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For calendar year 2015, or tax year beginning 08-01-2015, and ending 07-31-2016

Name of foundation PAUL S BOMBERGER JR FOUNDATION INC		<b>A Employer identification number</b> 20-5349740	
Number and street (or P O box number if mail is not delivered to street address) 6003 S HONORE AVE STE 101		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code SARASOTA, FL 34238		<b>B</b> Telephone number (see instructions) (941) 684-0500	
<b>G</b> 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		<b>C</b> If exemption application is pending, check here <input type="checkbox"/> <b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>H</b> 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			
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$</b> 4,919,501		<b>J</b> 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	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments . . . . .	5,215	5,215	5,215	
	<b>4</b> Dividends and interest from securities . . . . .	103,526	103,526	103,526	
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10  _____	27,944			
	<b>b</b> Gross sales price for all assets on line 6a 1,137,770				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . . .		18,341		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . . 	-3,607		-3,607	
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	133,078	127,082	105,134	
	<b>13</b> Compensation of officers, directors, trustees, etc				
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule). . . . . 	1,600	1,400		200
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . . . . 	3,814	3,814		
	<b>19</b> Depreciation (attach schedule) and depletion . . . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .	799			799
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . . 	35,436	33,657	33,657	1,779
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	41,649	38,871	33,657	2,778
	<b>25</b> Contributions, gifts, grants paid . . . . .	294,000			294,000
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	335,649	38,871	33,657	296,778
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	-202,571			
	<b>b Net investment income</b> (if negative, enter -0-)		88,211		
	<b>c Adjusted net income</b> (if negative, enter -0-)			71,477	

<b>Part II</b> <b>Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End of year	
			<b>(a)</b> Book Value	<b>(b)</b> Book Value	<b>(c)</b> Fair Market Value
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	8,084	9,164	9,165
	<b>2</b>	Savings and temporary cash investments . . . . .	51	51	
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b>	Grants receivable . . . . .			
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .			
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ 1,473,604 Less allowance for doubtful accounts ▶ _____	1,482,797	1,473,604	1,473,604
	<b>8</b>	Inventories for sale or use . . . . .			
	<b>9</b>	Prepaid expenses and deferred charges . . . . .			
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)			
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b>	Investments—mortgage loans . . . . .			
	<b>13</b>	Investments—other (attach schedule) . . . . .	3,035,694	2,841,236	3,436,732
	<b>14</b>	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>15</b>	Other assets (describe ▶ _____)				
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	4,526,626	4,324,055	4,919,501	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .			
	<b>18</b>	Grants payable . . . . .			
	<b>19</b>	Deferred revenue . . . . .			
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons	4,643,378	4,643,378	
	<b>21</b>	Mortgages and other notes payable (attach schedule). . . . .			
	<b>22</b>	Other liabilities (describe ▶ _____)			
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	4,643,378	4,643,378	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	<b>24</b>	Unrestricted . . . . .	-116,752	-319,323	
	<b>25</b>	Temporarily restricted . . . . .			
	<b>26</b>	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .			
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund			
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds			
	<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	-116,752	-319,323	
	<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	4,526,626	4,324,055	

<b>Part III</b> <b>Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b>	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) . . . . .	<b>1</b> -116,752
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b> -202,571
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b> _____
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b> -319,323
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b> _____
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b> -319,323

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	18,341
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	270,202	5,211,257	0 051850
2013		5,216,753	
2012		3,390,438	
2011			
2010			

2	Total of line 1, column (d).	2	0 051850
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 051850
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	5,029,801
5	Multiply line 4 by line 3.	5	260,795
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	882
7	Add lines 5 and 6.	7	261,677
8	Enter qualifying distributions from Part XII, line 4.	8	296,778

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 VII

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

1,465

b

Exempt foreign organizations—tax withheld at source . . . . .

6b

c

Tax paid with application for extension of time to file (Form 8868). . . . .

6c

d

Backup withholding erroneously withheld . . . . .

