

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

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.

OMB No 1545-0052

Open to Public Inspection

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service 07/01, 2015, and ending For calendar year 2015 or tax year beginning 06/30, 2016 Name of foundation A Employer identification number KNELLER FAMILY FOUNDATION 26-3854939 Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Room/suite PO BOX 9792 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here. BRECKENRIDGE, CO 80424 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here. Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . Fair market value of all assets at J Accounting method | X Cash If the foundation is in a 60-month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . -1,753,055. *16)* ▶ \$ (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment total of amounts in columns (b), (c), and (d) (c) Adjusted net for charitable expenses per may not necessarily equal the amounts in ıncome purposes income books column (a) (see instructions)) (cash basis only) 27,000 Contributions, gifts, grants, etc., received (attach schedule). Check X if the foundation is not required to 2 attach Sch B. i.c.) 18 ATCH 1 18. 18. 3 Interest on savings and temporary cash investments. 22,940 22,940. 22,940. ATCH 2 Dividends and interest from securities Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a 650,000 0. 7 Capital gain net income (from Part IV, line 2). 8 Net short-term capital gain. Income modifications 10a Gross sales less returns and allowances . . . Less Cost of goods sold . c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 49,958. 22,958. 22,958. 12 Total. Add lines 1 through 11 0 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 14 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 802 802 Accounting fees (attach schedule)ATCH 3 istrative S Other professional fees (attach schedule). . . 17 400 400. 18 Taxes (attach schedule) (see instructions)[4]. 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings and 22 Printing and publications 67 ğu 67. 23 Other expenses (attach schedule) ATCH . 5 . 24 Total operating and administrative expenses. Oper 1,269 1,269 Add lines 13 through 23. 140,000 140,000 25 Contributions, gifts, grants paid 141,269. 26 0. 1,269 140,000 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 -91,311 a Excess of revenue over expenses and disbursements . . 22,958 **b** Net investment income (if negative, enter -0-)

A For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-). .

9/27/2016 12:27:27 PM V 15-7F

1861-01

21,689

Form 990-PF (2015) PAGE

Beginning of year

(a) Book Value

155,986.

1,675,000.

1,830,986.

1,830,986.

1,830,986.

1 020 006

Attached schedules and amounts in the

amounts only (See instructions)

Balance Sheets description column should be for end-of-year

Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule)

Prepaid expenses and deferred charges

Investments - U S and state government obligations (attach schedule). . Investments - corporate stock (attach schedule) Investments - corporate bonds (attach schedule).

Investments - other (attach schedule) ATCH . 6 . . .

Total assets (to be completed by all filers - see the

Accounts payable and accrued expenses

Deferred revenue...........

Loans from officers, directors, trustees, and other disqualified persons, .

Mortgages and other notes payable (attach schedule)

and complete lines 24 through 26 and lines 30 and 31.

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg, and equipment fund.

Retained earnings, accumulated income, endowment, or other funds . . .

Total net assets or fund balances (see instructions).....

Total liabilities and net assets/fund balances (see

Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.

Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here . ▶

Accounts receivable ▶

Pledges receivable ▶

Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)

Less accumulated depreciation

Other liabilities (describe ▶_

Other assets (describe >

Land, buildings, and equipment basis

(attach schedule)

Less allowance for doubtful accounts ▶

Less allowance for doubtful accounts ▶

Less allowance for doubtful accounts ▶ _

Investments - mortgage loans.

Part II

1

2

3

5

9

10a

12

13

15

16

17

18

19

20

21

22

23

24

25

26

27

29

30 Net/ 31

Balances

or Fund

Assets 28

_			
4939		Page 2	
aır Mar	ket Va	alue	-
	164	, 675	1
]]
			j -
			-
]
			-
			-
			-
]
1.	588	,380	-) <u>.</u>
]
			- -
1,	753	,055	j.
			1

26-385

(c) F

End of year

(b) Book Value

164,675.

