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Form 990-PF

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

2015

Department of the Treasury internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

OMB No 1545-0052

	endar year 2015, or t	ax year beginning	Jun 1 , 2015	, and ending May	31 , 2016	
Name of fo				1/	Employer Identification num	nber
Andre	ess Family Fo	undation		To	<u>88-0396633</u>	
	•	r if mail is not delivered to street a	address)	1	Telephone number (see instru	•
2300 City or low	W Sahara Ave	and ZIP or foreign postal code		1670	(702) 248-600	04
•	Veqas	and zin or loroight poster code	NV/	89102	If exemption application is	pending, check here . 🕨
	eck all that apply	Initial return	Initial return of a forme	er oublic chariby		-
G One	con all that apply	Final return	Amended return	or public Granty	1 Foreign organizations, che	ck here
		Address change	Name change	}	2 Foreign organizations mee	ting the 85% test, check
H Cha	ok han of organization				here and attach computation	on ▶
n Che	eck type of organizatio		I(c)(3) exempt private for			
لميب		nonexempt charitable tru			E If private foundation status under section 507(b)(1)(A),	
	market value of all assets a m Part II, column (c), line 16		counting method XC	ash Accrual	andar 3332311 33 (a)(1)(1)(1)	, and an
► \$	• • •	· 1 L	Other (specify)		F If the foundation is in a 60-	month termination
			column (d) must be on c	asn basis)	under section 507(b)(1)(B)	cneck nere
Part I			(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursement
	columns (b), (c), ai	total of amounts in nd (d) may not neces-	expenses per books	income	income	for charitable
	sarily equal the am	nounts in column (a)		ł	j	purposes (cash basis only)
	(see instructions))		<u> </u>	<u> </u>		(00011 0010 0111)
I	1 - - 1	is etc, received (attach schedule)	20,000.			
ļ	2 Ck ►If the fou	ındatıon is not required to attach Sch B				
ł	3 Interest on savings and to	emporary cash investments	113.	,,,	113.	
	4 Dividends and interest fro	, ,	173.	113	113.	
j	5 a Gross rents		 	 		
}	b Net rental income or (loss)			<u> </u>	r~ -	7
R	1 _ '	ale of assets not on line 10				
E	b Gross sales once for	rall			 	
V E	assets on line 6a 7 Capital gain net inco	me (from Part IV, line 2)				**
N	,	algain		 	177	error or garing
υ	9 Income modifications	s			121	
E	10 a Gross sales less returns and				<u> </u>	
ł	allowances	L	<u> </u>	<u></u>		7 }
ì	b Less Cost of goods sold				P	
1	C Gross profit or (loss) (atta	ach schedute)				
ì	11 Other income (attach	n schedule)	<u> </u>			
}	1		1	Í	1	
	12 Total. Add lines 1	through 11	20,113.	113	113.	
	13 Compensation of offi	icers, directors, trustees, etc	0.	C	0.	
ļ	14 Other employee sa	laries and wages · · · · ·	0.	0	0.	
ł		oyee benefits	0.	C	0.	
A		chedule)	150.	0	0.	
D M	b Accounting fees (atta	ach sch)	0.	C	0.	
, N	C Other prof fees (atta	ach sch)				
	17 Interest					
PSTRR		see instrs) Federal.	4.	4	4.	
RRA	19 Depreciation (attach					
	schedule) and deplet		ļ	 		<u></u>
N V		and meetings				
-]		ions	 	 		
A E X D P	23 Other expenses (atta		}			
E		License	50.	1	50.	
N S	24 Total operating and					
E S	expenses Add lines		204.	4	54.	
۱	25 Contributions gifts grant	is paid	69,350.			
1	26 Total expenses and	disbursements			<u> </u>	
{			69,554.	4	54.	L
	Add lines 24 and 25					
	27 Subtract line 26 from	line 12		l .	i	
	27 Subtract line 26 from a Excess of revenue	line 12°				
	27 Subtract line 26 from a Excess of revenue and disbursements	n line 12° over expenses	-49,441.			
	27 Subtract line 26 from a Excess of revenue and disbursements b Net Investment Inco	line 12°	-49,441.	109	. 59.	

