Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2016

Department of the Treasury Internal Revenue Service ➤ Do not enter social security numbers on this form as it may be made public.

➤ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	calen	dar year 2016 or tax year beginning	, 2010	6, and (ending		, 20
Na	me of fo	undation				r Identification number	
	D	AVE NIKKEL toundation			20-	8116361 ne number (see Instruct	
Nu	mber an	d street (or P.O. box number if mail is not delivered to street address)	Room	/suite	B Telephor	e number (see Instruct	ions)
	91	02 W. ONTARIO Dr.			30:	3 <i>972</i> - 35	100
Cit	y or tow	n, state or province, country, and ZIP or foreign postal code				tion application is pend	
	Lin	Heton, Co 80128				and appropriate to be a con-	
G	Check	all that apply:	of a former public	charity	D 1. Foreig	n organizations, check	here ►
		☐ Final return ☐ Amended r		•			
		Address change 🔲 Name char	nge			n organizations meeting here and attach compu	
H	Check	type of organization: Section 501(c)(3) exempt p	rivate foundation		E If private	foundation status was	terminated under
\Box		n 4947(a)(1) nonexempt charitable trust 🔲 Other tax		lation	section 5	07(b)(1)(A), check here	. ▶∟
ī		arket value of all assets at J Accounting method			F If the fou	-d-t	.
		f year (from Part II, col. (c), Other (specify)	_			ndation is in a 60-mont ction 507(b)(1)(B), chec	
	line 16	(Part I, column (d) must be	on cash basis.)				
	art I		(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		investment come	(c) Adjusted net income	for chantable purposes
		the amounts in column (a) (see instructions).)	books	· "		incomo	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	106252			NA	
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B	4.				
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities		2	94		
	5a	Gross rents			*		
	ь	Net rental income or (loss)					
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10	23964				
Revenue	ь	Gross sales price for all assets on line 6a 40000					
Š	7	Capital gain net income (from Part IV, line 2)		23	964		
æ	8	Net short-term capital gain		•			
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)				RICHEINE	
	11	Other income (attach schedule)			احا		ĬĎ.
	12	Total. Add lines 1 through 11	130216	24	258	声目 9 小 2月	7 9
S	13	Compensation of officers, directors, trustees, etc.			[60]		90 p
Expenses	14	Other employee salaries and wages				CORFUL	ا ا
ē	15	Pension plans, employee benefits					
봈	16a	Legal fees (attach schedule) STATEMENT	650				
•	b	Accounting fees (attach schedule)					
₹	С	Other professional fees (attach schedule)					
ם	17	Interest					
īš	18	Taxes (attach schedule) (see instructions)	583				
Ē	19	Depreciation (attach schedule) and depletion					
ğ	20	Occupancy					
ğ	21	Travel, conferences, and meetings					
E	22	Printing and publications					
Operating and Administrativ	23	Other expenses (attach schedule)	10	ļ <u>.</u>			
ati	24	Total operating and administrative expenses.	1243				
ē		Add lines 13 through 23					
o	25	Contributions, gifts, grants paid	30660		<u> </u>		30000
	26	Total expenses and disbursements. Add lines 24 and 25	31243	<u> </u>			30000
	27	Subtract line 26 from line 12:	06.002	1			
	a	Excess of revenue over expenses and disbursements	98973		200		ļ
	b	Net investment income (if negative, enter -0-)		17	758_	/ / /	
_	C	Adjusted net income (if negative, enter -0-)	I	l		UK	

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For Paperwork Reduction Act Notice, see instructions.

