4a

No

4b

5

No

6

Yes

7

Yes

8b

9

Yes

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.CODYCAN.COM	13	Yes	
14	The books are in care of DEBORAH M WHITE Telephone no (307) 899-4372 Located at 1225 10TH STREET CODY WY ZIP+4 82414			
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.	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? (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).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
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		
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? If "Yes," list the years 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20____, 20____, 20____, 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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.).	3b		
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

Yes

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

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
See Additional Data Table				

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	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
AMOS OLSON 3222 SHERIDAN AVE CODY, WY 82414	TECH SUPPORT 40 00	78,500		

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

Form 990-PF (2015)

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
1SEE ATTACHED PAGE, WHICH DESCRIBES THE ORGANIZATION'S PROGRAMS. THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO ENCOURAGE CHILDREN TO ABSTAIN FROM THE USE OF ILLEGAL DRUGS. THE ORGANIZATION OPERATES PROGRAMS FOR ITS MEMBERS, WHO SIGN A CONTRACT TO REMAIN DRUG FREE, WHICH CONTRACT IS SIGNED BY EACH PARTICIPATING STUDENT & HIS OR HER PARENT. DURING 2015, THE ORGANIZATION REPLACED AS NEEDED AND MAINTAINED THE ORGANIZATION'S COMPUTERS, SOFTWARE, FURNITURE, PRINTERS, ETC., WHICH ARE IN ALL SCHOOLS IN THE CODY SCHOOL DISTRICT. AS OF 12/31/15, APPROXIMATELY 89% OF CODY'S ELEMENTARY STUDENTS (GRADES 4 AND 5), APPROXIMATELY 93% OF CODY'S MIDDLE SCHOOL STUDENTS, AND APPROXIMATELY 80% OF CODY'S HIGH SCHOOL STUDENTS WERE MEMBERS OF THE ORGANIZATION. THE ORGANIZATION PROVIDES MEMBER-ONLY SOCIAL EVENTS AS WELL AS EDUCATION AND PROGRAMS FOR ITS MEMBERS. THE ORGANIZATION SUPPORTS THE "PURE PERFORMANCE" PROGRAM, WHICH PROVIDES EDUCATION AND ENCOURAGEMENT REGARDING HEALTHY LIFESTYLE AND LIVING CHOICES.	257,685
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
1N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3.	

Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	913,184
b	Average of monthly cash balances.	1b	253,848
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,167,032
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	1,167,032
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	17,505
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,149,527
6	Minimum investment return.Enter 5% of line 5.	6	57,476

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.)

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

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	257,685
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	13,488
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	271,173
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	271,173
Note: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 ▶ \$ _____ 271,173				
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	271,173			
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	271,173			
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

☒ 4942(j)(3) or ☐ 4942(j)(5)

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
11,053	9,471	17,704	10,524	48,752
9,395	8,050	15,048	8,945	41,438

9,395	8,050	15,048	8,945	41,438
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271,173	326,366	290,793	173,746	1,062,078
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271,173	326,366	290,793	173,746	1,062,078
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38,317	34,901	30,275	22,591	126,084
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Part XV

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 e-mail address of the person to whom applications should be addressed

DEBORAH WHITE
PO BOX 41
CODY, WY 82414
(307) 899-4372
DMCWHITE@HOTMAIL.COM

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

INTERESTED MEMBER/STUDENTS MUST SUBMIT AN APPLICATION, A COVER LETTER, A GOAL STATEMENT, A FINANCIAL AID STATEMENT, LETTERS OF RECOMMENDATION, A CURRENT HIGH SCHOOL TRANSCRIPT, A RESUME, AND ESSAY(S) SEE ATTACHED CODY HIGH SCHOOL COMMUNITY AWARDS AND SCHOLARSHIPS COMMON APPLICATION AND ATTACHED LEAP APPLICATION PACKET

c Any submission deadlines

VARIES - CONTACT ORGANIZATION

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

COLLEGE SCHOLARSHIPS TO MEMBERS WHO ARE GRADUATING SENIORS OF CODY HIGH SCHOOL AND LEAP SCHOLARSHIPS TO MEMBERS WHO ARE CODY HIGH SCHOOL JUNIORS (SEE STATEMENT 11)

Part XV

Supplementary Information(continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	22,452
b Approved for future payment				
Total			3b	