Form 990-PF (2015) Andress Family Foundation Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Beginning of year End of year Part II Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value 7,053. 56,444. 7,053. 3 Accounts receivable Less allowance for doubtful accounts Less allowance for doubtful accounts Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . Other notes and loans receivable (attach sch) . ASSET Less allowance for doubtful accounts 10a Investments - U S and state government 11 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 14 Land, buildings, and equipment basis Less: accumulated depreciation (attach schedule) Other assets (describe Total assets (to be completed by all filers — see the instructions Also, see page 1, item i). 56,444. 7,053. 7,053 17 20 Loans from officers, directors, trustees, & other disqualified persons 22 Other habilities (describe 23 Total liabilities (add lines 17 through 22) S Foundations that follow SFAS 117, check here band complete lines 24 through 26 and lines 30 and 31. N F E U T N D ASSE Foundations that do not follow SFAS 117, check here . ► X В and complete lines 27 through 31. T S 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 56,444 7,053 O E R S 30 Total net assets or fund balances (see instructions) 56,444. 7,053 Total liabilities and net assets/fund balances 56,444. 7,053 Part III Analysis of Changes in Net Assets or Fund Balances 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). 56,444. Enter amount from Part I, line 27a -49,441. Other increases not included in line 2 (itemize) correct beginning cash 50. 4 7,053. Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 7,053.

88-0396633

Page 2

Form 990-PF (2015) Andress F		4100000		88-0396633	Page 3
(a) List and describe	Losses for Tax on Investment the kind(s) of property sold (e.g., real e., or common stock, 200 shares MLC (estate,	(b) How acquir P — Purchase D — Donation	(mo, day, yr)	(d) Date sold (mo , day, yr)
1a				' 	
b					
c					
d					
ее					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b	<u> </u>				
<u>c</u>	<u> </u>	 			
d					
θ					
	ng gain in column (h) and owned by the			(I) Gains (Co	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		gain minus col. (k), b than -0-) or Losses (fi	
a	 				
b	 				
	 				
d	 				
2 Capital gain net income or (net	capital loss) If gain, also e	enter in Part I, line 7 er -0- in Part I, line 7			
	oss) as defined in sections 1222(5) and	- '	-	2	
If gain, also enter in Part I, line and Part I, line 8	8, column (c) (see instructions) If (loss), enter -0-		3	
Part V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Incor	ne	
	is part blank ion 4942 tax on the distributable amour y under section 4940(e) Do not compl		nod?	Yes	X No
1 Enter the appropriate amount in	each column for each year, see the in	structions before making an	y entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ets (c	(d) Distribution of (b) divided by c	
2014	0.		0.		0.000000
2013	0.		0.		0.000000
2012	216,200.		0.		0.000000
2011	242,275.	 	0.		0.000000
2010	354,627.		0.		0.00000
2 Total of line 1, column (d)				2	0.000000
3 Average distribution ratio for the number of years the foundation	e 5-year base penod — divide the total o has been in existence if less than 5 ye	on line 2 by 5, or by the ars		3	0.00000
4 Enter the net value of noncharit	able-use assets for 2015 from Part X, I	ine 5		4	0.
5 Multiply line 4 by line 3				5	0.
6 Enter 1% of net investment inco				_	
	ome (1% of Part I, line 27b)	• • • • • • • • • • • • • • • • • • • •	· · · · ·	δ	1.
7 Add lines 5 and 6	ome (1% of Part I, line 27b)		<u> </u>	7	1.
	,				

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Form 990-PF (2015)