6d

7

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

7

1,465

8

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

8

2

9

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

9

10

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

10

581

11

Enter the amount of line 10 to be **Credited to 2015 estimated tax** 581 **Refunded**

11

Part VII-A

Statements Regarding Activities

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

Form 990-PF (2015)


**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>GREGORY ROPER</u> Telephone no ▶ <u>(941) 684-0500</u> Located at ▶ <u>4000 KINGSTON TERRACE SARASOTA FL</u> ZIP+4 ▶ <u>34238</u>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>			
<b>16</b>	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 ▶	<b>16</b>	<b>Yes</b>	<b>No</b>


**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
<b>1a</b>	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>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	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? . . . . .	<b>1c</b>		
<b>2</b>	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))			
<b>a</b>	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
<b>3a</b>	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>b</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 ). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)**

<b>5a</b> During the year did the foundation pay or incur any amount to				
<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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)?		<b>5b</b>		
Organizations relying on a current notice regarding disaster assistance check here. 				
<b>c</b> 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?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
If "Yes," attach the statement required by Regulations section 53.4945–5(d)				
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>6b</b>		No
If "Yes" to 6b, file Form 8870				
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>		

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(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
BEVERLY RICHTER 11509 BELVEDERE TERRACE BRADENTON, FL 34211	VICE PRESIDE 1 00	0	0	0
GREGORY ROPER 4000 KINGSTON TERRACE SARASOTA, FL 34238	TREASURER 1 00	0	0	0
BRENT RICHTER 11509 BELVEDERE TERRACE BRADENTON, FL 34211	PRESIDENT 1 00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(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
NONE				
<b>Total</b> number of other employees paid over \$50,000. 				

**Part VIII**

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

<b>3</b> 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
<b>1</b> _____	
<b>2</b> _____	
<b>3</b> _____	
<b>4</b> _____	

**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
<b>1</b> N/A	
<b>2</b> _____	
_____	
_____	
All other program-related investments. See instructions.	
<b>3</b> _____	
_____	
_____	

Total. Add lines 1 through 3 . . . . . ▶



**Part X Minimum Investment Return**

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	3,352,669
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	20,624
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	1,733,104
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	5,106,397
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	5,106,397
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	76,596
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	5,029,801
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	251,490

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

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	251,490
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	882
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	882
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	250,608
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	250,608
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	250,608

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	296,778
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	296,778
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	<b>5</b>	882
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	295,896

**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				250,608
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .			1,429	
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 ► \$ 296,778				
a Applied to 2014, but not more than line 2a			1,429	
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. . . . .				250,608
e Remaining amount distributed out of corpus	44,741			
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	44,741			
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. . . . .				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
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. . . . .	44,741			
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. . . .	44,741			

## Part XIV

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**b**

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	


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## Part XV

**1**

**a**

**b**

**2**

Check here ☐ unsolicited re  
other conditio

**a**

**b**

**C**

**d**

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)				
<div>a Paid during the year</div> <div>See Additional Data Table</div>				
<div>Total . . . . .</div>			<div>▶ 3a</div>	294,000
<div>b Approved for future payment</div>				
<div>Total . . . . .</div>			<div>▶ 3b</div>	

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2015)

## Part XVII

**1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a** Transfers from the reporting foundation to a noncharitable exempt organization of

**b Other transactions**

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
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**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . .

**b** If "Yes," complete the following schedule

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.
--

Paid Preparer Use Only	Print/Type preparer's name JUDY L HICKS CPA	Preparer's Signature	Date 2016-11-04	Check if self-employed <input type="checkbox"/>	PTIN P00229711
	Firm's name ▶ ANDERSON & WHITNEY PC			Firm's EIN ▶ 84-1016028	
	Firm's address ▶ 5801 W 11TH ST STE 300 GREELEY, CO 80634			Phone no (970) 352-7990	