1,575,000.

1,739,675.

1,739,675

1,739,675.

1 720 675

0.

	instructions)	,,,,,,	
P	art 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	1,830,986.
2	Enter amount from Part I, line 27a	2	-91,311
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	1,739,675
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,739,675
			5 000 DE (0045)

ightharpoonup | X

Form **990-PF** (2015)

Page 3

Pa	rt IV Capital Gains	and Losses for Tax on Inv	vestment Income			
	(a) List an	(b) How acquired	(c) Date acquired	(d) Date sold		
	2-story b	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)		
1a						
ь						
c						
d						
e						
		(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	ss)
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	
						-
				 	_	
С						
d						
_ <u>_</u>	-					
	Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69	//\	Gaine (Col. (b) a	ain minus
		(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
				 		
				 		
c	-		-			
d						
e						
			f gain, also enter in Part I, line 7			
2	Capital gain net income	Or I not canital loce!	f (loss), enter -0- in Part I, line 7	2		
3	Net short-term capital da	ا				
·	· -	• •	structions) If (loss), enter -0- in			
				- 3		
Da	rt V Qualification	Under Section 4940(e) for Re	educed Tax on Net Investment I	_		
_			he section 4940(a) tax on net invest			
Wa		the section 4942 tax on the distri	ibutable amount of any year in the b	ase period	א פע	Yes No
If "Y		not qualify under section 4940(e)				
1		nount in each column for each ye	ar, see the instructions before makir	ng any ent		
	(a) Base penod years	(b)	(c)		(d) Distribution r	atio
Ca	endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	col (c))
	2014					
	2013					
	2012			ļ		
	2011					
	2010					
				1 1		
2	Total of line 1, column (d	d)		2		
3			ide the total on line 2 by 5, or by the			
	_	•	ess than 5 years	3		
	•		•			
4	Enter the net value of no	4				
5	Multiply line 4 by line 3		5			
6	Enter 1% of net investm	ent income (1% of Part L line 27h)		6		
		•				
7	Add lines 5 and 6			7		
8	If line 8 is equal to or g	ions from Part XII, line 4 greater than line 7, check the box	x in Part VI, line 1b, and complete	8 that part	using a 1% ta	x rate See the
	Part VI instructions					

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see it	nstru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here		•	
	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		4	459.
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			459.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		•	459.
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 531.			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			531.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			72.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 72. Refunded ▶ 11		<u> </u>	
	t VII-A Statements Regarding Activities	r		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	l l		v
	Instructions for the definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			x
	Did the foundation file Form 1120-POL for this year?	1c		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation \$(2) On foundation managers \$(3) \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
2	foundation managers \$	2	-	x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_		, ·
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		-	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	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			į
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		х	1
7	conflict with the state law remain in the governing instrument?	7	X	
7 8a	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 Enter the states to which the foundation reports or with which it is registered (see instructions)	'-		
	CO,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			V-
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation ATCH 7	8b		X
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,"			x
	complete Part XIV	9		^
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х

Par	t 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		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
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?	13	Х	
	Website address ► N/A			
14	The books are in care of ► MARY LYNNE KNELLER Telephone no ► 970-547	-713	7	
	Located at ► PO BOX 9792 BRECKENRIDGE, CO ZIP+4 ► 80424			
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			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		- 1	
	the foreign country ▶			
Par	t 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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(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		ł	
	the benefit or use of a disqualified person)?			
	(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		. 1	
	termination of government service, if terminating within 90 days)			
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	- 4 %		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
_	Organizations relying on a current notice regarding disaster assistance check here		i	
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	-10		
•	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?			
	If "Yes," list the years			
ь	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	L		
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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		X

