Form 990-PF

## Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For	calend	dar year 2016 or tax year beginning , a	ana enaing				
	me of fou				A Emple	oyer identification number	
		THY HARMSEN AND BILL HARMSEN	SR			0010554	
		ITABLE FOUNDATION	·			-2210574	<del></del>
		d street (or P O box number if mail is not delivered to street address)  OX 40339	} '	Room/suite	1	hone number (see instructions 0 – 3 2 7 – 7 5 7 5	)
		, state or province, country, and ZIP or foreign postal code	<del></del>		J2.	0-321-1313	
	UCS		339		C If exer	nption application is pending,	check here
			rn of a former public	charity	D 1 Fo	reign organizations, check he	re ►
		Final return Amended	•		Į.	reign organizations meeting th	_
		Address change Name cha			1	% test, check here and attach	_
	The ele 4	type of organization X Section 501(c)(3) exempt private	- <del></del>				
			e private foundation		1 .	ate foundation status was term n 507(b)(1)(A), check here	inated under
		rket value of all assets at J Accounting method		crual	1	oundation is in a 60-month ter	munatuus.
		ear (from Part II, col (c),  Other (specify)		Cibai	}	section 507(b)(1)(B), check hi	. 1
	ne 16)		he on cash hasis )		ļ		
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	T	1		(d) Disbursements
,	411.	amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net	for charitable purposes
	<del></del> -	the amounts in column (a) (see instructions) )	books			11100/110	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)		<u> </u>			
	2	Check ► X if the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments	13,92	<del></del>	9,663	13,926	
	4	Dividends and interest from securities	167,36	5 1	67,365	167,365	
	5a	Gross rents					·
<u>o</u>	b	Net rental income or (loss)					
Š	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	11,75	9			
Revenue	þ	Gross sales price for all assets on line 6a 469,667	*************************	<u> </u>			
3 02	7	Capital gain net income (from Part IV, line 2)			9,999		
,	8	Net short-term capital gain		<u> </u>		1,086	<del></del>
•	9	Income modificators VEU	······································				
ָ	10a	Grosssales less returns and allowances		<u> </u>			
7	b	Less Cost of goods soid 2017		ļ			
)	C	Gross profit or (loss) (attach schedule)	5 05				
Ţ	11	Other income (attach-schedule) STMT 2	5,059 198,109		5,059	5,059	
	12	Total Add Ines altricolon DR	180,000		92,086 75,065	187,436	111,065
KS.	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages	100,000	<del>' </del> -	7 2 7 0 0 3		111,005
xpenses	15	Pension plans, employee benefits	9,95	7	5,974	<del></del>	3,983
ğ	16a	Legal fees (attach schedule)		<del>'</del>	3,3,1	<del></del>	
Щ	b	Accounting fees (attach schedule) STMT 3	6,130	<u></u>	3,065		3,065
Ş	c	Other professional fees (attach schedule)					
at	17	Interest		<b>T</b>			
Sti	18	Taxes (attach schedule) (see instructions) STMT 4	83	,	837		<del></del>
Ē	19	Depreciation (attach schedule) and depletion					
늉	20	Occupancy					
Ā	21	Travel, conferences, and meetings					
Ĕ	22	Printing and publications					
Operating and Administrative E	23	Other expenses (att sch.) STMT 5	174,61	L 1	67,693		6,918
Ë	24	Total operating and administrative expenses.	<del> </del>		-		
3ra	1	Add lines 13 through 23	371,53		52,634	0	125,031
ğ	25	Contributions, gifts, grants paid	300,000				300,000
	26	Total expenses and disbursements. Add lines 24 and 25	671,53	5 2	52,634	0	425,031
	27	Subtract line 26 from line 12			1		
	а	Excess of revenue over expenses and disbursements	-473,426	5			
	b	Net investment income (if negative, enter -0-)		<del></del>	0		
	1 0	Adjusted net income (if negative lecter -0-).		Į.	1	187,436	

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4

5

6

6,876,033

6,876,033

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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(a) List an	d describe the kir	nd(s) of property sold (e.g., real estate, or common stock, 200 shs MLC Co.)	nent me	.ome	(b) How acquired P – Purchase	(c) Date a		(d) Date sold (mo , day, yr )
