Form **990-PF** 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.
 ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052

For calendar year 2015 or tax year beginning 2015 SEP 1, , and ending AUG 31, 2016 Name of foundation A Employer identification number ANDERSON VALLEY FOUNDATION 36-3988367 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number 747 N BURLINGTON SUITE 212 (402)463-3191City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 68902-0609 HASTINGS, NE 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 computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation 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 I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 46,436,265. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 43,161,522 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 160,157. STATEMENT 160,157. 160,571. 160,571. STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) <198,998.> 68 Net gain or (loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a 5,120,517. 0 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income S 43,283,252 Total. Add lines 1 through 11 320 , 728৯ В 0. Compensation of officers, directors, trustees, etc Other employee salaries and wages SOME TONETHE T 15 Pension plans, employee benefits 16a Legal fees STMT 3 1,500. 1,500 **b** Accounting fees 0. c Other professional fees 17 Interest STMT 4 4,644 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 5 99,185. 99,185. $\overline{\mathfrak{o}}$. 23 Other expenses 24 Total operating and administrative 100,685 105,329 О. expenses. Add lines 13 through 23 142,555. 142,555. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 247,884 100,685 142,555. Add lines 24 and 25 27 Subtract line 26 from line 12: 43,035,368 8 Excess of revenue over expenses and disbursements 220,043 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

| Part II Balance Sheets Attached schedules and amounts in the description | | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End o | End of year | | | |
|--|----------|---|-------------------|----------------|-----------------------|--|--|--|
| Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | | | (a) Book Value | (b) Book Value | (c) Fair Market Value | | | |
| | 1 | Cash - non-interest-bearing | 6,586. | 665,625. | 665,625. | | | |
| | 2 | Savings and temporary cash investments | 1,537,675. | 1,870,211. | 1,870,211. | | | |
| | 3 | Accounts receivable | | | _ | | | |
| | | Less: allowance for doubtful accounts | | | | | | |
| | 4 | Pledges receivable ▶ | | | | | | |
| | | Less; allowance for doubtful accounts | | | | | | |
| | 5 | Grants receivable | | | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | | | |
| | | disqualified persons | | | | | | |
| | 7 | Other notes and loans receivable \(\bigs_1,650,000. \) | . مسیده جدید | ا بور د دور ا | | | | |
| | | Less: allowance for doubtful accounts ▶ 0 . | 0. | 1,650,000. | 1,650,000. | | | |
| sts | 8 | Inventories for sale or use | | | | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | | | | |
| ٩ | | Investments - U.S. and state government obligations STMT 6 | 0. | | 9,552,914. | | | |
| | | Investments - corporate stock STMT 7 | 0. | 9,140,081. | | | | |
| | C | Investments - corporate bonds STMT 8 | 0. | 10,931,841. | 11,402,652. | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | | | | |
| | ļ | Less accumulated depreciation | | | | | | |
| | | Investments - mortgage loans | | 11 247 465 | 11 466 700 | | | |
| | 13 | Investments - other STMT 9 | 0. | 11,344,465. | 11,466,708. | | | |
| | 14 | Land, buildings, and equipment basis | | | | | | |
| | l | Less accumulated depreciation | 117 500 | 02 500 | 02 522 | | | |
| | | Other assets (describe STATEMENT 10) | 117,508. | 23,522. | 23,522. | | | |
| | 16 | Total assets (to be completed by all filers - see the | 1 661 760 | 44 607 137 | 16 126 265 | | | |
| _ | 17 | Instructions. Also, see page 1, item I) | 1,661,769. | 44,697,137. | 46,436,265. | | | |
| | 17 | Accounts payable and accrued expenses | | | | | | |
| | 18 | Grants payable | | | | | | |
| Liabilities | 19 20 | Deferred revenue | | | | | | |
| Ē | 21 | Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable | | | | | | |
| Ë | 22 | · · | | | | | | |
| | |) | | ···· | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | | | | |
| _ | | Foundations that follow SFAS 117, check here | | | | | | |
| | ŀ | and complete lines 24 through 26 and lines 30 and 31. | | | | | | |
| Ses | 24 | Unrestricted | | | | | | |
| auc | 25 | Temporarily restricted | | | | | | |
| or Fund Balance | 26 | Permanently restricted | | | | | | |
| ш | ļ | Foundations that do not follow SFAS 117, check here | | | | | | |
| Ę | | and complete lines 27 through 31. | | | | | | |
| | 27 | Capital stock, trust principal, or current funds | _0. | 43,161,422. | | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | | | | |
| As | 29 | Retained earnings, accumulated income, endowment, or other funds | 1,661,769. | 1,535,715. | | | | |
| Net | 30 | Total net assets or fund balances | 1,661,769. | 44,697,137. | | | | |
| | | | | | | | | |
| | 31 | Total liabilities and net assets/fund balances | 1,661,769. | 44,697,137. | | | | |
| P | art | III Analysis of Changes in Net Assets or Fund B | alances | | | | | |
| 1 | Total | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | | | | |
| | | st agree with end-of-year figure reported on prior year's return) | | 1 1 | 1,661,769. | | | |
| | • | amount from Part I, line 27a | | 2 | 43,035,368. | | | |
| 3 | Othe | r increases not included in line 2 (itemize) | | 3 | 0. | | | |
| 4 | Add | lines 1, 2, and 3 | | 4 | 44,697,137. | | | |
| 5 | Decr | eases not included in line 2 (itemize) | | 5 | 0. | | | |
| c | Total | not appets or fund halaness at and of year (line 4 minus line 5). Bort II, as | lumn (h) line 20 | | 11 697 137 | | | |