X

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

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Form	1990-PF (2015) Andress Family Foundation	<u>88-039663</u>	3	Page 5
F.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	х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified per advisory privileges? If 'Yes,' attach statement (see instructions)	erson had	12	x
13		ication?	13	Х
	Website address			
14	The books are in care of Andress Enterprises, Inc. Telephone	e no ► (702)	248-	6004
	Located at 2300 W Sahara Ave STE 670 Las Vegas NV ZIP+4	89102		
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 authorit bank, securities, or other financial account in a foreign country?	v over a .	16	Yes No
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If 'Yes,' enter the name of the foreign country			
િસ	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
1 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?	Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		i
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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)	Yes XNo		
b	o 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)?		1 b	
	Organizations relying on a current notice regarding disaster assistance check here $\dots \dots \dots \dots$			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?		1 c	Х
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))			
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?	Yes X No	# \$	
	If Yes,' list the years ► 20 , 20 , 20 , 20		i i	i
t	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)	0	2 b	Х
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		الآي	
	▶ 20,20,20	ĺ		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No		
t	of 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	1
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	j	4 a	х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?		4 b	Х
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Form 990-PF (2015) Andress Family Fou	ındation		88-03	96633 Page 6
Part VILB Statements Regarding Activit		1 4720 May Be Req	uired (continued)	
5 a During the year did the foundation pay or incur a	ny amount to			
(1) Carry on propaganda, or otherwise attempt to	o influence legislation (se	ection 4945(e))?	Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	election (see section 495	55), or to carry	Yes X	No
(3) Provide a grant to an individual for travel, stu				No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organi	zation described	· · · · · · Yes X	No
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or ai	erary, or nimals?	· · · · Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	transactions fail to qualif current notice regarding	y under the exceptions disaster assistance		5b
Organizations relying on a current notice regarding				
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	tion from the	···· Tyes	No la
If 'Yes,' attach the statement required by Regulat	tions section 53 4945-5(d	d)		1
6 a Did the foundation, during the year, receive any to on a personal benefit contract?	· · · · · · · · · · · · · · · · · · ·			No Sh W
If 'Yes' to 6b, file Form 8870	is, directly or indirectly, o	in a personal benefit con	tract /	6b X
7 a At any time during the tax year, was the foundati	on a party to a prohibited	tax shelter transaction?	· · · · · · Tyes	No Section 1
b If 'Yes,' did the foundation receive any proceeds				
Para VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid	Employees,
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see inst	ructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Don Andress				1
9103 W Alta Dr #1504	Director			
Las Vegas NV 89145	1.00	0.	0.	0.
Madeleine Andress	Director			
9103_W_Alta_Dr_#1504 Las Vegas NV 89145	1.00	0.	0.	
Melanie Tobiasson	1.00	-	 	0.
4116 Highland Castle Ct	Director			
Las Vegas NV 89135	1.00	0.	0.	0.
Louwanna Andress	1.00			· · ·
10906 Iris Canyon Ave	Director			
Las Vegas NV 89135	1.00	0.	0.	
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 — see ii	nstructions). If none, e	nter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				
				i
				1
				
				{
		<u> </u>		
				1
		ļ_ 	<u></u>	
				1
Total number of other employees paid over \$50,000 .				None
BAA	TEEA0306 10			Form 990-PF (2015)

Form 990-PF (2015) Andress Family Foundation 88-039	
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I 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	
Total number of others receiving over \$50,000 for professional services	None_
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	Expenses
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	
2	
	1
3	
4	
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	
<u></u>	
2	
All other program-related investments See instructions	
3	
Tabal Add based through 2	
Total. Add lines 1 through 3	Form 990-PF (2015)
unn	rum 330-Pr (2015)

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).

qualifies for the section 4940(e) reduction of tax in those years

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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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0.