1a TD AMERITRAD	E-474				D – Donation P	VARI		VARIOUS
b TD AMERITRAD					P	VARI		VARIOUS
C	<del></del>	<del></del>						71212005
d								
е								
(e) Gross sales price		(f) Depreciation allowed (or allowable)			other basis nse of sale			or (loss) ) minus (g)
a 79,7	20				71,111			8,60
ь 387,8	83				386,797			1,08
<u>c</u> 3	04							304
d								
_e								
Complete only for assets sh	lowing gain ir	column (h) and owned by the	foundatio	n on 12/31/6	9	(1)	Gains (Col	(h) gain minus
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		(k) Exces	s of col (i) (j), if any		(k), but not	less than -0-) or om col (h))
a								8,609
b								1,086
с								304
d								<del></del>
_е								<del> </del>
<ul><li>2 Capital gain net income or (</li><li>3 Net short-term capital gain or</li></ul>		If (loss), enter -0- I	n Part I, lu			2		9,999
If gain, also enter in Part I, I Part I, line 8	ine 8, columr	(c) (see instructions) If (loss)	, enter -0-	ın ]		3		1,086
	n Under S	ection 4940(e) for Redu	ced Tax	k on Net I	nvestment Inco	me		
(For optional use by domestic p								
If section 4940(d)(2) applies, lea		•	. ,		,			
Was the foundation liable for the if "Yes," the foundation does no			•	•	ase period?			Yes X No
1 Enter the appropriate amou	nt in each col	umn for each year, see the ins	tructions t	efore makir	g any entries			
(a)		(b)			(c)			(d)
Base period years Calendar year (or tax year begin	ning in)	Adjusted qualifying distribution	ns	Net value	of noncharitable-use assets	,		ibution ratio ivided by col. (c))
2015		407	7,864				<del></del>	<del></del>
2014		<del></del>	2,566					
2013								<del></del>
2012								
2011								
2 Total of line 1, column (d)						2	<u> </u>	
3 Average distribution ratio fo	the 5-year b	ase period – divide the total on	line 2 by	5, or by the		1		
number of years the founda	tion has beer	in existence if less than 5 yea	rs			3		
4 Enter the net value of nonch	arıtable-use	assets for 2016 from Part X, lin	ne 5			4_		0
5 Multiply line 4 by line 3						5		
6 Enter 1% of net investment	ıncome (1% e	of Part I, line 27b)				6	ļ	·
7 Add lines 5 and 6						7		0

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

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425,031

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see 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 ▶ X 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-)				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-)				<u>0</u>
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-				
6	Credits/Payments				
а	2016 estimated tax payments and 2015 overpayment credited to 2016				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2017 estimated tax   Refunded   11				
	rt VII-A Statements Regarding Activities			Yes	No
1a	· · · · · · · · · · · · · · · · · · ·	ŀ	1a	res	X
	participate or intervene in any political campaign?	ŀ	_ ra		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	ļ	1 <sub>b</sub>		X
	Instructions for the definition)?		- 10		
	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	ŀ	1c		X
С.	Did the foundation file Form 1120-POL for this year?		- ''		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation > \$ (2) On foundation managers > \$	ļ			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers  \$  Has the foundation engaged in any activities that have not previously been reported to the IRS?	]	2		X
2		1			
•	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•	3		X
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
4a 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
3	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
J	By language in the governing instrument, or	j			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	ļ			
	conflict with the state 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," complete Part II, col (c), and Part XV	ļ	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	CO				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	}			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	_X_	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				-