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| Part IV Capital Gains | and Lo | sses for Tax on Ir | nvestmen | t Income | | | | | | |
|---|----------------------------|---|-----------------|--------------------------------------|----------------|------------|-----------------------------------|------------------------------|--|--|
| | | | | Ϊ́Ρ | | | (c) Date acquired (mo., day, yr.) | | (d) Date sold (mo., day, yr.) | |
| 1a PUBLICLY TRADED SECURITIES | | | | | | | | | | |
| b | | | | | | | | | | |
| <u>c</u> | | | | | | | | | | |
| <u>d</u> | | | | | | | | | | |
| <u>e</u> | <i>(</i> 0.5 | | 1 | | Щ | | | | | |
| (e) Gross sales price | (1) [| Depreciation allowed (or allowable) | plus e | st or other basis expense of sale | | | | (h) Gain (e) plus (f) | or (loss) minus (| g) |
| a 5,120,517. | | | | 5,319,51 | 5. | | | | | <198,998. |
| b | | | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| C d | | | | | -+ | | | | | |
| d | | · | | | \dashv | | | | | |
| Complete only for assets showing | na asin in (| column (h) and owned by | the foundation | on 12/31/60 | - | | (1) (| Pausa (Oal | /h) | |
| complete only for assets shown | | i) Adjusted basis | | | | | | Gains (Col. k), but not | | |
| (i) F.M.V. as of 12/31/69 | , | as of 12/31/69 | | cess of col. (ı) col. (ı), ıf any | | | | Losses (fro | | |
| a | | | **** | (1), | | | | | | <198,998. |
| b | | | | | \rightarrow | | | | | C130,330. |
| C | | | <u> </u> | | - | | | | | |
| | | <u></u> | | | -+ | | | | | : |
| е | | | <u> </u> | | \dashv | | | | | |
| | | C 16l | Danid dani | | \ \ | | | | | |
| 2 Capital gain net income or (net ca | outal loss) | If gain, also enter If (loss), enter -0- | In Part I, line | <i>(</i> 7 | ١١ | 2 | | | | <198,998. |
| , | . , | • | | • | ᄼᅡ | \dashv | | | | 1230/3301 |
| 3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, | | | ia (6): | | ٦١ | | | | | |
| If (loss), enter -0- in Part I, line 8 | coluiiii (c | <i>)-</i> | | | M | 3 | | | N/A | |
| Part V Qualification U | nder S | ection 4940(e) for | Reduced | Tax on Net | Inv | estm | ent Inco | me | | |
| If section 4940(d)(2) applies, leave the Was the foundation liable for the section If "Yes," the foundation does not qual | tion 4942 t ify under s | iax on the distributable am section 4940(e). Do not co | mplete this pa | rt | | | | | | Yes X No |
| 1 Enter the appropriate amount in (| each colun | nn for each year; see the in | istructions bef | ore making any er | ntries. | | | | | |
| (a) Base period years Calendar year (or tax year beginnii | ng in) | (b) Adjusted qualifying dist | tributions | Net value of nor | (c) nchar | ıtable-u | ise assets | (col | Dıstrıbı I. (b) dıvı | (d) ution ratio ded by col. (c)) |
| 2014 | | | 1,000. | | 1 | ,040 | ,149. | | | .000961 |
| 2013 | | | 6,500. | | | | 758. | | | .458749 |
| 2012 | | | 8,500. | | | | 3,949. | | | .039729 |
| 2011 | | | 5,000. | | | | 5,906. | . 20600 | | |
| 2010 | | <u> </u> | 2,500. | | | 277 | 7,783. | | | .009000 |
| 2 Total of line 1, column (d) | | | | | | | | 2 | | .714504 |
| 3 Average distribution ratio for the | 5-year bas | e period - divide the total o | on line 2 by 5, | or by the number (| of yea | ars | | | | |
| the foundation has been in exister | | | | | • | | | 3 | | .142901 |
| 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 | | | | 4 | 4(| 0,854,568. | | | | |
| Multiply line 4 by line 3 | | | | 5 | į | 5,838,159. | | | | |
| 6 Enter 1% of net investment incom | ne (1% of F | Part I, line 27b) | | | | | | 6 | | 2,200. |
| 7 Add lines 5 and 6 | | | | | | | | 7 | | 5,840,359. |
| B Enter qualifying distributions from | ı Part XII, I | ıne 4 | | | | | | 8 | - | 142,555. |
| If line 8 is equal to or greater than See the Part VI instructions. | | | 1b, and comp | ete that part using |) a 1% | 6 tax ra | te. | · - _ | | · · · · · · · · · · · · · · · · · · · |