ır ci	rt VII-B 5 Statements Regarding Activities	s for Which Form	4720 May Be Req	uired (continued)		
5a	During the year did the foundation pay or incur any am	ount to				
	(1) Carry on propaganda, or otherwise attempt to influ	ience legislation (sectio	n 4945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public e	lection (see section 4	1955), or to carry or			i
	directly or indirectly, any voter registration drive?		•	· ~ ~	,	
	(3) Provide a grant to an individual for travel, study, or			_	i i	
	(4) Provide a grant to an organization other than			• 🗀 · 🗀 ·		
	section 4945(d)(4)(A)? (see instructions)				,	
	(5) Provide for any purpose other than religious, of			• — —	' }	
	purposes, or for the prevention of cruelty to children	•	• •			
ь					1 1	
D	If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53 4945 or in a current notice rega				i i	+
			·		5b	
	Organizations relying on a current notice regarding dis-					
С	If the answer is "Yes" to question 5a(4), does the					
	because it maintained expenditure responsibility for the		• • • • • • • • • •	. [Yes No)	
	If "Yes," attach the statement required by Regulations so	ection 53 4945-5(d)				,
6a	Did the foundation, during the year, receive any fu					
	on a personal benefit contract?			Yes X No	,	
b	Did the foundation, during the year, pay premiums, dir	ectly or indirectly, on a	personal benefit contra	ıct [?]	6b	X
	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 X No	,	
b	If "Yes," did the foundation receive any proceeds or ha					-
Pai	rt VIII Information About Officers, Directo	ors, Trustees, Fou	ndation Managers	s, Highly Paid Emp	oloyees,	
1	and Contractors List all officers, directors, trustees, foundation	managere and their	componentian /coo	instructions)		
•		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	
ATC	Н 8		0.	0.		0.
-			·			
				-		
2	Compensation of five highest-paid employees		e included on lin	e 1 - see instructi	ons). If no	
2	Compensation of five highest-paid employees		e included on line	e 1 - see instructi	ons). If no	
	"NONE."	(other than thos		(d) Contributions to	·	ne, enter
	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than thos	e included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred	ons). If no (e) Expense other allo	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos		(d) Contributions to employee benefit	(e) Expense	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos		(d) Contributions to employee benefit plans and deferred	(e) Expense	ne, enter
	"NONE." Name and address of each employee paid more than \$50,000	(other than thos	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	ne, enter
(a)	"NONE." Name and address of each employee paid more than \$50,000	(other than thos	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense	ne, enter
(a)	"NONE." 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	ne, enter

Form	n 990-PF (2015)	Page 7
Pa	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NO	NE	
		0
		
Tot	al number of others receiving over \$50,000 for professional services	
Pa	rt IX-A Summary of Direct Charitable Activities	
	ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of irganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
3		
4		
	MIV D. Cummon of Drawn Doloted Investor and	
_	rt IX-B Summary of Program-Related Investments (see instructions)	A 4
	Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 NONE	Amount
1	NOND	
2		
_		
	All other program-related investments. See instructions	
	NONE	
-		
	19-	
Tot	al. Add lines 1 through 3	

Pag	e	٤

Pari	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	1,682,883.
b	Average of monthly cash balances	1b	159,857.
С	Fair market value of all other assets (see instructions).	1c	
d	Total (add lines 1a, b, and c)	1d	1,842,740.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	_
3	Subtract line 2 from line 1d	3	1,842,740.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	27,641.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,815,099.
6	Minimum investment return. Enter 5% of line 5	6	90,755.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	90,755.
2 a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI).		
c	Add lines 2a and 2b	2c	459.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	90,296.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	90,296.
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	90,296.
Par	t XII Qualifying Distributions (see instructions)	*	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	140,000.
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	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	140,000.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	140,000.
	Note The amount on line 6 will be used in Part V column (b) in subsequent years when co	alculating whether	the foundation

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

KNELLER FAMILY FOUNDATION

Form 990-PF (2015)