Part XIII Undistributed Income (see instructions)

Distributable amount for 2015 from Part XI. Inter 7 · · · · · · · · · · · · · · · · · ·		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
2. Undeshabled mome, fam, so of the end of 2015 a Enter annum for 2014 only 10 b Total for pror years: 20					
b Total for pror years: 20 _ 20 _ 20 _ 30	2 Undistributed income, if any, as of the end of 2015				<u></u>
3 Excess distributions carryover, if any, to 2015 a From 2010	a Enter amount for 2014 only			0.	
a From 2010	b Total for prior years: 20 , 20 , 20				
b From 2011					
b From 2011	a From 2010				
d From 2013					
e From 2014 .	c From 2012 216,200.				
f Total of lines 3a through e	d From 2013 0 .				
4 Qualifying distributions for 2015 from Part XII, line 4	e From 2014				
XII, line 4 S a Applied to 2014, but not more than line 2a	f Total of lines 3a through e	813,102.			
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 distributible amount . e Remaining amount distributed out of corpus . 5 Excess distributions carnives pipeled to 2015 . (if an amount appears in column (a) the same amount must be shown in column as indicated below: a Carpus. Add lines 3l. 4c, and 4e Subtract line 5 . b Prior years undistributed income Subtract line 4b from line 2b . c Enter the amount of prior years' undistributed prior years	4 Qualifying distributions for 2015 from Part				
b Applied to undistributed income of prior years (Election required — see instructions). c Treated as distributions out of corpus (Election required — see instructions). d Applied to 2015 distributable amount . e Remaining amount distributed out of corpus . 5 Excess distributions carryover pipel to 2015 (if an amount appears in column (a) the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add ines 3/ 4c, and 4e Subtract line 5 . 813,102 . b Pnor years' undistributed income Subtract line 4b from line 2b	·				
(Election required — see instructions). c Treated as distributions out of corpus (Election required — see instructions). d Applied to 2015 distributable amount	· . ''				
(Election required — see instructions). d Applied to 2015 distributions amount e Remaining amount distributed out of corpus 5. Excess distributions carryover pipiled to 2015 (iff 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 3i, 4c, and 4e Subtract line 5					
e Remaining amount distributed out of corpus 5. Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a)) 6. Enter the net total of each column as Indicated below: a Corpus. Add hes 3f, 4c, and 4e. Subtract line 5 b Pnor years' undistributed income. Subtract line 4b. from line 2b c. Enter the amount of pnor years' undistributed income for which a notice of deficiency has been insued, 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 lines 4d and 5 from line 7c. Taxable amount — see instructions f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016 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 458, 475 10. Analysis of line 9 a Excess from 2011 242, 275 b Excess from 2011 242, 275 b Excess from 2013 0. d Excess from 2014 0. Excess from 2014 0. d Excess from 2014	(Election required - see instructions)				
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					
(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	e Remaining amount distributed out of corpus	0.			
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					
6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e Subtract line 5					
indicated below: a Corpus. Add lines 3f, 4c, and 4e Subtract line 5					
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	6 Enter the net total of each column as				
b Prior years' undistributed income Subtract line 4b from line 2b					ļ
line 4b from line 2b	a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	813,102.			
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	b Prior years' undistributed income Subtract line 4b from line 2b		0.		
been issued, or on which the section 4942(a) tax has been previously assessed	c Enter the amount of prior years' undistributed				
d Subtract line 6c from line 6b Taxable amount – see instructions	income for which a notice of deficiency has been issued, or on which the section 4942(a))		
amount — see instructions	tax has been previously assessed]		
amount — see instructions	d Subtract line 6c from line 6b. Taxable				
Inne 2a. Taxable amount — see instructions	amount - see instructions		0.		
Inne 2a. Taxable amount — see instructions	Undistributed income for 2014 Subtract line 4a from				
4d and 5 from line 1. This amount must be distributed in 2016				0.	
4d and 5 from line 1. This amount must be distributed in 2016	# Lindistributed income for 2015. Cultimat lines				
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)	4d and 5 from line 1. This amount must be				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)					0.
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)	section 170(b)(1)(F) or 4942(g)(3) (Election				1
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	may be required - see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	354,627.			
Subtract lines 7 and 8 from line 6a	9 Excess distributions carpuover to 2016				
10 Analysis of line 9 a Excess from 2011		458,475.			
b Excess from 2012	10 Analysis of line 9				
b Excess from 2012	a Excess from 2011 242,275.		,		
© Excess from 2013 0 . d Excess from 2014 0 .			1	ļ	
			1	ļ	1
	d Excess from 2014 · · · 0 .		1	ļ	1
e Excess from 2015	e Excess from 2015 0 .				