| Form 990-PF (2015) ANDERSON VALLEY FOUNDATION Part VI Excise Tax Based on Investment Income (Section 494) | 10(a), 4940(b), 4940(e), or | 36-3988 4948 - see | | ictio | Page 4 |
|--|---|------------------------------|----------------|-------------------------|-------------------------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here and e | | | | | |
| Date of ruling or determination letter: (attach copy of letter if ne | | | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | | 1 1 | | 4,4 | 01. |
| of Part I, line 27b | | | | | |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49 | % of Part I, line 12, col. (b). | } | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C | | 2 | | - | Ó. |
| 3 Add lines 1 and 2 | · | 3 | | 4,4 | $\overline{01.}$ |
| 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- | , | 5 | | 4,4 | 01. |
| 6 Credits/Payments: | | | | | |
| a 2015 estimated tax payments and 2014 overpayment credited to 2015 | 6a | | | | |
| b Exempt foreign organizations - tax withheld at source | 6b | 7 | | | |
| c Tax paid with application for extension of time to file (Form 8868) | 6c | 7 | | | |
| d Backup withholding erroneously withheld | 6d | ፞ | | | |
| 7 Total credits and payments. Add lines 6a through 6d | | 7 | | - | 0. |
| 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta | ached | 8 | | 1 | 28. |
| 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | • | 9 | | 4,5 | <u> 29.</u> |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | • | 10 | | | |
| 11 Enter the amount of line 10 to be; Credited to 2016 estimated tax | Refunded | 11 | | | |
| Part VII-A Statements Regarding Activities | | <u> </u> | | | |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legi- | slation or did it participate or interver | ie in | | Yes | No |
| any political campaign? | | | 1a | | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo | oses (see instructions for the definition | n)? | 1b | | X |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities ai | • | • | | | |
| distributed by the foundation in connection with the activities. | , , , | | | | |
| c Did the foundation file Form 1120-POL for this year? | | | 1c | - | $\overline{\mathbf{x}}$ |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th | e vear: | | | | |
| (1) On the foundation. > \$ 0 . (2) On foundation manager | | • | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expend | · · ——— | _ | | | |
| managers. ► \$ 0. | • | | | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the | IRS? | | 2 | | Х |
| If "Yes," attach a detailed description of the activities. | | | | _ | |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing | instrument, articles of incorporation. | or | | | |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change | · · · · · · · · · · · · · · · · · · · | | 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? | | N/A | 4b | | |
| 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 e | either: | | | | |
| By language in the governing instrument, or | | | | | |
| By state legislation that effectively amends the governing instrument so that no mandator | ry directions that conflict with the sta | te law | | | |
| remain in the governing instrument? | | | 6 | X | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con | mplete Part II. col. (c). and Part X | ν | 7 | $\overline{\mathbf{x}}$ | |
| | , | | | | |
| $oldsymbol{8a}$ Enter the states to which the foundation reports or with which it is registered (see instruction $oldsymbol{NE}$ | ons) ► | | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A | Attorney General (or designate) | | | | , |
| of each state as required by General Instruction G? If "No," attach explanation | . • , | | 8b | X | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of se | ection 4942(j)(3) or 4942(j)(5) for ca | lendar | | | |
| year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," of | | | 9 | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sched | | | 10 | | X |
| | | Fo | rm 99 0 |)-PF | (2015) |