Page 9

Рa	rt XIII Undistributed Income (see Instr	uctions)			
4	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
'	· [90,296.
_	line 7				
	Undistributed income, if any, as of the end of 2015	-		90,624.	
a	Enter amount for 2014 only		88,312.	30,0211	
	Total for pnor years 20 13 ,20 12 ,20 11	-	00,312.		 _
	Excess distributions carryover, if any, to 2015		j		
	From 2010		,		
	From 2011				
	From 2012				
	From 2013				
	From 2014	0.			1
	Total of lines 3a through e	0.			
4	Qualifying distributions for 2015 from Part XII, line 4 > \$ 140,000.]		ı
а	Applied to 2014, but not more than line 2a			90,624.	
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				· · · · · · · · · · · · · · · · · · ·
С	Treated as distributions out of corpus (Election				
	required - see instructions)				40.276
d	Applied to 2015 distributable amount				49,376.
	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))				1
6	Enter the net total of each column as				1
	indicated below:			-	- {
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				<u> </u>
b	Prior years' undistributed income Subtract		88,312.		, !
_	line 4b from line 2b		00,312.		
C	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed	<u> </u>			····
d	Subtract line 6c from line 6b Taxable		88,312.		
	amount - see instructions		00,312.		
·	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1. This amount must be				40,920.
_	distributed in 2016				20,000
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	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	0.			
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
					- 000 DC (

Form **990-PF** (2015)

$\overline{}$	TA VIV	time Foundations	/	and Dort VIII A guarde	~~ O\		NOT	APPLICABLE
	rt XIV · Private Op						NOI	APPLICABL
1 a	If the foundation has				- 1			
	foundation, and the rulin	-	_		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
Ь	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section	4942(j)(3) or [4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	· · · · · · · · · · · · · · · · · · ·			(e) Total
	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 20	12		
	I or the minimum investment return from Part X for each							
	year listed							
ь	85% of line 2a							
С	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							
е	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							
а	"Assets" alternative test - enter							
	(1) Value of all assets				1			
	(2) Value of assets qualifying							
	under section							
ь	4942(j)(3)(B)(i) "Endowment" alternative test-				1			
	enter 2/3 of minimum invest-							
	ment return shown in Part X,							
	line 6 for each year listed				-			
С	"Support" alternative test - enter							
	(1) Total support other than gross investment income	Į.					ļ	
	(interest, dividends, rents,						İ	
	payments on secunties 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 sup-							
	port from an exempt							
	organization (4) Gross investment income.							, ,
Рa		ntary Information (Complete this par	only if the founda	tion had \$!	5 000 o	r more	in assets at
ناسا		uring the year - see		comy in the rounds	tion naa 🔾	,,,,,,,,,		iii ussetts ut
1	Information Regardin		<u> </u>					
-	List any managers of	_		re than 2% of the tot	al contributio	ns recei	ved by f	he foundation
u	before the close of any						ved by i	are roundation
		•	•	, , ,		(/(//		
	ATTACHME		100/ 01 0000	of the steel of a sec-				nortion of the
D	List any managers of ownership of a partne					an equali	y large	portion of the
	ownership or a partile	iship of other entity) o	i willon the loundatio	ii iias a 10 % oi greatei	interest			
	<i>*</i>							
	N/A							
2	Information Regardin	ig Contribution, Grant	t, Gift, Loan, Scholars	hip, etc., Programs:				
	Check here ► X If	the foundation only	makes contributions	to preselected char	itable organ	izations	and doe	es not accept
	unsolicited requests f	for funds. If the found	ation makes gifts, gi	rants, etc (see instruc	tions) to ind	ividuals o	or organ	nzations under
	other conditions, com	plete items 2a, b, c, an	ıd d					
а	The name, address, a	and telephone number	or e-mail address of	the person to whom ap	plications sho	ould be ac	Idressed	
		•			•			
b	The form in which app	olications should be su	bmitted and informat	on and materials they	should include	de .		
_	т			ion and materials troy	01100.0			
_	Any submission dood	lines	·					
C	Any submission dead	III IC5						
	I A 222122-0				alata E d l	1		
C	l Any restrictions or I factors	limitations on awards	s, such as by geog	rapnicai areas, charit	able fields,	kinds of	institut	ions, or other
	iauluis							

