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Form '990-PF

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

		ent of the Treasury Revenue Service	Do not enter so Information about Form	cial security numbers on 1 990-PF and its separate					pen to Public Inspection
Fo	or cal		r tax year beginning			, and ending			, 20
1	Vame (of foundation				<u> </u>	Α	Employer identif	ication number
	GEO:	FAMILY FOUNDA	TION-AD-MDP					27-	4272105
1	Numbe	er and street (or PO box r	number if mail is not delivered	to street address)		Room/suite	В	Telephone numb	er (see instructions)
	152	5 W W.T. HARR	IS BLVD. D1114-	044				85	55-834-0350
(City or	town, state or province, c	ountry, and ZIP or foreign pos	tal code					
							C	If exemption application pending, check here	ition is
_	CHA.	RLOTTE, NC 28					_		
G	Che	ck all that apply.	Initial return	Initial return	-	ublic charity	/ р	1 Foreign organizat	tions, check here >
			Final return	Amended ret				2. Foreign organizat 85% test, check h	
_		· · · · · · · · · · · · · · · · · · ·	X Address change	Name change			_		
	_		ion X Section 501				E	If private foundation	status was terminated
Т			exempt charitable trust	Other taxable pri				under section 507(b	n)(1)(A), check here .
1		market value of		unting method X Ca	ash Acc	rual	F		n a 60-month termination
		of year (from Part I	· · · · · · · · · · · · · · · · · · ·	ther (specify)	· · · · ·		-	under section 507(b	o)(1)(B), check here . D
				column (d) must be on cas	sh basis)				(d) Disbursements
Li	art		ue and Expenses (The olumns (b), (c), and (d)	(a) nevenue and	(b) Net inve	estment	(c)	Adjusted net	for charitable
		may not necessarily	equal the amounts in	expenses per books	incon	ne		ıncome	purposes (cash basis only)
_	·	column (a) (see instru		826,237.					(casii basis offiy)
	1 2		etc , received (attach schedule) . oundation is not required to	020,231.					
		attach ;	Sch B	13.		13.			STMT 1
	3	· ·	emporary cash investments.	2,499.		2,499.			STMT 2
	5a	Gross rents		2,133.		-/			
		Net rental income or (los							
as	6a		ale of assets not on line 10	-40,800.					
Ž	Ъ	Gross sales price for all assets on line 6a	300,000						
Revenue	7		ne (from Part IV, line 2) .						
æ	8	. •	gain						
	9	Income modifications		TED					
	10a	Gross sales less returns and allowances	RECE	78					
	ь	Less Cost of goods sold		- 101 - 101					
	С		attach sandule), p.R. 2	8 5011 19					
	11	Other income (attach	17.1						
_	12	Total Add lines 1 thr	ough 11	17 87,949.		2,512.			
s	13	Compensation of officers	ough 11	161 ()		NONE		NON	
šė	14	ourse ourproyee conc.	ida dila liagge			NONE		NONE	
and Administrative Expense	15		yee benefits			NONE		NONE	
X	16a	•	redule)						
ē	Ь		ch schedule)	39,804.	2	9,804.			
ativ	47		es (attach schading .3.	35,004.	~	10,004.			
str	17		le) (see instructions)						
Ξ	18 19	•	schedule) and depletion.						
튭	20	•							
Ĭ	21		and meetings			NONE		NONI	
and	22		ons			NONE		NON	
Ď	23		ch schedule) STMT. 4	407.					407.
Ē	23 24 25		administrative expenses.						<u> </u>
era	ļ_;	• •	23	40,211.] 3	9,804.		NON	407.
0	25	-	rants paid	275,000.					275,000
_	26		sements Add lines 24 and 25	315,211.	3	9,804.		NON	275,407
	27	Subtract line 26 from	line 12						
	a	Excess of revenue over exp	penses and disbursements	472,738.					
	Ь	Net investment inco	me (if negative, enter -0-)			-0-			
	l c	Adjusted net income	(If negative, enter -0-).	I	-				

JSA For Paperwork Reduction Act Notice, see instructions.

DOL365 D60M 04/20/2017 10:21:49

Form **990-PF** (2016)