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)				
<b>a</b> Paid during the year				
AIMS COMMUNITY COLLEGE 5401 W 20TH ST GREELEY,CO 80639			TO PROMOTE HIGHER EDUCATION	6,000
ALL FAITH FOOD BANK 717 CATTLEMEN ROAD SARASOTA,FL 34232			TO FEED NEEDY PEOPLE	4,000
AMERICAN RED CROSS OF SW FL 2001 CANTU CT SARASOTA,FL 34232			PROVIDE ASSISTANCE TO THOSE IN NEED	1,000
ASSISTANCE LEAGUE OF GREELEY PO BOX 607 GREELEY,CO 80632			TO PROVIDE ASSISTANCE TO THE NEEDY	10,000
CATHOLIC CHARITIES OF SW KANSAS 906 CENTRAL AVE DODGE CITY,KS 67801			HELP PEOPLE IN NEED	5,000
CHILD EVANGELISM FELLOWSHIP 3110 S WADSWORTH BLVD DENVER,CO 80227			TO PROMOTE BIBLE-CENTERED CHILDREN	3,000
CHILDREN'S HOSPITAL FOUNDATION 13123 E 16TH AVE BOX 045 AURORA,CO 80045			TO PROVIDE COMFORT FOR THE ILL	17,000
CHURCH OF THE PALMSFOOD PANTRY 3224 BEE RIDGE RD SARASOTA,FL 34239			TO FEED THE HUNGRY/BUILDING FUND	29,000
COMMUNITY OUTREACH CENTER 908 11TH AVE GREELEY,CO 80631			FOOD AND CLOTHING ASSISTANCE	4,000
COMMUNITY WALK FOR LIFE 1945 FRUITVILLE RD SARASOTA,FL 34236			TO SUPPORT THE PREGNANCY CENTER	1,000
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON RD BETHESDA,MD 20814			TO COMBAT CYSTIC FIBROSIS	4,000
DIOCESE OF DODGE CITY 910 CENTRAL PO BOX 137 DODGE CITY,KS 67801			TO PROVIDE SPIRITUAL	5,000
FAMILY CRISIS CENTER INC 1924 BOADWAY AVE GREAT BEND,KS 67530			PROVIDE HELP FOR FAMILIES	1,000
FOOD BANK OF MANATEE 811 23RD AVE E BRADENTON,FL 34208			PROVIDE FOOD FOR PEOPLE NEEDING HELP	4,000
MACS - MANASOTA ADV CS PO BOX 1547 SARASOTA,FL 34239			TO PROVIDE SPIRITUAL	25,000
<b>Total . . . . . ▶ 3a</b>				294,000

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)				
<b>a</b> Paid during the year				
MEALS ON WHEELS OF SARASOTA INC 421 N LIME AVE SARASOTA, FL 34237			TO FEED THE HUNGRY	4,000
MEALS ON WHEELS WELD COUNTY 2131 9TH ST GREELEY, CO 80634			TO FEED THE HUNGRY	4,000
MOFFIT CANCER CENTER 12902 MAGNOLIA DR TAMPA, FL 33612			TO COMBAT CANCER	17,000
MONTESSORI NEW GATE SCHOOL 5237 ASHTON RD SARASOTA, FL 34233			TO PROMOTE EDUCATION	4,000
NEWMAN UNIVERSITY 3100 W CORMICK ST WICHITA, KS 67213			TO PROMOTE HIGHER EDUCATION	30,000
PRATT HEALTH FOUNDATION 203 S MAIN ST PRATT, KS 67124			TO PROVIDE COMFORT TO THE ILL	15,000
PRODIGAL DAUGHTERS JOURNEY HOME IN 711 57TH AVE BRADENTON, FL 34207			RECOVERY HOME FROM ADDICTION	5,000
REMNANT CAFE 2080 20TH ST SARASOTA, FL 34234			SERVING THE UNDERSERVED OF SARASOTA	3,500
SARASOTA MEDICAL PREGNANCY CENTER 1762 HAWTHORNE ST STE 5 SARASOTA, FL 34239			SERVING PREGNANT WOMEN	25,000
SHRINERS HOSPITAL FOR CHILDREN 2900 ROCKY POINT DR TAMPA, FL 33607			CHILDREN MEDICAL ASSISTANCE	4,000
TEAM TONY FOUNDATION 3850 S OSPREY AVE SARASOTA, FL 34239			ONE-TO-ONE CANCER SUPPORT & RESOURCE	5,000
THE HOPE CENTER 2001 W PLANO PARKWAY PLANO, TX 75075			TO ASSIST PEOPLE	10,000
THE ROY & ELSIE BLYTHE FOUNDATION 118 E 3RD ST PRATT, KS 67124			PROMOTE PHYSICAL, MENTAL WELL-BEING	10,000
UNIVERSITY OF NORTHERN COLORADO CAMPUS BOX 20 GREELEY, CO 80639			TO PROMOTE HIGHER EDUCATION	10,000
VERNON FILLEY ART MUSEUM 421 S JACKSON ST PRATT, KS 67124			ART PRESERVATION AND EDUCATION	2,500
<b>Total . . . . . ▶ 3a</b>				294,000