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	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) Cash—non-interest-bearing	(a) Book Value 3 / 7 6 7	(b) Book Valu		(c) Fair Market Value
		31767	10000		
	Savings and temporary cash investments		24534		24534
	L Cathigo and temperary each integration to				
-	3 Accounts receivable ►				
	Less: allowance for doubtful accounts ▶			_	
1	Pledges receivable ►				
}	Less: allowance for doubtful accounts ▶				
	Grants receivable				
	Receivables due from officers, directors, trustees, and other				
1	disqualified persons (attach schedule) (see instructions)				
1	7 Other notes and loans receivable (attach schedule) ▶				
İ	Less: allowance for doubtful accounts ▶				
33	B Inventories for sale or use				
Assets	9 Prepaid expenses and deferred charges				
ĕ 1	0a Investments—U.S. and state government obligations (attach schedule)				
1	b Investments—corporate stock (attach schedule)				
)	c Investments corporate bonds (attach schedule)				
1	1 Investments—land, buildings, and equipment: basis ▶				
]	Less: accumulated depreciation (attach schedule) ▶				
1	2 Investments—mortgage loans				
1	Investments—other (attach schedule) STATEMENTS, III.	3466	18524		42695
[1	4 Land, buildings, and equipment: basis ▶				
	Less: accumulated depreciation (attach schedule) ▶				
1	5 Other assets (describe ►)				
1	6 Total assets (to be completed by all filers—see the	1/122	1/200		67229
	instructions. Also, see page 1, item l)	35733	43658		6 100 1
1	7 Accounts payable and accrued expenses		<u> </u>		
s 1	B Grants payable				
유 4	9 Deferred revenue				
Liabilities	Loans from officers, directors, trustees, and other disqualified persons				
<u>ख</u> 2	1 Mortgages and other notes payable (attach schedule)				1
- 2	2 Other liabilities (describe ►)				
2	3 Total liabilities (add lines 17 through 22)	D	0		Ì
S	Foundations that follow SFAS 117, check here ▶ □			1	
8	and complete lines 24 through 26 and lines 30 and 31.	1~123	43058)	
Balances	4 Unrestricted	35733	73000		
्रह्म । ३	5 Temporarily restricted		<u> </u>		
_ 13 2	6 Permanently restricted		<u> </u>		
Net Assets or Fun	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			-	
5 2	7 Capital stock, trust pnncipal, or current funds				
Sta 2	8 Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	Retained earnings, accumulated income, endowment, or other funds				
Ž s	O Total net assets or fund balances (see instructions)	35233	43058		
S S	1 Total liabilities and net assets/fund balances (see	35233	43058		
	instructions)		1 - 0		
Part	Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year—Part II, colur	mp (a) line 20 /	et agree with		
	notal net assets or fund balances at beginning of year—Part II, colured on prior year's return)			_	35233
			⊢	1	
	Enter amount from Part I, line 27a			2	98973
	Other increases not included in line 2 (itemize)			3	121/2-1
_	Add lines 1, 2, and 3		Г	4	134206
5 6	Decreases not included in line 2 (itemize) ► Total net assets or fund balances at end of year (line 4 minus line 5)—F	Part II column /b\ I	ine 30	5	134206
	iotal net assets of fund parances at end of year (line 4 minus line 5)—	arn, column (D), I		6	734 より Form 990-PF (2016)

om 990-PF (2016) Part IV Capital Gains and	d Losses for Tax on Investr	nent Income			Page
(a) List and describe the	ne kınd(s) of property sold (e g , real estat use, or common stock, 200 shs. MLC Co.	te,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a Publich Traved	Securities Vanguard	ExtLMKT.	D	10/10/16	12/20/20/0
b /					
С			 		
d					
	(O.D. and a standard		<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		Gain or (loss) us (f) minus (g)
a 40 000		160.	36	2 3	964
b					
C					
d					
e					
Complete only for assets she	owing gain in column (h) and owned	by the foundation	n on 12/31/69		Col. (h) gain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) ol. (j), if any		not less than -0-) or s (from col. (h))
a				<u> </u>	
b		 		 	
<u>C</u>		ļ	· 		
<u>d</u>		-		 	
<u>e</u>	(If gain.	, also enter in Pa	art I. line 7	 	
2 Capital gain net income o	or (net capital loss) { If (loss)), enter -0- in Pa	art I, line 7	2 2	3964
lf gain, also enter in Part	in or (loss) as defined in sections t I, line 8, column (c) (see instru	ictions). If (loss	s), enter -0- ın)	æ	M
	der Section 4940(e) for Red			3	
	rivate foundations subject to the				
"Yes," the foundation does not	ve this part blank. e section 4942 tax on the distribut t qualify under section 4940(e). I ount in each column for each ye	Do not complete	this part.	·	☐ Yes ☐ No
(a)	(b)	ar, see the man	(c)		
Base period years Calendar year (or tax year beginning in	Adjusted qualifying distribution	ns Net value	of noncharitable-use as	ssets (col ((d) Distribution ratio b) divided by col. (c))
2015					
2014 2013					
2013					
2012					
2011					
2 Total of line 1, column (d)			. 2	
3 Average distribution ratio	for the 5-year base period—dividation has been in existence if h			1 1	
•		•			
4 Enter the net value of nor	ncharitable-use assets for 2016	from Part X, line	5	. 4	281/2
5 Multiply line 4 by line 3				. 5	
6 Enter 1% of net investme	ent income (1% of Part I, line 27t	b)		. 6	
7 Add lines 5 and 6				. 7	
	ons from Part XII, line 4				3/143
	eater than line 7, check the box i				