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		<u>x</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	ľ	1		
	names and addresses		10		<u> </u>
		-	orm 99	n_PF	(2016)

Form 990-PF (2016) DOROTHY Part VII-B Statements Re	HARMSEN AND BILL HA				<del></del>	Page 6
5a During the year did the foundation		The trace in a poer	toquired (COIII.	nnacu)		
<u> </u>	erwise attempt to influence legislation (s	section 4945(e))?	☐ <b>Y</b>	es X No		
	specific public election (see section 49		- لسا			1
directly or indirectly, any vote	• •		[] Y	es X No		
	al for travel, study, or other similar purp	oses?	<del>  </del>	es X No		
```	ation other than a charitable, etc , orgai		·			
section 4945(d)(4)(A)? (see ii				es X No		
	r than religious, charitable, scientific, lite	erary, or educational	٠ ـــا			
* *	on of cruelty to children or animals?	<b>,</b> ,		es X No		
	i), did any of the transactions fail to qua	lify under the exceptions d	<del></del>			
•	a current notice regarding disaster ass	•		N/A	5b	1
_	t notice regarding disaster assistance o			▶ 🗍		
<u> </u>	5a(4), does the foundation claim exem					
because it maintained expenditur		•	N/A 🗌 Y	es No		
	uired by Regulations section 53 4945–5	5(d)	,	٠.٠٠ ب		
	ar, receive any funds, directly or indirect	• •				
on a personal benefit contract?	- · · ·			es X No		
•	ar, pay premiums, directly or indirectly,	on a personal benefit contr			6b	x
If "Yes" to 6b, file Form 8870		•				
7a At any time during the tax year, w	as the foundation a party to a prohibite	d tax shelter transaction?	Y	es X No		
· · · · · · · · · · · · · · · · · · ·	e any proceeds or have any net income		tion?	N/A	7b	- {
Part VIII Information Abo	out Officers, Directors, Truste	es, Foundation Man	agers, Highly	Paid Employ	ees,	
and Contractors	<b>.</b>			. ,	•	
1 List all officers, directors, trustee	es, foundation managers and their co	mpensation (see instruc	tions).			
		(b) Title, and average	(c) Compensation	(d) Contributions to		
(a) Na	ame and address	hours per week	(If not paid,	employee benefit plans and deferred		nse account, allowances
		devoted to position	enter -0-)	compensation	0	
ZIAD MEZIAB	TUCSON	PRESIDENT				
2204 E 4TH STREET	AZ 85719	40.00	180,000	0	L	0
J DENNIS BARTLETT	TUCSON	TREASURER				
6075 E GRANT RD	AZ 85712	5.00		0		0
<ol><li>Compensation of five highest-r "NONE."</li></ol>	paid employees (other than those inc	luded on line 1 – see inst	tructions). If none	e, enter		
<del></del>		# N T # 4	1	(d) Contributions to	· · · · ·	
(a) Name and address of each e	mployee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		nse account,
(1) 11110 2112 2221000 37 343/10		devoted to position	(-,	plans and deferred compensation	other a	llowances
NONE						
			1			
	·····					
<del></del>	<del></del>			<del></del>		
Fadal mumbas of allows and allows						
Total number of other employees paid	000,000	<del></del>	<del></del>		. 000	-PF (2016)
				Fo	rm JJU	- 「「 (2016)

Part VIII Information About Officers, Directors, Trustees		mployees,
and Contractors (continued)  3 Five highest-paid independent contractors for professional services (s	see instructions) If none enter "NONE"	<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(a) type of do not	(c) comparisation
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (se	ee instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines		Amount
1 N/A		
2		
All other program-related investments. See instructions		
Total. Add lines 1 through 3	<b>&gt;</b>	

orn	1990-PF (2016) DOROTHY HARMSEN AND BILL HARMS			Page
Pa	Art X Minimum Investment Return (All domestic foundation	is must complete this par	t Foreign foundat	ions,
	see instructions)	<del></del>	<del></del>	
1	Fair market value of assets not used (or held for use) directly in carrying out ch	naritable, etc ,		
	purposes			
а	Average monthly fair market value of securities		1a	