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
MARY KATE GORMAN	DIRECTOR/SEC 1 00	0	0	0
2203 STEADMAN CODY, WY 82414				
EVAN WAMBEKE	DIR 1 00	0	0	0
2228 BERDAHL AVENUE CODY, WY 82414				
DOSSIE OVERFIELD	DIRECTOR 1 00	0	0	0
34 LANE 20 CODY, WY 82414				
JESSICA DOLLARD	VP/DIRECTOR 1 00	0	0	0
462 ROAD 2AB CODY, WY 82414				
BRADY ERICKSON	DIRECTOR 1 00	0	0	0
2125 GAIL LANE CODY, WY 82414				
ASHLYN BOWER	DIRECTOR 1 00	0	0	0
228 N 44TH STREET CODY, WY 82414				
ELISHA SMITH	DIRECTOR 1 00	0	0	0
628 MEADOW COURT CODY, WY 82414				
BLAKE HINZE	VP/DIRECTOR 1 00	0	0	0
2351 NEWTON AVENUE CODY, WY 82414				
HUNTER GRAVES	DIRECTOR 1 00	0	0	0
1157 LANE 12 CODY, WY 82414				
TATUM BUSS	DIRECTOR 1 00	0	0	0
20 ABSORKA DRIVE CODY, WY 82414				
HANNAH MILLER	DIRECTOR/VP 1 00	0	0	0
2713 YELLOWSTONE AVENUE CODY, WY 82414				
CAM WRIGHT	DIRECTOR/PRE 1 00	0	0	0
2301 NEWTON AVENUE CODY, WY 82414				
TIFFANY MANION	DIRECTOR 1 00	0	0	0
3110 SOUTHFORK ROAD CODY, WY 82414				
DEBORAH M WHITE	DIRECTOR 1 00	0	0	0
46 APPALOOSA LANE CODY, WY 82414				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
JOHN BEAUDRIE 78 ROAD 2AC CODY,WY 82414	NONE		COLLEGE SCHOLARSHIP	500
NOAH RIVERA 2861 BASS AVENUE CODY,WY 82414	NONE		COLLEGE SCHOLARSHIP	500
CARTER MYERS 135 SIDDLE DRIVE CODY,WY 82414	NONE		COLLEGE SCHOLARSHIP	500
CAM WRIGHT 2301 NEWTON AVENUE CODY,WY 82414	NONE		LEAP SCHOLARSHIP - SEE STMT 12	4,060
EMILY REED 52 ROAD 2EC CODY,WY 82414	NONE		COLLEGE SCHOLARSHIP	500
REGINA GEE 1320 SUNSET BLVD CODY,WY 82414	NONE		LEAP SCHOLARSHIP - SEE STMT 12	1,392
TRENT BRONNENBERG 32 ROAD 3CXS CODY,WY 82414	NONE		LEAP SCHOLARSHIP - SEE STMT 12	3,434
SYDNEY GUNN 3425 SANDBAK AVENUE CODY,WY 82414	NONE		COLLEGE SCHOLARSHIP	500
BETHANY SHOTTS 1808 15TH STREET CODY,WY 82414	NONE		LEAP SCHOLARSHIP - SEE STMT 12	3,433
JOSE HERNANDEZ 3204 KENT AVENUE CODY,WY 82414	NONE		LEAP SCHOLARSHIP - SEE STMT 12	7,133
BRAYDEN FEUSNER 187 S CHUGWATER DRIVE CODY,WY 82414	NONE		COLLEGE SCHOLARSHIP	500
Total				22,452

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

TY 2015 Depreciation Schedule

Name: CODY CHANGE ATTITUDES NOW INC
EIN: 83-0322736

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
DESK	1999-07-07	901							
FACILITY IMPROVEMENTS	1999-11-30	2,921							
2 AIR CONDITIONERS	2003-06-01	1,009							
TRADEMARK	2004-07-01	670							
REMODEL HS LAB	2006-07-01	2,781							
COMPUTERS	2009-07-01	1,430							
FURNITURE	2010-07-01	190							
COMPUTER & CAMERA	2010-07-01	2,254							
SOFTWARE	2011-07-01	689							
HARDWARE	2011-07-01	17,966							
	2012-07-01								
HARDWARE SMALL	2012-07-01	1,876							
SOFTWARE	2012-07-01	1,150							
DESK & CHAIRS	2012-07-01	245							
SOFTWARE	2013-07-01	433							
SOFTWARE	2013-07-01	1,950							
HARDWARE	2013-07-01	7,299							
HARDWARE	2013-07-01	10,586							
SOFTWARE	2014-07-01	3,150							
SOFTWARE	2014-07-01	1,674							

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
VARIOUS HARDWARE	2014-07-01	13,865							
COMPUTERS, ETC	2014-07-01	21,787							
HARDWARE	2015-07-01	10,111							
SOFTWARE	2015-07-01	3,377							

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

TY 2015 Gain/Loss from Sale of Other Assets Schedule

Name: CODY CHANGE ATTITUDES NOW INC

EIN: 83-0322736

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
ARCHON PARTNERS K-1		PURCHASE	2015-12			11,983			-11,983	
ARCHON PARTNERS K-1		PURCHASE	2015-12		20,716				20,716	

TY 2015 Investments - Other Schedule

Name: CODY CHANGE ATTITUDES NOW INC

EIN: 83-0322736

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALLEN CAPITAL ARCHON PARTNERS LP	FMV	909,009	