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| Pa | rt VII-A Statements Regarding Activities (continued) | | | | |
|----|---|----------------|----------|-------------|--|
| | | | Yes | No | |
| 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 | | X | |
| 12 | 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 | X | | |
| | Website address ► N/A | | | | |
| 14 | The books are in care of ► SUSAN M. MORRISON ROBERTS Telephone no. ► 402-46 | | | | |
| | Located at ► 737 N BURLINGTON AVE SUITE 212, HASTINGS, NE ZIP+4 ►68 | 902 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | . , _▶ | · | |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A_ | | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No | |
| | securities, or other financial account in a foreign country? | 16 | <u> </u> | X | |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | | |
| D. | foreign country The VII-B Statements Regarding Activities for Which Form 4720 May Be Required | Щ. | _ | <u> </u> | |
| | | | Yes | No | |
| 1, | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly): | | res | NO | |
| 16 | (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) | Į. | ļ | ļ | |
| | a disqualified person? | İ | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | ļ | | | |
| | (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)? | | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | l | l | | |
| | 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.) | | | | |
| t | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | l | | ļ | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A | _1b | | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | | |
| C | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | | |
| | before the first day of the tax year beginning in 2015? | 10 | | X | |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | | | |
| | defined in section 4942(j)(3) or 4942(j)(5)): | | ļ | ļ | |
| ē | 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 | 1 | <u> </u> | | |
| | 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.) N/A | - ah | ŀ | | |
| | statement - see instructions.) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | 2b | | | |
| | | | | | |
| 9. | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | | |
| 00 | during the year? | 1 | <u> </u> | ļ | |
| h | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after | | 1 | | |
| • | 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, | 1 | | | |
| | Form 4720, to determine if the foundation had excess business holdings in 2015) N/A | 3ь | | | |
| 48 | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X | |
| | 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 | |
| | | rm 99 0 |)-PF | (2015) | |

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

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Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 38,803,863. a Average monthly fair market value of securities 1a 1,047,164. 1b b Average of monthly cash balances 1,625,692. c Fair market value of all other assets 1c 41,476,719. 1**d** d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 622,151. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 40,854,568. 5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 2,042,728. Minimum investment return. Enter 5% of line 5 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.) 2,042,728. Minimum investment return from Part X, line 6 4,401 2a 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.) 2b 4,401 c Add lines 2a and 2b 2с 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 5 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 2,038,327. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 142,555. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 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 Amounts set aside for specific charitable projects that satisfy the: За a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule) 3ь 142,555. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 income. Enter 1% of Part I, line 27b 142,555. 6 Adjusted qualifying distributions. Subtract line 5 from line 4 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.

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| Part XIII | Undistributed | Income | (see instructions) |
|-----------|---------------|--------|--------------------|
|-----------|---------------|--------|--------------------|

| | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
|---|---------------|----------------------------|-------------|---------------------------|
| 1 Distributable amount for 2015 from Port VI | | Tears prior to 2014 | 2014 | 2010 |
| 1 Distributable amount for 2015 from Part XI, | | | | 2,038,327. |
| line 7 | | | | 2,030,327. |
| 2 Undistributed income, if any, as of the end of 2015 | | | 0. | |
| a Enter amount for 2014 only | | | | |
| b Total for prior years: | | 0 | | • |
| ,,,, | | 0. | <u> </u> | |
| 3 Excess distributions carryover, if any, to 2015: | | | | |
| a From 2010 | | | | |
| b From 2011 | | | | |
| c From 2012 | | | | |
| dFrom 2013 58,810. | | | | |
| e From 2014 | | | | |
| f Total of lines 3a through e | 58,810. | | | |
| 4 Qualifying distributions for 2015 from | | | | |
| Part XII, line 4: ►\$ 142,555. | , | | | |
| a Applied to 2014, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | ļ | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2015 distributable amount | | | | 142,555. |
| • • | 0. | | | 142,333. |
| e Remaining amount distributed out of corpus | 58,810. | | | 58,810. |
| 5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a)) | 36,610. | | | 38,810. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | | | |
| b Prior years' undistributed income. Subtract | <u> </u> | | | |
| line 4b from line 2b | | 0. | | |
| | | | | |
| 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 | | 0. | | |
| assessed d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| • | | | | |
| e Undistributed income for 2014. Subtract line | ļ | | 0. | |
| 4a from line 2a. Taxable amount - see instr. | | | | |
| f Undistributed income for 2015. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | 1 026 062 |
| be distributed in 2016 | | | | 1,836,962. |
| 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. | | | |
| 8 Excess distributions carryover from 2010 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2016. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2011 | | | | |
| b Excess from 2012 |] | | | |
| c Excess from 2013 |] | | | |
| dExcess from 2014 | 1 | | | |
| e Excess from 2015 | 1 | | | |
| 523581 11-24-15 | | | | Form 990-PF (2015) |
| | | _ | | |