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Part	VI Excise Tax Based on Investment Income (Section 4940)	a), 49	40(b), 4940	(e), or 4	948-	ee ins	truct	ions)
1a	Exempt operating foundations described in section 4940(d)(2), check here (a) a							
	Date of ruling or determination letter: (attach copy of letter if n			ctions)				
b	Domestic foundations that meet the section 4940(e) requirements in Pa				} 1	4	85	
_	here Dand enter 1% of Part I, line 27b			·	1			- {
C	All other domestic foundations enter 2% of line 27b. Exempt foreign Part I, line 12, col. (b).	organı	zations enter	4% or)	' 			
_	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable found	dations	ank Others	O \			_	
2 3	Add lines 1 and 2		•	•	3		<u>85</u>	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found						82	-
5	Tax based on investment income. Subtract line 4 from line 3. If zero		-	•		4	85	
6	Credits/Payments:		,		<u> </u>	<u>_</u>		
а	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	1		1 1			Ì
b	Exempt foreign organizations—tax withheld at source	6b			7			l
C	Tax paid with application for extension of time to file (Form 8868) .	6c]			
d	Backup withholding erroneously withheld	6d						
7	Total credits and payments. Add lines 6a through 6d				7		Ō	
8	Enter any penalty for underpayment of estimated tax. Check here \square in		2220 is attac	hed	8		14	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount				9		99	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶	amou	1		10			
	VII-A Statements Regarding Activities		Retur	ided ▶	11			
1a	During the tax year, did the foundation attempt to influence any nation	nal s	tate, or local	legislatio	n or di	d it	Ye	s No
-	participate or intervene in any political campaign?	-		•		. 1	-+-	X
ь	Did it spend more than \$100 during the year (either directly or						-	
	Instructions for the definition)?				`	. 11	b	K
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the		ities and copi	es of any	y mater	als		
	published or distributed by the foundation in connection with the activity	ies.				<u></u>		
C	Did the foundation file Form 1120-POL for this year?					. 1	C	X
d	Enter the amount (if any) of tax on political expenditures (section 4955)			year:		ł		1
	(1) On the foundation. ► \$ (2) On foundation ma	_				_		
е	Enter the reimbursement (if any) paid by the foundation during the year	tor po	olitical expend	iture tax	impose	d		
2	on foundation managers. ► \$ Has the foundation engaged in any activities that have not previously be	oon to	markad ta tha	IDEA		}		
2	If "Yes," attach a detailed description of the activities.	eenre	ported to the	ino? .		· 2		<u> </u>
3	Has the foundation made any changes, not previously reported to the IR	S. in its	s aovernina in	strument.	articles	of		
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a co							×
4a	Did the foundation have unrelated business gross income of \$1,000 or	more	during the yea	ar?		<u> </u>	+-	X
ь						. 4	,	1
5	Was there a liquidation, termination, dissolution, or substantial contract	tion du	uring 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	h 494	5) satisfied eit	her:		İ		
	By language in the governing instrument, or					[1	1
	• By state legislation that effectively amends the governing instrument conflict with the state law remain in the governing instrument?		nat no manda 	-		 	1	
-	-							
7 8a	Did the foundation have at least \$5,000 in assets at any time during the year? If Enter the states to which the foundation reports or with which it is regis				no Part	XV 7	- X	
U.	Enter the states to which the foundation reports of with which it is regis	stereu	(see instruction) (S) P		l		
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of	Form	990-PF to th	e Attorne	ev Gene	eral		
_	(or designate) of each state as required by General Instruction G? If "No							X
9	Is the foundation claiming status as a private operating foundation with							+
-	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016						1	1
	complete Part XIV					. <u>g</u>	1	X
10	Did any persons become substantial contributors during the tax year?							
	names and addresses		<u> </u>			. 10		X