TY 2015 Land, Etc.
Schedule

Name: CODY CHANGE ATTITUDES NOW INC
EIN: 83-0322736

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
	30,811		30,811	

TY 2015 Legal Fees Schedule

Name: CODY CHANGE ATTITUDES NOW INC

EIN: 83-0322736

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT LEGAL FEES	2,500			2,500

TY 2015 Other Decreases Schedule

Name: CODY CHANGE ATTITUDES NOW INC

EIN: 83-0322736

Description	Amount
ADJ FOR COMPUTER RETIREMENTS	17,201

TY 2015 Other Expenses Schedule

Name: CODY CHANGE ATTITUDES NOW INC
EIN: 83-0322736

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CORK AND FORK FUNDRAISER				
PRINTING, POSTAGE	821		662	159
FOOD AND WINE	3,726		3,003	723
RENTAL EXPENSE	1,633		1,316	317
INSURANCE	396		319	77
EXPENSES				
TELEPHONE	2,963			2,963
POSTAGE & SHIPPING	433			433
INSURANCE - DIRECTORS & OFFIC	900			900
- HEALTH				
- OFFICE	772			772
PROMOTION & MARKETING & EDUCA	6,788			6,788
SUPPLIES	5,598			5,598
MEMBER BENEFITS	22,320			22,320
- SKATING PROGRAMS	3,000			3,000
ADVERTISING	4,876			4,876
EXPENSES FROM K-1				
- SEC 59(E)(2) EXPENDITURES	3	3	3	
- PORTFOLIO DEDUCTIONS	1,743	1,743	1,743	
REPAIRS				
NOTARY FEES	300			300
PENALTIES	2,336			2,336
PURE PERFORMANCE PROGRAM EXPE	13,571			13,571
LEADERSHIP CAMP EXPENSE				
SUBSCRIPTIONS	500			500
HARDWARE MGMT				
SPONSORSHIPS				
DATA SERVICES	2,270			2,270
FEES	277			277
INTEREST FORM 4720	76			76

TY 2015 Other Income Schedule**Name:** CODY CHANGE ATTITUDES NOW INC**EIN:** 83-0322736

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
- RENTAL INCOME	12	12	12
- OTHER PORTFOLIO INCOME	7	7	7
- SEC 1231 GAIN	169	169	169
- OTHER ORDINARY INCOME	11	11	11
- OTHER INCOME	121	121	121
- CANCELLATION OF DEBT	1	1	1
- SECTION 1256 CONTRACTS	2	2	2
FROM ARCHON PARTNERS K-1	22	22	22
CORK AND FORK FUNDRAISER	5,300		5,300

TY 2015 Taxes Schedule**Name:** CODY CHANGE ATTITUDES NOW INC**EIN:** 83-0322736

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WY FEE	27			27
FOREIGN TAXES PAID	346	346	346	
FEDERAL EXCISE TAX 2014 FORM 990	85	85	85	
2013 FORM 4720	9,291			9,291
2014 FORM 4720	7,411			7,411

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.</div>	<div>OMB No 1545-0047</div> <div>2015</div>
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<div>Name of the organization</div> <div>CODY CHANGE ATTITUDES NOW INC</div>	<div>Employer identification number</div> <div>83-0322736</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><div><input type="checkbox"/> 501(c)() (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>
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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 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, 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).

Name of organization CODY CHANGE ATTITUDES NOW INC	Employer identification number 83-0322736
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ALLEN & COMPANY INCORPORATED	\$ 200,000	Person <input checked="" type="checkbox"/>
	711 5TH AVENUE 9TH FLOOR		Payroll <input type="checkbox"/>
	NEW YORK, NY 10022		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	JEWISH COMMUNAL FUND	\$ 15,000	Person <input checked="" type="checkbox"/>
	575 MADISON AVENUE		Payroll <input type="checkbox"/>
	NEW YORK, NY 10022		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	MICHAEL LARSEN 2365 CARILLON POINT	\$ 10,000	Person <input checked="" type="checkbox"/>
	KIRKLAND, WA 98033		Payroll <input type="checkbox"/>
	Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)		
4	ROBERT & MYRA KRAFT FAMILY FOUNDATIO	\$ 25,000	Person <input checked="" type="checkbox"/>
	ONE PATRIOT PLACE		Payroll <input type="checkbox"/>
	FOXBORO, MA 02035		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
5	HERBERT JOLLY 2368 WEST LAKE OF THE ISLES PARKWAY	\$ 5,000	Person <input checked="" type="checkbox"/>
	MINNEAPOLIS, MN 55405		Payroll <input type="checkbox"/>
	Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)		
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number
83-0322736

Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

[illegible]

Name of organization CODY CHANGE ATTITUDES NOW INC	Employer identification number 83-0322736
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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	
-			
-			
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-			
(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	
-			
-			
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-			
(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	
-			
-			
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-			
(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	
-			
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-			