523581 11-24-15

| | N VALLEY FO | | | | 88367 Page 10 | |
|---|---|-----------------------------|---------------------------|---|---------------|--|
| Part XIV Private Operating F | | | I-A, question 9) | N/A | | |
| 1 a If the foundation has received a ruling o | r determination letter tha | t it is a private operating | | | | |
| foundation, and the ruling is effective fo | r 2015, enter the date of | the ruling | ▶ | | | |
| b Check box to indicate whether the found | dation is a private operatii | ng foundation described | | 4942(j)(3) or 49 |)42(1)(5) | |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | | |
| income from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total | |
| investment return from Part X for | | | | | | |
| each year listed | | | | | | |
| b 85% of line 2a | | | | | | |
| c Qualifying distributions from Part XII, | | | | | | |
| line 4 for each year listed | | | | | | |
| d Amounts included in line 2c not | | | | | | |
| used directly for active conduct of | | | | | | |
| exempt activities | | | | | | |
| e Qualifying distributions made directly | | | | | | |
| for active conduct of exempt activities. | | 1 | | } | İ | |
| Subtract line 2d from line 2c 3 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets | | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | ļ | | | | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | | |
| c "Support" alternative test - enter: | | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) | | | | | | |
| (3) Largest amount of support from | | | | | | |
| an exempt organization | | | | | | |
| (4) Gross investment income | | | | | | |
| Part XV Supplementary Info | | | if the foundation | n had \$5,000 or m | ore in assets | |
| at any time during t | he year-see inst | ructions.) | | | | |
| Information Regarding Foundation List any managers of the foundation wh year (but only if they have contributed in SUSAN M. MORRISON RO | o have contributed more nore than \$5,000). (See s | | iributions received by th | e foundation before the clo | se of any tax | |
| b List any managers of the foundation wh | | | (or an equally large port | ion of the ownership of a p | artnership or | |
| other entity) of which the foundation has | s a 10% or greater intere | st | | | | |
| NONE | | | | | | |
| 2 Information Regarding Contribute Check here ☐ if the foundation of the foundation makes gifts, grants, etc. | nly makes contributions | to preselected charitable | organizations and does | not accept unsolicited requ complete items 2a, b, c, and | | |
| a The name, address, and telephone num | ber or e-mail address of t | the person to whom appl | cations should be addre | essed: | | |
| SEE STATEMENT 11 | | | | | | |
| b The form in which applications should b | e submitted and informa | tion and materials they s | hould include: | | | |
| c Any submission deadlines: | | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographic | al areas, charitable fields | kınds of institutions, or | other factors: | | |
| | | | | | | |

| 3 Grants and Contributions Paid During the | | Payment | | |
|---|---|----------------------|----------------------------------|---------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| 70.71.100 A.T | | L | | |
| UNIVERSITY OF DENVER 2190 E ASBURY AVENUE | NONE | PUBLIC | SPECIAL PROJECT FUNDING | |
| DENVER, CO 80208 | | | FORDING | 36,355 |
| NATIONAL CENTER FOR FAMILY | NONE | PUBLIC | OPERATING BUDGET | |
| PHILANTHROPY | | | ASSISTANCE | |
| 1667 K STREET, NW, SUITE 550 | | | | |
| WASHINGTON, DC 20006 | | | | 1,000 |
| | | | | |
| FRIENDS OF ANIMAL CARE & CONTROL 16 W CAMELBACK ROAD | NONE | PUBLIC | OPERATING BUDGET ASSISTANCE | |
| PHOENIX, AZ 85013 | | | ASSISTANCE | 100,000 |
| | | | | |
| AREA AGENCY ON AGING | NONE | PUBLIC | SPECIAL PROJECT | |
| 1366 E THOMAS ROAD, SUITE 108 | | | FUNDING | |
| PHOENIX, AZ 85014 | | | | 5,200 |
| | | | | |
| | | | | |
| Total | | | ▶ 3a | 142,555 |
| b Approved for future payment | | | | |
| NONE | | | 1 | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | <u> </u> | |
| | | | | |
| | | | | |
| Total | | | ▶ 3b | |