	990-PF (2015)					Page 11
Pai	t XV Supplementary Information	(co	ntinued)			
_3	Grants and Contributions Paid Dur	ing	the Year or Appr	oved for F	uture Payment	
	Grants and Contributions Paid Dur Recipient Name and address (home or business)	4	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Paid during the year		or substantial contributor	recipient		
а	raid during the year					
ΓA	TCH 10					
		1				
		-				
		1				
			_			
	Total				. <u></u>	140,000.
h	Total		· · · · · · · · · · · · · · · · · · ·			140/000.
	Approved for fatare payment					
					1	
					1	
				ļ		
				<u> </u>	<u> </u>	
	Total		<u> </u>	<u></u>		- 000 RF (00.00)

age	1	2	
mpt			

r gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemply function income (See instructions
)					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments			14	18.	
Dividends and interest from securities			14	22,940.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property		.			
Other investment income					
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events · · ·					
Gross profit or (loss) from sales of inventory Other revenue a					
1		-			
					
)	l l				
				22,958.	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce rt XVI-B Relationship of Activitie	ulations)				22,9
Subtotal Add columns (b), (d), and (e)	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce tt XVI-B Relationship of Activitie e No. Explain below how each activity	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce tt XVI-B Relationship of Activitie e No. Explain below how each activity	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce tt XVI-B Relationship of Activitie e No. Explain below how each activity	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly t
tubtotal Add columns (b), (d), and (e)	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly t
Subtotal Add columns (b), (d), and (e)	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce rt XVI-B Relationship of Activitie e No. Explain below how each activity	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations) s to the Acc	complishment of	Exempt Purp	oses of Part XVI-A contribu	ted importantly to

	XVII	Information Ro Exempt Organ		nsfers To and	Fransaction	ons an	nd Rela	tionship	os With Nonc	chari	table)
1	n sect	e organization direction 501(c) of the Cozations?	ly or indirectly e		_		-	_			Yes	No
	_	ers from the reportin	q foundation to	a noncharitable ex	empt organi	zation o	f					
		sh	•							1a(1)		X
		ner assets								1a(2)		X
		transactions									-	,
((1) Sal	les of assets to a no	ncharitable exen	npt organization.						1b(1)		X
	(2) Pui	rchases of assets fro	om a noncharital	ble exempt organiza	ition		• • • •			1b(2)		X
		ntal of facilities, equi imbursement arrange										X
		ans or loan guarantee										X
	(6) Pei	rformance of service	s or membersh	ip or fundraising sol	licitations			 		1b(6)		X
		g of facilities, equipm										X
		answer to any of th										
		of the goods, other										
		n any transaction or			· · ·				•			
(a) Lir	ie no	(b) Amount involved N/A	(c) Name of n	oncharitable exempt orga	anization	N/A	scription o	r transfers, tr	ansactions, and shar	ing arra	ingeme	nts
		11,711				11/11			·	-		
		· · · · · · · · · · · · · · · · · · ·		·····	-							
											•	
	+											
										_		
						·						
		foundation directly	_						·	\neg	\ <u>\</u>	7 N.
		bed in section 501(c) ," complete the follo	-	ner than section 50) ((c)(3)) or i	ın sectio	on 5277		L	Y	es LX	No
	11 103	(a) Name of organization		(b) Type of o	organization			(c) De	escription of relations	ship		
									·			
					·							
	Linde	r penalties of penjury, I decla	are that I have examin	ned this return including a	ccompanying se	hedules an	d statements	s and to the	hest of my knowledg	e and l	helief it	is this
	corre	ct, and complete Declaration of							best of my knowledg	jo and i	ochor, it	13 (106,
Sign		MARY LYNNE KNE	LLER	09/27/2	016	-a	AC: A ~4		May the IRS			
Here	جرًا د	nature of officer or trustee		Date		Title	MS/S/		with the pr (see instruction	eparer s)? X	Yes	below
	7	}	_						`	· L		
Paid		Print/Type preparer's na	me	Preparer's signature	- 100 -		Date	1. 1.	Check If	PTIN		
		MEGAN M MASYG		111109a		Ugs	- 191	21/6			5659	94
-	oarer	0.5	RTIN BROWN		INĊ.	\mathcal{A}		/ Firm	n's EIN ► 46-3	6646	95	
Use	Only			Y STREET #116	, ($\mathcal{J}U_{\mathbb{R}^{d}}$	246 2	665	720 6	10 7	400	
		L DE	ENVER, CO			8(0246-2	Pho Pho	ne no 720-6			(2015)
									61	プブ	v-r r	12015