þ	Average of monthly cash balances		1b	(
С	Fair market value of all other assets (see instructions)		1c	
đ	Total (add lines 1a, b, and c)		1d	(
е	Reduction claimed for blockage or other factors reported on lines 1a and	, ,		
	1c (attach detailed explanation)	1e	0	
2	Acquisition indebtedness applicable to line 1 assets		2	
3	Subtract line 2 from line 1d		3	(
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater am	ount, see		
	instructions)		4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter her	e and on Part V, line 4	5	(
6	Minimum investment return. Enter 5% of line 5		6	C
Pa	art XI Distributable Amount (see instructions) (Section 4942	(j)(3) and (j)(5) private op	erating foundation	ıs
	and certain foreign organizations check here ▶ and	do not complete this part	)	
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2016 from Part VI, line 5	2a		
b	Income tax for 2016 (This does not include the tax from Part VI)	2b		
С	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and	on Part XIII.		<del></del>
	line 1	,	7	0
_			<del></del>	<del></del>
P	art XII Qualifying Distributions (see instructions)			
1 .	Amounts paid (including administrative expenses) to accomplish charitable, etc.	c , purposes	<del>                                 </del>	
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	•	1a	425,031
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 cl	haritable, etc.,		
	purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the			
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, I	ine 8, and Part XIII, line 4	4	425,031
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on ne		- <del> </del>	
-	Enter 1% of Part I, line 27b (see instructions)		5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	425,031
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent	vears when calculating whether		
	qualifies for the section 4940(e) reduction of tax in those years	, saile miles calculating mileties		
	and the same of the control of the same and the same in the same land.			

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а	rt XIV Private Operating Fou				9)	
	If the foundation has received a ruling or			ating		
	foundation, and the ruling is effective for				10.10(1)(2)	4040()(5)
0	Check box to indicate whether the founda		rating foundation desci		4942(j)(3) or	4942(j)(5)
а	Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 201	(e) Tot
	income from Part I or the minimum	(a) 2010	(b) 2015	(0) 2014	(a) 201	
	investment return from Part X for					
	each year listed	<del></del>	<del></del>	<del>                                     </del>	<del></del>	
•	85% of line 2a		<del> </del>	<del></del>		
;	Qualifying distributions from Part XII,					
	line 4 for each year listed		<del> </del>	<del></del>	<del></del>	
ı	Amounts included in line 2c not used directly					
	for active conduct of exempt activities	<del></del>	<del> </del>	+	<del></del>	<del></del>
•	Qualifying distributions made directly					ĺ
	for active conduct of exempt activities					
	Subtract line 2d from line 2c		<del></del>	<del> </del>	<del> </del>	<del></del>
	Complete 3a, b, or c for the					
	alternative test relied upon		1		. (	
)	"Assets" alternative test – enter	•	İ			
	(1) Value of all assets		<del> </del>	+	+	<del></del>
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	<del></del>	<del></del>	<del></del>		<del></del>
)	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in		1			
	Part X, line 6 for each year listed	<u> </u>	<del></del>	<del></del>		
	"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)				1	
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)	<del></del>	<del></del>	<del> </del>	+	
	(3) Largest amount of support from					
	an exempt organization	<del></del>	<del></del>	<del> </del>	<del> </del>	
_	(4) Gross investment income		40 40-10	i dh a farra dadi ar	h = 1 65 000 =	
	rt XV Supplementary Inform	• •		the foundation	nad \$5,000 o	or more in assets
a		<u> ear – see instru</u>	ctions.)			