Part	VII-A Statements Regarding Activities (continued)			age
			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		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	Y	
14	Website address \blacktriangleright NA The books are in care of \blacktriangleright $The Fourier transform$ Telephone no. \blacktriangleright 303 (Located at \blacktriangleright 9202 V : ONTARIO Dr., Littletin, CO 80128 ZIP+4 \blacktriangleright 30	772	-340	00
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here		.	▶ [
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	-A	Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶		1	
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	·		
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	5 ·			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		ļ	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? \Box Yes $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (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" 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.)			
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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 2016?	1c		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)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		{	
	6e, Part XIII) for tax year(s) beginning before 2016?			ļ
b	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.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		*
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			_
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		7
	Fo	m 99 ()-PF	(2016)

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	VII-B Statements Regarding Activities			4720	May Be R	equire	ed (continued)		
5a	 1) Carry on propaganda, or otherwise attempt t (2) Influence the outcome of any specific public directly or indirectly, any voter registration dr 	o influe c electi	ence legislatio	on 495	5); or to c	arry on	☐ Yes ☑ No , ☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, stu(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions)	n a cha	ritable, etc.,	organiz	ation desc	ribed in	☐ Yes		
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to o	, charit	able, scientif	ic, litera	ary, or educ	ationa	ı		
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice						ons described in		
c	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	he fou	ndation claim	exem	ption from	the tax	· NA		
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract?	funds,		directly	, to pay pre	miums	s □Yes '⊠ No		
þ	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	ns, dire	ectly or indire	ctly, on	a personal	benefi	t contract? .	6b	×_
	At any time during the tax year, was the foundation of "Yes," did the foundation receive any proceed						☐ Yes ☑ No ransaction? .	7b	
Par	Information About Officers, Direct and Contractors							mploye	es,
1	List all officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	ı (see i	nstructions).		
	(a) Name and address	hou	e, and average irs per week led to position	(lf r	mpensation not paid, iter -0-)	emple	Contributions to byee benefit plans erred compensation		se account, lowances
	DAVID K. N.KKEL	B. 10 5.	ctor 10		0		0	C	,
2	Compensation of five highest-paid employed "NONE."	es (oth	er than tho	se incl	uded on li	ne 1—	see Instruction	s). If no	ne, enter
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per widevoted to p	iverage veek osition	(c) Comper	sation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expen	se account, lowances
	NONE								
									
Total	number of other employees paid over \$50,000 .	· ·	· · · ·			· ·	▶	Form 990	-PF (2016)
								Onn Jou	■ ■ (ZUID)

Par		ormation About Officers, Directors, Trustees, Ford Contractors (continued)	undation Managers, Highly Paid En	nployees,
3	Five highe	st-paid independent contractors for professional service	es (see instructions). If none, enter "NON	IE."
		Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	<i>-</i>	NOVE		
Tota	I number of c	others receiving over \$50,000 for professional services		
			· · · · · · · · · · · · · · · · · · ·	<u> </u>
Par	t IX-A S	ummary of Direct Charitable Activities		
Lis	t the foundation	's four largest direct chantable activities during the tax year. Include relative beneficianes served, conferences convened, research papers produ	evant statistical information such as the number of ced, etc	Expenses
1		N.A.		
		·		
_				ļ
2				
3				
	.,			
_				
4				
Par	t IX-B S	summary of Program-Related Investments (see in	structions)	L
De	scribe the two la	argest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
1		N.A.		
2				
-				
Aii	other program-r	related investments. See instructions.		
3				
	. A 1 1 P			<u> </u>
Tota	I. Add lines 1	through 3 · · · · · · · · · · · · · · · · · ·		