orm 990-PF (2015) Andress Family Fo				<u>88-0396633</u>	Page 1
Private Operating Foundate					N/A
1 a If the foundation has received a ruling or deto is effective for 2015, enter the date of the ruling.	ermination letter that	it is a private operati	ng foundation, and th	ne ruling	
				[V] 4040(V2) ==]	1040(1/5)
b Check box to indicate whether the foundation		ig louridation describ		X 4942(j)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
each year listed	0.	0.	0.	0.	
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					
e 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			1		
(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)					
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>		<u></u> _		
Supplementary Information assets at any time during the			foundation had	\$5,000 or more	in
1 Information Regarding Foundation Manag	ers:	_ 			
a List any managers of the foundation who have close of any tax year (but only if they have co	ontributed more than	\$5,000) (See section	n 507(d)(2))	by the foundation be	efore the
ANDRESS FAMILY TRUST, DTD	1985. DONALD	ANDRESS, TR	USTEE		
ANDRESS FAMILY TRUST, DTD	1985. MADELE	INE ANDRESS,	TRUSTEE		
b List any managers of the foundation who ow a partnership or other entity) of which the foundation			on (or an equally larg	e portion of the owne	ership of
2 Information Possessing Containsting Con-	d Citt I com Cabal	archin etc Promis			
2 Information Regarding Contribution, Gran Check here ☐ if the foundation only ma requests for funds. If the foundation makes g	ikes contributions to	preselected charitab	le organizations and	does not accept uns	olicited
complete items 2a, b, c, and d	mis, granits, etc (see		uuais oi organizatior 	is under other condit	IUIS,
a The name, address, and telephone number of	or e-mail address of t	he person to whom a	applications should b	e addressed	
Madeleine Andress					
2300 W Sahara Ave, STE 670					
Las Vegas	NV 89102	2(70:	2) 248-6004	ANDRESSENT	AOL.COM
b The form in which applications should be sut	omitted and informati				
Written letter, include an	y related ma	terials. Inc	lude proof of	f tax exempt	status
c Any submission deadlines					
None					
d Any restrictions or limitations on awards, suc	h as by geographica	l areas, charitable fie	elds, kinds of institution	ons, or other factors	
Must be a 501 C 3 charity		· - ··-			
in the second se					

Form 990-PF (2015) Andress Family Foundation

Pan XV Supplementary Information (continued)

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

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	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)	substantial contributor	700,011.			
a Paid during the year					
Junior League of Las Vegas		}	Promote Volunteerism and		
861 Bridger			improve the community		
Las Vegas NV 89101	Ì	501 c3)	0.	
Air Force Aid Society			Aid to family of active duty		
Nellis Air Force Base		İ	members of the Airforce		
Las Vegas NV 89119		501 c3	1	0.	
Nathan Adelson Hospice	0	1	Support of nonprofit		
4141 S Swensen]	Hospice care		
Las Vegas NV 89119		501 c3	1	10,000.	
Nevada Ballet Theatre		1	Development of		
1651 Inner Circle		1	the performing		
Las Vegas NV 89119		501 c3	arts	18,100.	
Opportunity Village	}		Promote the interests of		
6050 S Buffalo Dr		i	persons with severe		
Las Vegas NV 89113		501 c3	intellectual disabilities	0.	
Charlotte Hill Society			Help public service media to		
3050 E Flamingo Rd		ļ	serve the community		
Las Vegas NV 89121		501 c3		1,500.	
Sam Schmidt Paralysis Foundation			Research and cure of Paralysis		
PO Box 24355					
Speedway IN 46224		501 c3	[25,000.	
Help of Southern Nevada			Assist families and individuals of So NV		
5105 S. Durango Dr, STE 100			attain self sufficiency through		
Las Vegas NV 89113		501 C3	direct training and referral to comm. resources	0.	
The Smith Center for Performing Arts			Promotion of arts and education		
241 W Charleston Blvd sTE 111			in Clark County NV		
Las Vegas NV 89102		501 C3		0.	
See Line 3a statement		Ì]		
]		
]	14,750.	
)	1	1		
	L	<u> </u>			
Total	<u> </u>	<u></u>		69,350.	
b Approved for future payment					
	}	1			
	}	{	1		
		ļ			
	1	}	1		
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		[_			
Total			<u>.</u>		

Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by	section 512, 513, or 514	(e)	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)	
a	 -					
b	<u> </u>	_ _				
c	<u> </u>					
d						
e	<u> </u>					
f	<u> </u>					
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments	522110	113.				
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate			<u> </u>			
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events			LL			
O Gross profit or (loss) from sales of inventory						
11 Other revenue			h h			
a						
b						
c	<u> </u>		<u> </u>			
d	<u> </u>					
е						
2 Subtotal Add columns (b), (d), and (e)		113.				
3 Total. Add line 12, columns (b), (d), and (e)				13	113	
ee worksheet in line 13 instructions to verify calculation	s)					

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
	
	

BAA

Form 990-PF (2015) Andress Family Foundation 88-0396633 Pant XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes	No
described	organization directly or d in section 501(c) of o political organization	the Code (other	age in any of the following than section 501(c)(3)	ng with any oth organizations)	er organization or in section 527,	;		165	NO
a Transfers	s from the reporting fo	oundation to a	noncharitable exempt or	ganization of		i			
(1) Cash	1						1 a (1)		X
(2) Othe	er assets						1 a (2)		X
b Other tra	nsactions								
(1) Sales	s of assets to a nonch	hantable exem	pt organization				1 b (1)		X
• •			e exempt organization				1 b (2)	\vdash	X
` '			ssets				1 b (3)		<u>x</u>
. ,	, ,						1 b (4)		X
• •	•						1 b (5)		<u>x</u>
٠,,	J						<u>-</u>		
` .		•	or fundraising solicitatio				1 b (6)		_ <u>x</u> _
c Sharing o	or racilities, equipmen	it, mailing lists,	other assets, or paid en	ipioyees			1 c	١	<u> X</u>
the good any trans	s, other assets, or se saction or sharing arra	rvices given by angement, sho	mplete the following sche the reporting foundation w in column (d) the value	n If the founda e of the goods,	ion received less the other assets, or sei	an fair market value i vices received	n 		
(a) Line no	(b) Amount involved	(C) Name	of noncharitable exempt organ	lization	(d) Description of tran	sfers, transactions, and s	naring arran	gements	
		ļ							
				\					
									-
									
									
		}							
		L							
described	indation directly or ind d in section 501(c) of complete the following	the Code (other	d with, or related to, one er than section 501(c)(3)	or more tax-ex or in section t	cempt organizations 527?		. Yes	x	No
(a)	Name of organization	n	(b) Type of orga	anization	(0) Description of relati	onship		
									
									
						· · · · · · · · · · · · · · · · · · ·			
Sign Under pocorrect, in	enalties of penjury, I declare and complete Declaration of	that I have examine foreparer (other tha	d this reflum, including accompa	nying schedules an mation of which pre	d statements, and to the boarer has any knowledge	est of my knowledge and be	May the I this return	n with the	·
	-nucl	1/4/	www.	4/1/	<u> </u>	Tns	preparer (see instr	snown be µctions)?	wore]
Signat	ture of officer or trustee	≺	Dafte	1	Title		1_1_	Yes	No
	Print/Type preparer's name	9	Preparer's sugnature	411	Date	Check X if	PTIN		
Paid	Keri Pettit		Keri Pett:	سمرس	01/09/17	self-employed	P01549	208	
Preparer		ERI PETTI				Firm's EIN			
Use Only	_ 		Hill Court			 			
ose Only		ENDERSON	. ILLI COULC	NV	89012	Phone no (702	1 410-1	2357	
BAA	<u>'n</u>	FUDERSON			03014	1/02			2015\
							Form 99	V-FF (2	(010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