Part XVI-A. Analysis of Income-Producing Activities

Form 990-PF (2015)

| Enter gross amounts unless otherwise indicated. | Unrelate | Unrelated business income | | ded by section 512, 513, or 514 | (e) |
|---|-----------------|---------------------------|---------------|---------------------------------|-------------------|
| <u>-</u> | (a) Business | (b) | (C) Exclu- | (d) | Related or exempt |
| 1 Program service revenue: | Business | Amount | sion | Amount | function income |
| a | 1 | | +-+ | | |
| b | _ | | _ | | |
| C | | | | | |
| d | _ | | | | |
| e | _ | | | | |
| f | | | | - | |
| g Fees and contracts from government agencies | · | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | _ | | - |
| investments | | | 14 | 160,157. | |
| 4 Dividends and interest from securities | | | 14 | 160,571. | |
| 5 Net rental income or (loss) from real estate: | | • | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | T T | | | | - |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | <198,998. | • |
| 9 Net income or (loss) from special events | · · · · · · | | | 1 | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| C | | | | | *** |
| d | _ | •• | | | |
| e | _ | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0 | | 121,730. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 121,73 |
| (See worksheet in line 13 instructions to verify calculations.) | 1 | | | | • |

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

| 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). | | | | | | |
|---------|---|--|--|--|--|--|--|
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Form **990-PF** (2015)

| orm 990 | | | SON VALLE | | | | | <u> </u> | | ge 13 |
|---|----------------|-----------------------------------|--------------------------|---------------------|-----------------------------------|-------------------------|-----------------------------|--------------------------|--|---------------|
| Part > | (VII | Information Re | garding Trar | sfers To a | nd Transactions a | and Relations | hips With Non | charitable | > | |
| | | ` Exempt Organi | | | | | | | | |
| 1 Did | the org | anization directly or indir | rectly engage in any | of the following | g with any other organization | on described in sect | ion 501(c) of | | Yes | No |
| | | - | | | 7, relating to political orgar | | | | | |
| | | rom the reporting founda | | | | | | | | |
| | Cash | rom are reporting rounds | taon to a nononana | abio oxompt org | jamzation of | | | 1a(1) | - | X |
| ٠, | Other | nnanta | | | | | | 1a(2) | \vdash | X |
| | | | | | | | | 14(2) | \vdash | |
| b Other transactions: | | | | | | | | | | х |
| • • | | of assets to a noncharital | | | | | | 1b(1) | \vdash | $\frac{x}{x}$ |
| | | ases of assets from a nor | • | organization | | | | 1b(2) | | |
| | | of facilities, equipment, of | | | | | | 1b(3) | | X |
| (4) | Reimb | ursement arrangements | | | | | | 1b(4) | \vdash | X |
| (5) | Loans | or loan guarantees | | | | | | 1b(5) | $ldsymbol{ldsymbol{ldsymbol{\sqcup}}}$ | X |
| (6) | Perfor | mance of services or me | mbership or fundra | ising solicitatio | ns | | | 1b(6) | | X |
| c Sha | iring of | facilities, equipment, mai | ılıng lısts, other ass | ets, or paid emi | ployees | | | 1c | | X |
| d If th | ne answ | er to any of the above is | "Yes," complete the | following sche | dule. Column (b) should al | ways show the fair r | narket value of the go | oods, other ass | ets, | |
| or s | services | given by the reporting fo | oundation. If the for | indation receive | ed less than fair market val | ue in any transactior | or sharing arrangen | nent, show in | | |
| | |) the value of the goods, (| | | | | | | | |
| (a)Line n | | (b) Amount involved | | | exempt organization | (d) Description | n of transfers, transaction | ns, and sharing ar | rangeme | nts |
| - | + | ` , | - ` ` | N/A | · · | | | | | |
| | + | | | | | | | | | |
| | + | | | | | | | | | |
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| | + | | | | <u> </u> | | | | | |
| On lot | bo four | dation directly or indirect | the offiliated with or | related to one | or more tax-exempt organ | uzatione described | | | | |
| | | | - | | | izations described | | Yes | Y | No |
| | | 501(c) of the Code (other | • | (3)) or in sect | 1011 527 7 | | | 162 | | טאו ב |
| b If "\ | res," co | mplete the following sche | | | (h) Tuno of organization | | (a) Department of rol | lationahin | | |
| | | (a) Name of org | anization | | (b) Type of organization | | (c) Description of rel | ationship | | |
| | | N/A | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | g accompanying schedules and | | | May the IRS | discuss | this |
| Sign | and be | lier at is true, correct, and con | npiete, Declaration of p | reparer (other thai | n taxpayer) is based on all infor | mation of which prepare | r has any knowledge | return with the | e prepar (see ins | er tr)? |
| Here | | HUCKELLOW | *D | | 1/-7~/+ | PRESI | DENT | X Yes | | □ĺΝο |
| | Sign | ature of officer or trustee | | | Date | Title | | | | |
| | ٺ ٺ | Print/Type preparer's na | | Preparer's si | | Date | Check If | PTIN | | |
| | | Albert Bereiter A 116 | | ب | 011 | 1 - 1 | self- employed | | | |
| Paid | | LOREN J. Y | OTING | don | - Viole V | 12/30/16 | | P00005 | 242 | |
| Prepa | arer | Firm's name ► KCO | | LLP | ~~//- | | Firm's EIN ▶ 48 | $\frac{100003}{8-05677}$ | | |
| Use (| | riiiis name - KCO | E TOOM, I | TIL | | | I IIIII S LIN P 40 | 5 05011 | . . | |
| USE (| JIIIY | Eirm's address > 20 | 30 00Dmr. | A ATD | O DOV 1100 | | - | | | |
| Firm's address ► 3030 CORTLAND, P.O. BOX 1100 | | | | | | | | | | |