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Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
_	Average monthly fair market value of securities	1a	15001
a	Average of monthly cash balances	-	
b	Fair market value of all other assets (see instructions)	1b	13539
C	Total (add lines 1a, b, and c)	1c	28540
d	Reduction claimed for blockage or other factors reported on lines 1a and	10	700/0
е		1	
_	1c (attach detailed explanation)		0
2	•	2	28540
3 4	Subtract line 2 from line 1d	3	78210
4	, · · · · · · · · · · · · · · · · · · ·		1100
_	instructions)	4	428
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	28/12
6	Minimum investment return. Enter 5% of line 5	6	1406
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ► □ and do not complete this part.)	ouna	ations
1	Minimum investment return from Part X, line 6	1	1406
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b] ']	
C	Add lines 2a and 2b	2c	485
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	921
4	Recoveries of amounts treated as qualifying distributions	4	, 0
5	Add lines 3 and 4	5	921
6	Deduction from distributable amount (see instructions)	6	٥
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	921
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a	30000
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc.,	1	
	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, line 8, and Part XIII, line 4	4	30000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	υ
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6_	30000
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation

DAVE NIKKEL Foundation 20-8116361

art	Undistributed income (see instruction	ons)			· ·
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
2 a	Undistributed income, if any, as of the end of 2016: Enter amount for 2015 only				921
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2016:				
а	From 2011				
b	From 2012 (133)				
C	From 2013				
d	From 2014 37429				
е	From 2015				
f	Total of lines 3a through e	113125			
4	Qualifying distributions for 2016 from Part XII, line 4: ► \$ 3000				
а	Applied to 2015, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2016 distributable amount				921
е	Remaining amount distributed out of corpus	29079			
5	Excess distributions carryover applied to 2016				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract line 4b from line 2b	142199			
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) .	17342			
9	Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	124857			
10	Analysis of line 9:				
а	Excess from 2012 (133)				
b	Excess from 2013 9062]	1		1
C	Excess from 2014				
d	Excess from 2015				
_ θ	Excess from 2016				<u> </u>
			·		Form 990-PF (2016)

DAVE NIKKEL FOUNDATION 20-8116361

om 99	0-PF (2016)					Page 10
Part					9)	
1a	If the foundation has received a ruling					
_	foundation, and the ruling is effective for		_			(a)
ь			operating tounda		ection 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	81 0045	Prior 3 years	(4) 0040	(e) Total
	investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
	each year listed				 	
	85% of line 2a		 		 	
С	Qualifying distributions from Part XII, line 4 for each year listed					
a	Amounts included in line 2c not used directly			 	 	
d	for active conduct of exempt activities					
_	Qualifying distributions made directly				 	
е	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the			-		
9	alternative test relied upon:					
а	"Assets" alternative test – enter:					
-	(1) Value of all assets					
	(2) Value of assets qualifying under		 	 	 	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3				 	
	of minimum investment return shown in Part X, line 6 for each year listed			i i		
С	"Support" alternative test—enter:			 	 	
_	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on secunties loans (section					
	secunties loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from				_	
	an exempt organization			<u></u> _		
	(4) Gross investment income			<u></u>		
Part			-	the foundation I	nad \$5,000 or m	ore in assets at
	any time during the year-		ns.)			
1	Information Regarding Foundation			n/ _f +h_ + +-+-		land Alam Manager at 1881
а	List any managers of the foundation before the close of any tax year (but of					by the foundation
	DAVID K. N.KK		ontributed more ti	пап фэ,000). (Зее :	section 507 (a)(2).)	
b	List any managers of the foundation		r mara of the sta	ak of a comparation	n /or on oqually la	rae portion of the
D	ownership of a partnership or other e					ige portion of the
	NONE			1070 of grouts, in	.0.001.	
2	Information Regarding Contribution	Grant Gift Los	an Scholarshin	etc. Programs:		
_	Check here ► ☑ if the foundation		•		organizations and	does not accent
	unsolicited requests for funds. If the					
	other conditions, complete items 2a,			•		
а	The name, address, and telephone no		ddress of the pers	on to whom applic	cations should be a	iddressed:
	.,,,					
b	The form in which applications should	d be submitted an	d information and	materials they she	ould include:	
	A				····	
C	Any submission deadlines:					
d	Any restrictions or limitations on av	vards, such as h	y geographical a	areas, charitable f	ields, kinds of ins	titutions, or other
	factors:			,	•	, = = = = = = = = = = = = = = = = = = =