**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)				
<b>a</b> <i>Paid during the year</i>				
WELD FOOD BANK 1108 H ST GREELEY,CO 80631			TO FEED THE HUNGRY	4,000
WOMEN 2 WOMEN PO BOX 336962 GREELEY,CO 80631			TO HELP NEEDY WOMEN	4,000
WOMEN'S PLACE PO BOX 71 GREELEY,CO 80632			TO HELP NEEDY WOMEN	4,000
WRIGHT STATE UNIVERSITY 3640 COLONEL GLENN HWY DAYTON,OH 45435			TO PROMOTE HIGHER EDUCATION	14,000
<b>Total . . . . .</b> ▶ <b>3a</b>				294,000

**Form 990PF Part XVI-A Line 11 - Other revenue:**

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		<b>(e)</b> Related or exempt function income (See the instructions )
<b>11</b> Other revenue	<b>(a)</b> Business code	<b>(b)</b> Amount	<b>(c)</b> Exclusion code	<b>(d)</b> Amount	
<b>a</b> ETP	211110	-3,125			
<b>b</b> ETP	211110	-110	16		
<b>c</b> ETP	211110	-2			
<b>d</b> ETP	211110	-176			
<b>e</b> ETP	211110	-4			
<b>f</b> ETP	211110	-182			
<b>g</b> ETP	211110	2	15		
<b>h</b> ETP	211110	-10			

**TY 2015 Accounting Fees Schedule****Name:** PAUL S BOMBERGER JR FOUNDATION INC**EIN:** 20-5349740

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	1,600	1,400		200

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:** PAUL S BOMBERGER JR FOUNDATION INC

**EIN:** 20-5349740

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
JANNEY - VARIOUS	2010-06	PURCHASE	2016-07		1,071,479	1,061,691			9,788	
JANNY-VARIOUS	2016-01	PURCHASE	2016-07		47,950	48,135			-185	

## TY 2015 Investments - Other Schedule

**Name:** PAUL S BOMBERGER JR FOUNDATION INC

**EIN:** 20-5349740

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SECURITIES - VARIOUS	AT COST	2,841,236	3,436,732

**TY 2015 Loans from Officers Schedule****Name:** PAUL S BOMBERGER JR FOUNDATION INC**EIN:** 20-5349740

<b>Item No.</b>	1
<b>Lender's Name</b>	OFFICER LOANS
<b>Lender's Title</b>	
<b>Original Amount of Loan</b>	4643378
<b>Balance Due</b>	4643378
<b>Date of Note</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security Provided by Borrower</b>	
<b>Purpose of Loan</b>	
<b>Description of Lender Consideration</b>	
<b>Consideration FMV</b>	

**TY 2015 Other Expenses Schedule****Name:** PAUL S BOMBERGER JR FOUNDATION INC**EIN:** 20-5349740

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK CHARGES	102			102
POSTAGE	48			48
SUPPLIES	389			389
SUBSCRIPTIONS	61			61
BROKERAGE FEES	33,657	33,657	33,657	
COMPUTER	1,179			1,179

**TY 2015 Other Income Schedule****Name:** PAUL S BOMBERGER JR FOUNDATION INC**EIN:** 20-5349740

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ETP	-3,125		-3,125
ETP	-110		-110
ETP	-2		-2
ETP	-176		-176
ETP	-4		-4
ETP	-182		-182
ETP	2		2
ETP	-10		-10



**TY 2015 Other Notes/Loans Receivable Short Schedule****Name:** PAUL S BOMBERGER JR FOUNDATION INC**EIN:** 20-5349740

Name of 501(c)(3) Organization	Balance Due
OTHER NOTES AND LOAN RECEIVABLES	1,473,604

**TY 2015 Taxes Schedule****Name:** PAUL S BOMBERGER JR FOUNDATION INC**EIN:** 20-5349740

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FEDERAL INCOME TAXES	3,814	3,814		

**TY 2015 GeneralDependencySmall****Name:** PAUL S BOMBERGER JR FOUNDATION INC**EIN:** 20-5349740**Business Name or Person Name:****Taxpayer Identification Number:****Form, Line or Instruction****Reference:****Regulations Reference:****Description:** WAIVE NOL CARRYBACK**Attachment Information:** YEAR ENDING: JULY 31, 2016 20-5349740 PAUL S BOMBERGER JR FOUNDATION INC 6003 S HONORE AVE, STE 101 SARASOTA, FL 34238 NOL CARRYBACK ELECTION UNDER IRC SECTION 172(B)(3), THE TAXPAYER ELECTS TO RELINQUISH THE ENTIRE CARRYBACK PERIOD WITH RESPECT TO ANY REGULAR TAX AND AMT NET OPERATING LOSS INCURRED DURING THE CURRENT TAX YEAR.