a	any time during the ye					
_	Information Regarding Foundation Ma	_				
_	Information Regarding Foundation Ma List any managers of the foundation who	have contributed me				tion
_	Information Regarding Foundation Ma List any managers of the foundation who before the close of any tax year (but only	have contributed me				tion
<u> </u>	Information Regarding Foundation Ma List any managers of the foundation who before the close of any tax year (but only N/A	have contributed me if they have contribu	uted more than \$5,000)	(See section 507(d)	(2))	
	Information Regarding Foundation Ma List any managers of the foundation who before the close of any tax year (but only N/A List any managers of the foundation who	have contributed me if they have contribu- own 10% or more o	uted more than \$5,000)  If the stock of a corpora	(See section 507(d)	(2))	
1	Information Regarding Foundation Ma List any managers of the foundation who before the close of any tax year (but only N/A List any managers of the foundation who ownership of a partnership or other entity	have contributed me if they have contribu- own 10% or more o	uted more than \$5,000)  If the stock of a corpora	(See section 507(d)	(2))	
)	Information Regarding Foundation Ma List any managers of the foundation who before the close of any tax year (but only N/A List any managers of the foundation who ownership of a partnership or other entity N/A	have contributed mo if they have contribu- own 10% or more o	uted more than \$5,000) If the stock of a corpora ation has a 10% or grea	(See section 507(d)  ution (or an equally lar	(2))	
	Information Regarding Foundation Ma List any managers of the foundation who before the close of any tax year (but only N/A List any managers of the foundation who ownership of a partnership or other entity N/A Information Regarding Contribution, Co	have contributed months of they have contributed own 10% or more only of which the founds of the fou	of the stock of a corpora ation has a 10% or great cholarship, etc., Progre	(See section 507(d)  Intion (or an equally largeter interest	(2))	
_	Information Regarding Foundation Ma List any managers of the foundation who before the close of any tax year (but only N/A List any managers of the foundation who ownership of a partnership or other entity N/A Information Regarding Contribution, G Check here ▶ ☐ if the foundation only	own 10% or more or of which the founds	of the stock of a corpora ation has a 10% or great cholarship, etc., Progisto preselected charita	ition (or an equally lar ater interest rams:	ge portion of the	ot
_	Information Regarding Foundation Ma List any managers of the foundation who before the close of any tax year (but only N/A List any managers of the foundation who ownership of a partnership or other entity N/A Information Regarding Contribution, G Check here ▶ ☐ if the foundation only unsolicited requests for funds. If the found	own 10% or more or of which the founds of which the founds or makes contributions dation makes gifts, g	of the stock of a corpora ation has a 10% or great cholarship, etc., Progisto preselected charita	ition (or an equally lar ater interest rams:	ge portion of the	ot
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Part XV Supplementary Information (col	ntinued)			
Part XV Supplementary Information (col 3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	recipient	COMMIDATION	
	If recipient is an individual, show any relationship to any foundation manager	Foundation	Purpose of grant or contribution	300,000
Total b Approved for future payment N/A				300,000

Form 990-PF (2016) DOROTHY HARMSEN AND BILL HARMSEN SR 20-2210574

	art XVI-A	Analysis of Income-Producing Act	1	<del></del>	T =	d h	
Ent	er gross amou	unts unless otherwise indicated	Unrelate (a)	ed business income (b)	(c)	d by section 512, 513, or 514 (d)	(e) Related or exempt
			Business code	Amount	Exclusion code	Amount	function income (See instructions)
1	Program serv	rice revenue					<del></del>
			<del></del>		-	·	
	ь				+		
	c				_		
			<del></del>		-		
	е				-		
	f						
	•	d contracts from government agencies					<del></del>
		dues and assessments			-		13,926
		avings and temporary cash investments					167,365
	*	d interest from securities					20,7303