Name and address (home or business) a Paid during the year SUCERN WORLDOW SSS LEXINGTON AUR, 19 Floor EW YORK, NEW YORK 10017 AIN FOR THE SAHEL AND SaharA O. BOX 1503 Orts mouth, N. H. 03802	3 Grants and Contributions Paid During	inued) the Year or Approv	ed for Fut	ure Payment	
a Paid during the year ,NCEPN Worldwide 555 LExington Ave, 19 Floor EN York, NEW York 10017 AIN FON THE SAHEL AND SAHAM O. BOX 1503 Orts Month, N. H. 03802 Dety Foundation O.O. Box 30261 WEN York, NEW York 10011 VEN York, NEW York 10011	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or	Amount
Total Note North Worldwide S55 Lexington Ane, 19th for S55 Lexington Ane, 19th for Jone York, New York 10017 By York, New York 10017 San For The Satter and Saham San For 1503 Ortsmouth, N. H. 03802 Devy Foundation 1.0. Box 30261 WEN York, NEW York 10011		or substantial contributor	Tecipient		-
0. Box 1503 ortsmouth, N H. 03802 deyo Foundation 0.0. Box 30261 VEN York, NEW York 10011	11.55				422,00
VEV YOFK, 102	o. Box 1503 Fortsmouth, N. H. 03802				3,000
	deyo Foundation p.o. Box 30261 NEW York, NEW York 10011				\$ 5,000
	Tabal				\$ 300
			 T	· · · · · · · · · · · · · · · · · · ·	3a 30/0

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ter gross amounts unless otherwise indicated.	Unrelated bus	ness income	Excluded by section	on 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions
Program service revenue:					
8			ļ		
b			 		ļ
d	 				
0			 		
•			 		
g Fees and contracts from government agencies			 		
g Fees and contracts from government agencies Membership dues and assessments			 		
Interest on savings and temporary cash investments			 		
Dividends and interest from securities			14	294	
Net rental income or (loss) from real estate:			1	~_	
a Debt-financed property				-	
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	23964	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue: a					
b					
c					
d	<u> </u>				
e			<u> </u>		
2 Subtotal. Add columns (b), (d), and (e)			<u> </u>	24158	
3 Total. Add line 12, columns (b), (d), and (e)				132	4258
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A		nt of Every	t Durnosos		
				A contributed in	anortently to th
me No. Explain below how each activity for which accomplishment of the foundation's exempt pur	poses (other than	by providing fu	nds for such purpo	ses). (See instruc	tions.)
	- 				
			 		
					<u>-</u> -

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DAVE NIFKEL FORNOATION 20-8116361

r ar C	AVII		rganizations	g Hansiers i	o and Trails	Saction	ns and r	iciationsi	iiha M	iui i	UIICIIa	iiitabi	_	
1	Did th	e organization of			n any of the fo	ollowing	with any	other orga	nizatio	n des	cribed		Yes	No
	in sec	tion 501(c) of th												
а	Trans	fers from the rep	porting found:	ation to a nonc	haritable exen	npt org	anization	of:						
		ash										1a(1)		X
	(2) 01	ther assets .			<i>.</i>							1a(2)		×
b	Other	transactions:												
		ales of assets to										1b(1)		Х
		urchases of asse										1b(2)	_	×
		ental of facilities										1b(3)		K
		eimbursement a							•	• •		1b(4)	$\overline{}$	×
		oans or loan gua							• •	• •		1b(5)		X
		erformance of se ng of facilities, e		•	_						• •	1b(6)		
		answer to any		_			•						fair m	_/
		of the goods, o												
		in any transaction												
(a) Line		b) Amount involved		of noncharitable ex				ption of transf						
			NA											
			/- /											
			ļ		 									
			<u> </u>											
			 											