2015

Employer Identification number

OMB No 1545-0047

Name of the organization

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

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

Andress Family Foundation		88-0396633
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a prival	vate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private	foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Gene	eral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) organize	zation can check boxes for both the General Rule and a Special	Rule See instructions
General Rule		
X For an organization filing Form 990, 990-EZ, o	990-PF that received, during the year, contributions totaling \$	5,000 or more (in money or
property) from any one contributor. Complete	Parts I and II See instructions for determining a contributor's tol	al contributions
Special Rules		
For an organization described in section 501(c	c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support tes that checked Schedule A (Form 990 or 990-EZ), Part II, line 13.	t of the regulations
received from any one contributor, during the	year, total contributions of the greater of (1) \$5,000 or (2) 2% of Z, line 1 Complete Parts I and II	the amount on (i)
FORTH 990, Fart VIII, line III, OI (II) FORTH 990-E	z, line i Complete Parts i and ii	
For an organization described in section 501(c	c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ar	ny one contributor,
during the year, total contributions of more that purposes, or for the prevention of cruelty to ch	n \$1,000 exclusively for religious, charitable, scientific, literary,	or educational
purposes, or for the prevention of educity to on	indiction drinings competer and i, ii, and iii	
For an organization described in section 501/c	e)(7), (8), or (10) filing Form 990 or 990-EZ that received from ar	ny ana contributor
during the year, contributions exclusively for re	eligious, charitable, etc., purposes, but no such contributions total	aled more than
\$1,000 If this box is checked, enter here the to	otal contributions that were received during the year for an exclu-	isively religious,
t received ganesolusively religious, charitable	of the parts unless the General Rule applies to this organization etc., contributions totaling \$5,000 or more during the year	n because ⊾ Ś
it reserved horiexerasively religious, chantable,	etc ; continuations totaling \$5,000 or more during the year	
Caution. An organization that is not covered by th	e General Rule and/or the Special Rules does not file Schedule	B (Form 990, 990-F7, 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 ng requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	or on its Form 990-PF,
i art i, inic 2, to certify triat it does not meet the iiii	ig requirements of Schedule B (Fulfit 990, 990-EZ, 0f 990-PF)	

	B`(Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part I
·			r Identification number
	Contributors (see instructions) Use duplicate copies of Part I if additional space		390033
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Andress Family Trust, dtd 2/15/1985 2300 W Sahara Ave STE 670	\$20,000.	_
	Las Vegas NV 89102	{	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$_~	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occupiete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
~		\$ 	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occupiete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for
			noncash contributions)

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

Name and address	If recipient is an individual, show any	Foun- dation status of re-	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	cipient		Amount
a Paid during the year				
YMCA of So Nevada	-		support and development of	Person or
101 N. Wacker Dr			youth in southern NV	Business X
Chicago IL 60606		501 c3		1,500.
George W. Bush Foundation			endow_a_presedential_	1
2943 SMU Blvd			library	Business X
<u>Dallas</u> <u>TX 75205</u>		501 C3		0.
Nevada Woman's Philanthropy		501_c3_		Person or
1635 Village Circle				Business X
Las Vegas NV 89135		501 C3	Promotion of philanthropic activities	
St. Johns Healthcare Foundation			Pinancial support for capital projects	
1600 N. Rose Ave			equipment, programs and services	
<u>Oxnard</u> <u>CA</u> <u>93030</u>	<u> </u>	501 C3	to the poor and underserved	1,500.
The Shade Tree	l		 	Person or
1_West_Owens			Providing safe shelter to homeless	Business X
North Las Vegas NV 89030	ļ	501 C3	and abused women and children in crist	
Three Square		<u> </u>		Person or
4190 N. Pecos Rd				Business X
Las Vegas NV 89115		501 C3	Food Bank providing food to homeless a	
UNLV Foundation				Person or
4505 S. Maryland Pkwy			raises and manages private funds to	
Las Vegas NV 89154	L	501 c3	benefit of the university	5,000.

Total

Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount
Andress Family Trust Dtd 2/15/1985	20,000.
Total	20,000.