523622 11-24-15

Form **990-PF** (2015)

Phone no. (785)825-1561

SALINA, KS 67402-1100

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization

Employer identification number

| <i>P</i> | ANDERSON VALLEY FOUNDATION | 36-3988367 | | | | | |
|---|--|--|--|--|--|--|--|
| Organization type (check | cone): | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | |
| | 527 political organization | | | | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | |
| _ | n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special | l Rule. See instructions. | | | | | |
| General Rule | | | | | | | |
| | ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tota ny one contributor. Complete Parts I and II. See instructions for determining a contribu | | | | | | |
| Special Rules | | | | | | | |
| sections 509(a)(1 any one contribu | ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supply and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 stor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the arr EZ, line 1 Complete Parts I and II | 6a, or 16b, and that received from | | | | | |
| year, total contrit | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. | | | | | | |
| year, contributior is checked, enter purpose Do not | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled refer the total contributions that were received during the year for an exclusively religions complete any of the parts unless the General Rule applies to this organization because ble, etc., contributions totaling \$5,000 or more during the year | d more than \$1,000. If this box ous, charitable, etc , | | | | | |
| but it must answer "No" o | that is not covered by the General Rule and/or the Special Rules does not file Schedum Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on it et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). | • | | | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Employer identification number

| A ATD TID COAT | 373 T T 1337 | EATER SET AND |
|----------------|--------------|---------------|
| ANDERSON | VALLEY | FOUNDATION |

36-3988367

| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional | l space is needed. | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | KENNETH MORRISON TR#1-SUSAN ROBERTS SH P.O. BOX 609 HASTINGS, NE 68901 | \$ 43,161,522. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Occash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Employer identification number

ANDERSON VALLEY FOUNDATION

36-3988367

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|------------------------------|--|--|--------------------------|
| Parti | STOCK | | |
| _1 | | | |
| | | \$ 106,860. | 09/30/15 |
| (a) No. | (b) | (c) FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (see instructions) | Date received |
| | NOTE RECEIVABLE | | |
| 1 | | | |
| | | \$ 2,250,000. | 10/01/15 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| · aiti | STOCK | | |
| 1 | | | |
| | | \$ <u>2,205,002</u> . | 10/06/15 |
| (a) | | (c) | |
| No. from | (b) Description of noncash property given | FMV (or estimate) | (d) Date received |
| Part I | Description of noncash property given | (see instructions) | Date received |
| | STOCK | | |
| | | | |
| | | \$ 36,000. | 03/17/16 |
| (a) | | , , | |
| No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| | | \$ | |
| (a) | | (c) | |
| No. from | (b) | FMV (or estimate) | (d) |
| Part I | Description of noncash property given | (see instructions) | Date received |
| | | | |
| | | | |
| 3453 10-26 | | \$ Sehedula B (Form 0 | 90, 990-EZ, or 990-PF) (|

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization Employer identification number 36-3988367 ANDERSON VALLEY FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