ATTACHMENT 1 PAGE 15

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

	ADJUSTED	NET	INCOME	18.
	NET	INVESTMENT	INCOME	18.
REVENUE	AND	EXPENSES	PER BOOKS	18.
			DESCRIPTION	RBC CAPITAL MARKETS CORPORATION

TOTAL

18.

ATTACHMENT 2

SECORTIES OF THE SECOND OF THE	
INTEREST FROM	
DENDS AND IN	
«T I – DIVII	
FORM 990PF, PAF	
FORM	

		INCOME	22,940. 22,940.	22.940.
REVENUE		PER BOOKS INCOME	22,940.	22.940.
			S CORPORATION	TOTAI,
		DESCRIPTION	RBC CAPITAL MARKETS CORPORATION	

	(~	
l	E	-	
l	:	Z	
l	į	ī	
l	;	Σ	
l	:	1	
ŀ	(_	١
l	f	╛	ľ
Į	E	-	
l	E	-	

FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
ACCOUNTING FEES		802.		802.	
	TOTALS	802.		802.	

ATTACHMENT

- TAXES PART I FORM 990PF, REVENUE AND EXPENSES PER BOOKS

400.

ADJUSTED NET INCOME

400.

DESCRIPTION

FEDERAL EXCISE TAX

400.

TOTALS

400.

ATTACHMENT 4 PAGE 18

9/27/2016 12:27:27 PM V 15-7F

ω,
Н
z
回
\mathbf{z}
Ξ
$\overline{\mathbf{o}}$
ш.
TAC
ΤA
ΤA
TTA(

- OTHER EXPENSES

PART I

FORM 990PF,

DESCRIPTION POSTAGE/SOS FEE OTHER

REVENUE AND EXPENSES PER BOOKS

67.

ADJUSTED NET INCOME

18. 49.

67.

TOTALS

ATTACHMENT 5 PAGE 19

ဖ
HMENT
ATTAC
•

ENDING FMV

ENDING BOOK VALUE

ER INVESTMENTS		
PART II - OTHER		
FORM 990PF,		DESCRIPTION

ALLY BK MIDVALE UT C/D
SMW BK NOKIH AMEK SLC UI C/D
AMEXPRESS CENTURION BK C/D
SOLDMAN SACHS BANK NY C/D
SOLDMAN SACHS BANK NY C/D
SE CAP BANK INC RETAIL C/D
DISCOVER BANK GREENWOOD DE C/D
SANK OF CHINA NYC NY C/D
JEDALLION BANK SLC UT C/D
SREAT SOUTHERN BK C/D
WELLS FARGO NA, CA C/D
SALLIE MAE, MURRAY, UT C/D
CAPITAL ONE NATL ASSN
ALLY BK MIDVALE UT C/D
SMW BK NORTH AMER SLC UT C/D

TOTALS

	01,01	150,3/5. 250,565. 100,350.	150,077. 51,535.	5,2	02,82 53,71	1,588,380.
(150,000.	150,000.			1,575,000.