5		come or (loss) from real estate					
		inced property					-
_		-financed property					
	Other investr	come or (loss) from personal property					5,059
			-				11,759
	•	) from sales of assets other than inventory					
		or (loss) from special events					
		or (loss) from sales of inventory			<del></del>		
11		ue a					
	e				-		
12		d columns (b), (d), and (e)			0	0	198,109
		ne 12, columns (b), (d), and (e)				13	198,109
						·· -	
(Se	e_worksheet_i	in line 13 instructions to verify calculations)	ccomplishn	nent of Exempt	Purpose	-	
(Se		Relationship of Activities to the A  Explain below how each activity for which income	e is reported in	column (e) of Part XV	/I-A contri	es outed importantly to the	)
(Se	e worksheet i	n line 13 instructions to verify calculations )  Relationship of Activities to the A	e is reported in	column (e) of Part XV	/I-A contri	es outed importantly to the	)
(Se	ee_worksheet i Part XVI-B Line No.	Relationship of Activities to the A  Explain below how each activity for which income	e is reported in	column (e) of Part XV	/I-A contri	es outed importantly to the	)
(Se	Part XVI-B Line No.	Relationship of Activities to the A  Explain below how each activity for which income	e is reported in	column (e) of Part XV	/I-A contri	es outed importantly to the	)
(Se	Part XVI-B Line No.	Relationship of Activities to the A  Explain below how each activity for which income	e is reported in	column (e) of Part XV	/I-A contri	es outed importantly to the	)
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(Se	Part XVI-B Line No.	Relationship of Activities to the A  Explain below how each activity for which income	e is reported in	column (e) of Part XV	/I-A contri	es outed importantly to the	9
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Form 990-PF (20	16) DOROTHY	HARMSEN	AND BILL	HARMSEN S	R 20-221057	4
Part XVII	Information Re	garding Trans	sfers To and	Transactions a	nd Relationships	With Noncharitable

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  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of porjuty, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is to correct, and complete Declaration of preparer (other than tax poyer) is based on all information of which proparer has any including accompanying schedules and statements, and to the best of my knowledge and belief, it is to correct, and complete Declaration of preparer (other than tax poyer) is based on all information of which proparer has any including accompanying schedules and statements, and to the best of my knowledge and belief, it is to correct, and complete Declaration of preparer (other than tax poyer) is based on all information of which proparer has any including accompanying schedules and statements, and to the best of my knowledge and belief, it is to correct, and complete Declaration of preparer (other than tax poyer) is based on all information of which proparer has any including accompanying schedules and statements, and to the best of my knowledge and belief, it is to correct, and complete Declaration of preparer (other than tax poyer) is based on all information of which proparer has any including accompanying schedules and statements, and to the best of my knowledge and belief, it is to correct, and complete Declaration of preparer (other than tax poyer) is based on all information of which proparer has any including accompanying schedules and statements, and to the best of my knowledge and belief, it is to correct, and complete Declaration of the proparer forms and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements and to the best			
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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  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  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 in correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?  Signature of office of trustee  Print/Type preparer's name  Preparer signature  J DENNIS BARTLETT  J DENNIS BARTLETT  11/08/17  Firm's name CPA MANAGEMENT SERVICES LLC  PTIN P0037  Firm's EIN P0037			