| FORM 990-PF INTEREST | ON SAVIN | GS AND TEM | PORARY | CASH IN | IVESTMENTS | STATEMENT 1 | |
|------------------------|-----------------|-------------------------------|-----------------------------|--------------------------|-------------------------------|-------------------------------|--|
| SOURCE | | REVE | (A) REVENUE PER BOOKS | | (B) IVESTMENT ICOME | (C) ADJUSTED NET INCOME | |
| CASH INVESTMENT FUND | | 160 | 160,157. | | 160,157. | | |
| TOTAL TO PART I, LINE | 3 | 160 | 0,157. | | 160,157. | | |
| FORM 990-PF I | DIVIDENDS | AND INTER | EST FRO | OM SECUR | RITIES | STATEMENT 2 | |
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | | (A) EVENUE R BOOKS | (B) NET INVES MENT INCO | | |
| DIVIDEND INCOME | 160,571. | (| 0. | 160,571. | 160,57 | 71. | |
| TO PART I, LINE 4 | 160,571. | | 0 | 160,571. | 160,57 | <u>'1.</u> | |
| FORM 990-PF | | ACCOUNTI | NG FEE | S | | STATEMENT 3 | |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | NET I | B) NVEST- INCOME | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | | 1,500. | | 1,500. | | 0. | |
| TO FORM 990-PF, PG 1, | LN 16B | 1,500. | | 1,500. | | 0. | |
| FORM 990-PF | | TAXI | ES | | | STATEMENT 4 | |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | NET I | 3) NVEST- INCOME | (C) ADJUSTED NET INCOM | | |
| FOREIGN TAX WITHOLDING | | 4,644. | | 0. | | 0. | |
| TO FORM 990-PF, PG 1, | LN 18 | 4,644. | | 0. | | 0. | |
| | | | | | | | |

| FORM 990-PF | OTHER EXPENSES | | | | STATEMENT | 5 |
|---|------------------------------|-----------------------------------|---------------------|------------------------------|---------------------|----------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (C) ADJUSTED NET INCOM | | |
| BANK FEES BROKERAGE FEES MISCELLANEOUS | 98,659. 471. 55. | - | 659. 471. 55. | | | 0. 0. 0. |
| TO FORM 990-PF, PG 1, LN 23 | 99,185. | 99, | 185. | | | 0. |
| FORM 990-PF U.S. AND | STATE/CITY G | OVERNMENT | OBL | GATIONS | STATEMENT | 6 |
| DESCRIPTION | U.S GOV' | | вос | OK VALUE | FAIR MARKE VALUE | Т |
| U.S. GOVERNMENT BONDS | <u> </u> | | 9 | 0,071,392. | 9,552,9 | 14. |
| TOTAL U.S. GOVERNMENT OBLIGAT | | | 9 | 9,071,392. | 9,552,9 | 14. |
| TOTAL STATE AND MUNICIPAL GOV TOTAL TO FORM 990-PF, PART I | | IGATIONS | <u></u> | 9,071,392. | 9,552,9 | 14. |
| FORM 990-PF | CORPORAT | E STOCK | | | STATEMENT | 7 |
| DESCRIPTION | | | вос | OK VALUE | FAIR MARKE VALUE | т |
| CORPORATE STOCK | | | 9 | 9,140,081. | 9,804,6 | 33. |
| TOTAL TO FORM 990-PF, PART I | I, LINE 10B | | 9 | 9,140,081. | 9,804,6 | 33. |

| FORM 9.90-PF | CORPORATE BONDS | STATEMENT 8 | |
|--|-------------------------------|---------------------------|----------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| CORPORATE BONDS | | 10,931,841. | 11,402,652. |
| TOTAL TO FORM 990-PF, PART II, LI | INE 10C | 10,931,841. | 11,402,652. |
| FORM 990-PF OT | THER INVESTMENTS | | STATEMENT 9 |
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| OTHER INVESTMENTS | COST | 11,344,465. | 11,466,708. |
| TOTAL TO FORM 990-PF, PART II, L | INE 13 | 11,344,465. | 11,466,708. |
| FORM 990-PF | OTHER ASSETS | | STATEMENT 10 |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
| FEDERAL TAX RECEIVABLE STATE TAX RECEIVABLE | 94,086. 23,422. | 0. 23,522. | 23,522. |
| TO FORM 990-PF, PART II, LINE 15 | 117,508. | 23,522. | 23,522. |

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ANDERSON VALLEY FOUNDATION P.O. BOX 609 HASTINGS, NE 689020609

TELEPHONE NUMBER

(402)463-3191

FORM AND CONTENT OF APPLICATIONS

NO FORMAL REQUIREMENTS

ANY SUBMISSION DEADLINES

NO SUBMISSION DEADLINES

RESTRICTIONS AND LIMITATIONS ON AWARDS

ORGANIZATIONS APPLYING FOR GRANTS MUST BE 501(C)(3) ORGANIZATIONS. PREFERENCE GIVEN TO ORGANIZATIONS OPERATING IN ADAMS CNTY., NEBRASKA AND ORGANIZATIONS RECOMMENDED BY SUSAN M. MORRISON ROBERTS AND GRETCHEN ROBERTS.