														
			 											
			 											
	-+-		 											
			 											
	_		 											
			 											
		·												
			T											
2a	Is the	foundation dire	ectly or indire	ctly affiliated w	vith, or related	d to, or	ne or mor	e tax-exem	npt org	aniza	tions			
	descr	ibed in section 5	501(c) of the C	Jode (other tha	n section 501	(c)(3)) o	r in section	n 52/? .	• •		٠ . [」 Yes	ا 🗵	No
D	IT Ye	s," complete the		neauie.	(b) Time of succession		— т		(=) D==					
		(a) Name of organization			(b) Type of organization			(c) Description of relationship						
		<i>N/</i> t												
														
	Under	r penalties of perjury, I	declare that I have	examined this return	n, including accom	panying s	chedules and	statements, an	d to the b	est of n	ny knowle	dge and t	cellef, it	is true,
Sign	_	ct, and complete. Decl	laration of preparer	(other than taxpayer) is based on all info , , , , , , , , , , , , , , , , , , ,	formation of	of which prep	arer has any kn	owledge.	ſ	May the I	RS discu	ss this i	return
Here	" () RAN IN				12/17/2017 Pr			with the				preparer shown below uctions)?		
	Signa	ature of officer or tru	stee		Date	Title								7140
Paid		Print/Type preparer	r's name	Prepare	r's signature			Date		Check	☐ nf	MITC		
repa	arer							1		self-en	nployed			
Jse (Firm's name ▶							Firm's	EIN ►				
		Firm's address ▶							Phone	no.				
											F	om 99 (U-PF	(2016)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2016

Name of	the organization	ikkel f	-oundation	Employer identification number 20 - 81/636/				
Organiz	zation type (check o	one):						
Filers o	f:	Section:						
Form 990 or 990-EZ		501(c)() (enter number) organization						
		☐ 4947(a)(1) r	nonexempt charitable trust not treat	ed as a private foundation				
		☐ 527 politica	al organization					
Form 990-PF		501(c)(3) exempt private foundation						
		☐ 4947(a)(1) r	nonexempt charitable trust treated a	s a private foundation				
		☐ 501(c)(3) ta	xable private foundation					
	only a section 501(c)	-	General Rule or a Special Rule. anization can check boxes for both	the General Rule and a Special Rule. See				
Genera	l Rule							
×	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.							
Special	Rules							
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
	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.							
	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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
990-EZ	n: An organization th , or 990-PF), but it n	nat isn't covered b nust answer "No"	by the General Rule and/or the Speci on Part IV, line 2, of its Form 990; o	ial Rules doesn't file Schedule B (Form 990, or check the box on line H of its Form 990-EZ or on its of Schedule B (Form 990, 990-EZ, or 990-PF).				

	PANE NikkEL FOUNDATION		Employer identification number 20-8116361
Part I	Contributors (See instructions). Use duplicate co	opies of Part I if additional space	e is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Dave N. KKEL 9202 W. Butario Dr. Littleton, Co 80128	\$ 106252	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person
(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 Oncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization **Employer identification number** FOUNDATION 20-8/16361 DAUG Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) MARKETABLE SECURITIES \$ 71242 Oct 10, 2016 (a) No. (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) (a) No. (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** (See instructions) Part I

STATEMENTS

DAUE NIKKEL FOUNDATION

20-8116361

STATEMENT I

LEGAL FEES

ExpENSES DIVESTMENT Adjustrible Charitable
Per Book INCOME PUTPLESS

O

Ragol, Line 16a

650 0

STATEMENT IL

Description

UATUATION METHOL Book

FAIRKAT MARKAT VALUE

mutual Funds

cost

18524

42695