ATTACHMENT '								
A I I A L HIVIP NI I	7	тт	ו די	\sim	(T R /	וידו	חח דא	
	м		~		HIV	1 P.I	A I	

FORM 990PF, PART VII-A, LINE 8B - EXPLANATION OF NON-FILING

COLORADO DOES NOT REQUIRE FILING WITH THE STATE IF THE FOUNDATION DOES NOT RECEIVE CONTRIBUTIONS FROM MORE THAN 10 PERSONS DURING A FISCAL YEAR AND DOES NOT CONTRACT WITH PAID SOLICITORS.

ATTACHMENT 8	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES
	COMPENSATION BENEF
S, DIRECTORS, AND TRUSTEES	TLE AND AVERAGE HOURS PER

STEPHEN R KNELLER
PO BOX 9792
BRECKENRIDGE, CO 80424

SECRETARY/TREASURER

MARY LYNNE KNELLER PO BOX 9792 BRECKENRIDGE, CO 80424

0

0

.

。

0

.

0.

GRAND TOTALS

ATTACHMENT 9

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

STEPHEN R KNELLER MARY LYNNE KNELLER

ATTACHMENT 10

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BRECKENRIDGE OUTDOOR EDUCATION CENTER	NONE	ADAPTIVE SKI PROGRAM	10,000.
PO BOX 697	PC		
BRECKENRIDGE, CO 80424			
ST. THOMAS' EPISCOPAL CHURCH	NONE	COMMUNITY FOOD BANK	10,000.
PO BOX 735	PC		
DUBOIS, WY 82513			
WESTERN FREMONT COUNTY HUMANE SOCIETY	NONE	SUPPORT OF HUMANE SOCIETY PROGRAMS	5,000.
PO BOX 667	PC		
DUBOIS, WY 82513	-		
THE COLORADO TRAIL FOUNDATION	NONE	COVER COSTS OF MAINTAINING TRAIL	5,000.
710 10TH STREET #210	PC		
GOLDEN, CO 80401			
COLORADO STATE UNIVERSITY FOUNDATION	NONE	FUNDING OF ANIMAL CANCER CENTER	75,000.
510 UNIVERSITY SERVICES CTR, 601 S HOWES STREET	PC		
FORT COLLINS, CO 80523	~		
THE IRISH WOLFHOUND FOUNDATION	NONE	SUPPORT IRISH WOLFHOUND HEALTH RESEARCH PROGRAM	10,000.
150 CREEK ROAD	PC		
PHILLIPSBURG, NJ 08865	_		

1861-01

V 15-7F

12:27:27 PM

9/27/2016

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

12:27:27 PM

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

NONE

FERRET DREAMS RESCUE & ADOPTION

2102 S CLARKSON ST

DENVER, CO 80210

RECIPIENT NAME AND ADDRESS

SG

NONE

FRIENDS OF DINOSAUR RIDGE

16831 W ALAMEDA PARKWAY

MORRISON, CO 80465

NONE

MORRISON NATURAL HISTORY FOUNDATION

NONE

SUMMIT PUBLIC RADIO & TV

MORRISON, CO 80465

PO BOX 564

BRECKENRIDGE, CO 80424

P.O. BOX 6392

PC

NONE

13701 W. JEWELL AVE. #251

SECOND WIND FUND

LAKEWOOD, CO 80228

1861-01

26-3854939

ATTACHMENT 10 (CONT'D)

1,000. 1,000. 1,000. 2,000. 20,000. 140,000. AMOUNT TOTAL CONTRIBUTIONS PAID PURPOSE OF GRANT OR CONTRIBUTION SUPPORT TO PREVENT YOUTH SUICIDE FOR SUPPORT OF THE MEDICAL FUND TO PROMOTE EDUCATIONAL PROGRAMS TO PROMOTE EDUCATIONAL PROGRAMS GENERAL OPERATIONS