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  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  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 in correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?  Signature of office of trustee  Print/Type preparer's name  Preparer signature  J DENNIS BARTLETT  J DENNIS BARTLETT  11/08/17  Firm's name CPA MANAGEMENT SERVICES LLC  PTIN P0037  Firm's EIN P0037			
b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  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 to correct, and compilete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?  In the proparer shown (see instructions)?  Date  Prim/Type preparer's name  Preparer's signature  Date  Dennis Bartlett  11/08/17  Firm's name  CPA MANAGEMENT SERVICES LLC  PTIN P0037  Firm's EIN  86-066	Yes 🗓	¥	Nio
(a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  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 in correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)? X  Print/Type preparer's name  Data  DENNIS BARTLETT  J DENNIS BARTLETT  11/08/17  Firm's name CPA MANAGEMENT SERVICES LLC  PTIN P0037  Firm's address 6075 E GRANT RD	165 (2)	***	140
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 in correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?    Note that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is in correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge    May the IRS discuss this with the preparer shown (see instructions)?   X			
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 to correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?  X  PRESIDENT  Signature of officer or trustee  Print/Type preparer's name  Preparer signature  J DENNIS BARTLETT  Firm's name  CPA MANAGEMENT SERVICES LLC  PTIN P0037  Firm's address  6075 E GRANT RD  Firm's address  Firm's address  Firm's elin \$86-066			
Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?    X			—
Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?    X			
Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?    X			
Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this with the preparer shown (see instructions)?    X			
Asignature of officer or trustee    Signature of officer or trustee   Date	true,		
Signature of office for trustee    Print/Type preparer's name   Preparer's signature     Print/Type p	is return		7
Print/Type preparer's name  Print/Type preparer's name  Preparer  Prim's name  CPA MANAGEMENT SERVICES LLC  Prim's address  6075 E GRANT RD  PRESIDENT  11/08/17  11/08/17  Firm's address  Firm's address  Firm's address  Firm's elin   Firm's 86 - 066	n below		- 1
Signature of office or trustee  Print/Type preparer's name  Preparer Signature  Preparer Signature  Date  Preparer Signature  Prim's name ► CPA MANAGEMENT SERVICES LLC  PTIN P0037  Firm's address ► 6075 E GRANT RD  Firm's address ► 6075 E GRANT RD	X Yes	Ц	No
Print/Type preparer's name    Print/Type preparer's name			
reparer   See Only   Firm's address ▶ 6075 E GRANT RD   J DENNIS BARTLETT   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17	~		
reparer   See Only   Firm's address ▶ 6075 E GRANT RD   J DENNIS BARTLETT   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17   11/08/17	<del></del>		<u> </u>
Treparer	Check self-en		l (
Firm's name   CPA MANAGEMENT SERVICES LLC		יטוקוויי	you
Firm's address ▶ 6075 E GRANT RD Firm's elin ▶ 86-066		1	
TUCSON, AZ 85712-2319 Phone no 520-32			00
	990-PF		

3813 DOROTHY HARMSEN AND BILL HARMSEN SR 20-2210574 FYE: 12/31/2016	ARMSEN SR Federal S	tatements		11/8/2017 3:08 PM
Staten	Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets	art I, Line 6a - Sale o	Assets	
Description		ס		7
<del></del> -1	Price PURCHAS	Cost	Expense Depreciation	Net Gain / Lo
VARIOUS VARIOUS TOTAL	\$ 1,760	& & & & & & & & & & & & & & & & & & &	\$ \$\$	\$ 1,760
Stater	Statement 2 - Form 990-PF,	m 990-PF, Part I, Line 11 - Other Income	Income	
Description		Revenue per Books	Net Investment Income	Adjusted Net Income
PARTNERSHIP RENTAL INCOME TOTAL		\$ 5,059	\$ 5,059	\$ 5,059
Stateme	Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees	rt I, Line 16b - Accour	ıting Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING	\$ 6,130	\$ 3,065	w w	\$ 3,065
15	Statement 4 - Form 990-PF,	Part I, Line 18	- Taxes	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
TAXES PENALTIES	\$ 28	\$ 28	\$	v
TOTAL	\$ 837	\$ 837	\$	\$
				4

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Total         Investment           \$         \$           163,726         163,726           27         27           710         27           400         100           2,740         1,096           6,780         2,034
7 TT

øΙ	Fair Market Value	\$ 150,064 \$ 150,064
PF, Part II, Line 10a - US and State Government Investment	Basis of Valuation	COST
d State Governi	End of Year	150,064
US and		ν ν 
t II, Line 10a -	seginning of Year	144,722
F, Par	ш	w w
Statement 6 - Form 990-P	Description	TD AMERITRADE-474 TOTAL

	Fair Market Value \$ 7,473,753
Investments	Basis of Valuation COST
990-PF, Part II, Line 10b - Corporate Stock Investmen	End of Year \$ 5,320,716 \$ 5,320,716
	Beginning of Year \$ 5,620,899 \$ 5,620,899
Statement 7 - Forn	Description TD AMERITRADE474 TOTAL

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Statement 8 - Form 990-PF, Part II, Line 13 - Other Investments

Fair Market Value	\$ 57,204	\$ 57,204
Basis of Valuation	COST	
End of Year	57,204	57,204
	₩	-Ω- <sup>1</sup> 1
Beginning of Year	\$ 57,2	\$ 57,2
Description	UNITED STATES OIL, LP	TOTAL

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20-2210574 FYE: 12/31/2016

## Statement 9 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	eginning of Year	 End of Year
PAYROLL TAX	\$ 1,500	\$ 1,500
TOTAL	\$ 1,500	\$ 1,500

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3813 DOROTHY HARMSEN AND BILL HARMSEN SR	20-2210574 Federal Statements	FYE: 12/31/2016

Statement 10 - Form 990-PF		Part XV, Line 3a - Grants and Contributions Paid During the Year	9
Name	Address		
Address	Relationship Status	Purpose	Amount
REHMA, INC.	1331 E THUNDERHEAD CIR		
TUCSON AZ 85718 NONE		TO ASSIST THE ORGANIZATION	10,000
JUVENILE DIABETES RESEARCH FOUND	4560 E BROADWAY BLVD,		6
HABITAT FOR HUMANITY	NE 621 W LESTER ST	IO ASSIST THE ORGANIZATION	10,000
TUCSON AZ 85705 NONE		TO ASSIST THE ORGANIZATION	20,000
PROJECT ANGEL HEART	4950 WASHINGTON ST	E C C C C C C C C C C C C C C C C C C C	(
3 🗄	NE BOX 162	IO ASSISI INE ORGANIZATION	000'01
3 CO 81402		TO ASSIST THE ORGANIZATION	10,000
$\sim$	1 3003 S COUNTRY CLUB RD		
		TO ASSIST THE ORGANIZATION	10,000
OF SO ARIZONA	3450 E KELVIN BLVD		
		TO ASSIST THE ORGANIZATION	10,000
TUCSON AZ 85712 NONE	1660 N ALVEKNON WAY NE	TO ASSIST THE ORGANIZATION	000 01
DREN ASSOCIATION	2700 W 6TH ST		0000
TUCSON AZ 85704 NONE		TO ASSIST THE ORGANIZATION	10,000
	7090 NO ORACLE RD, STE		
TUCSON AZ 85704 NONE		TO ASSIST THE ORGANIZATION	7,500
IMAGO DEI MIDDLE SCHOOL TITCSON AZ 85701	55 N 6TH AVE	אייבה איבוא אינוא איבוא איצוא איבוא איבוא אינוא איבוא איבוא איבוא איבוא איבוא אינוא איצוא	6
	3155 E GRANT RD		006'/
TUCSON AZ 85716 NONE		TO ASSIST THE ORGANIZATION	2,000
FOOD BANK OF THE ROCKIES	10700 E 45TH AVE	] } } }	
COLORADO HUMANE SOCIETY & SPCA	NE SOBO S OTTERED ST	IO ASSIST THE ORGANIZATION	10,000
DENVER CO 80231	) 1 1 1 2 2 3	TO ASSIST THE ORGANIZATION	10,000
STERS	160 E ALAMEDA STREET		
TUCSON AZ 85701 AMERICAN INDIAN COLLEGE FUND	NE 10020 N 15TH AVE	TO ASSIST THE ORGANIZATION	2,000
	PO BOY 36831	TO ASSIST THE ORGANIZATION	2,000
TUCSON AZ 85740 NONE		TO ASSIST THE ORGANIZATION	15,000

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## 3813 DOROTHY HARMSEN AND BILL HARMSEN SR Federal Statements

20-2210574 FYE: 12/31/2016

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	AC	Address		
Address	Relationship	Status	Purpose	Amount
HABITAT FOR HUMANITY DENVER	3245 ELIOT STREET	STREET		
DENVER CO 80211 NONE			TO ASSIST THE ORGANIZATION	20,000
STEEL CHILDREN'S RESEARCH CENTER	1501 N. CAM	CAMPBELL, RM3301		
TUCSON AZ 85724 NONE			TO ASSIST THE ORGANIZATION	50,000
ARRUPE JESUIT HIGH SCHOOL	4343 UTICA STREET	STREET		
DENVER CO 80212 NONE			TO ASSIST THE ORGANIZATION	20,000
DENVER RESCUE MISSION	6100 SMITH ROAD	ROAD		
DENVER CO 80216 NONE			TO ASSIST THE ORGANIZATION	10,000
COLORADO COALITION FOR THE HOMELESS 2111 CHAMPA STREET	3 2111 CHAMPA	STREET		
DENVER CO 80205 NONE			TO ASSIST THE ORGANIZATION	2,500
ST LABRE INDIAN SCHOOL	TONGUE RIVE	RIVER ROAD		
ASHLAND MT 59003 NONE			TO ASSIST THE ORGANIZATION	1,000
DOCTORS WITHOUT BORDERS USA	333 7TH AVE	333 7TH AVE, 2ND FLOOR		
NEW YORK NY 10001 NONE			TO ASSIST THE ORGANIZATION	1,500
				300,000