Part II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	Ena c	of year
r ai t ii		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	g			
2	- The state of the		64,720.	72,665.	72,665.
3	Accounts receivable ▶_				
·		ful accounts >			
4					
	Less: allowance for doubt	ful accounts >			
5			i		
6		fficers, directors, trustees, and other			
"		ch schedule) (see instructions)			
7	•	cervable (attach schedule)	MARINE BAR		
'		ful accounts NONE		, ,,,,,,,	* * * * * * * * * * * * * * * * * * *
ω .					
Assets					
SS		erred charges			<u> </u>
1.00	_	government obligations (attach schedule).		3,130,426.	6,786,000
b	·	tock (attach schedule) . STMT .5	2,003,220.	3,130,420.	6,786,000
116	Investments - corporate b	onds (attach schedule),			
	and equipment basis Less accumulated depreciation		28 3 3 3 5 4 5 6 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6		
	(attach schedule)		-		
12		oans			
13 14	Investments - other (attack Land, buildings, and	h-schedule) STMT .6			6 1
' '	equipment basis Less accumulated depreciation				2
	(attach schedule)	<u> </u>	5 011	- 110	
15		WF BUSINESS CHECKING ACCTS.		5,412.	5,412
16	•	completed by all filers - see the	1		
	instructions Also, see pag	ge 1, îtem l)	2,735,757.	3,208,503.	6,864,077
17		crued expenses			
18	Grants payable		,		11 T F -21 T &
Liabilities 20 21 22	Deferred revenue				
<u>≓</u> 20	Loans from officers, directors	, trustees, and other disqualified persons			24
윤 21	Mortgages and other note	es payable (attach schedule)			1
二 22	Other liabilities (describe	> 1			
					计划 整道。
23		17 through 22)		NONE	17.15 图 蒙蒙
	Foundations that follo	w SFAS 117, check here . ▶			# # # # # # # # # # # # # # # # # # #
S	and complete lines 24	through 26 and lines 30 and 31.			
24	Unrestricted				
Balances 25 P	Temporarily restricted .				144 1 2 1 2 1 2 1
	, ,				特 计 特
Net Assets or Fund 30 31 32 33 34 35 36 37 37 38 38 38 38 38 38 38 38 38 38 38 38 38	Foundations that do n	ot follow SFAS 117.			
드		ete lines 27 through 31.			1
Ö 27		oal, or current funds	2,735,757.	3,208,503.	
28		and, bldg, and equipment fund			
SS 29		ted income, endowment, or other funds			1111 4 12
4 30	•	balances (see instructions)	2,735,757.	3,208,503.	
31	Total liabilities and	net assets/fund balances (see			Harris and the second
_	instructions)		2,735,757.	3,208,503.	
Part II		ges in Net Assets or Fund Bala		-	
		alances at beginning of year - Part		must agree with	
		on prior year's return)			2,735,757.
		ne 27a			472,738.
		ed in line 2 (itemize) ► ROUNDING		3	8.
					3,208,503.
	creases not included in			5	3,200,000.
		lances at end of year (line 4 minus	line 5) - Part II. column (I		3,208,503.
					Form 990-PF (2016)

Form	990-PF (2016)					Page 3
Par	t IV Capital Gains	and Losses for Tax on Inve	stment Income			
		describe the kind(s) of property sold (e	-	(b) How acquired	(c) Date acquired	(d) Date sold
	2-story br	ick warehouse, or common stock, 200	shs. MLC Co.)	P - Purchase D - Donation	(mo , day, γr.)	(mo , day, yr)
<u>1 a</u>	PUBLICLY TRADED	SECURITIES				·-
b						
<u>c</u>						
<u>d</u>						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a	300,000.		340,800.			-40,800.
<u>a</u>						10/000.
<u>c</u>						
<u>_</u> d						
— е						
	Complete only for assets sh	owing gain in column (h) and owned b	y the foundation on 12/31/69		Gains (Col (h) ga	in minus
(i	F.M V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)		(k), but not less t Losses (from col	nan <i>-</i> 0-) or
		as of 12/31/69	over col (j), if any			-40,800.
<u>a</u> b						40,000.
<u>b</u>						
d		 				
<u>u</u>				<u> </u>	 	
			in, also enter in Part I, line 7	· - 1		
2	Capital gain net income	or (net canital loss)	oss), enter -0- in Part I, line 7	2		-40,800.
3	Net short-term capital ga	nin or (loss) as defined in sections 1				10,000.
•		art I, line 8, column (c) (see inst		. }		
	•		f 1	3		
Par			uced Tax on Net Investment In	come		
			section 4940(a) tax on net investm			
(LOI	optional use by domestic	private foundations subject to the	section 4940(a) tax on het investi	ient inco	ile.)	
If se	ction 4940(d)(2) applies,	leave this part blank.				
						T
			utable amount of any year in the ba	ase perio		Yes X No
		ot qualify under section 4940(e). [
1	Enter the appropriate an		r; see the instructions before makin	ig any en	tries.	
	Base period years	(b)	(c) Net value of noncharitable-use assets		Distribution ra	
Cale	indar year (or tax year beginning in)	Adjusted qualifying distributions			(col (b) divided by	 _
	2015	254,215.	5,678,153.			0.044771
	2014	180,644.	5,366,222.	ļ		0.033663
	2013	168,435.	3,945,617.			0.042689
	2012	183,688.	3,471,084.			0.052919
	2011	18,072.	2,904,167.			0.006223
						
2	Total of line 1, column (d)		2		0.180265
3			e the total on line 2 by 5, or by the			
-	_	ndation has been in existence if les		3		0.036053
	114111201 01 70010 1110 704	Medical file Book in Smothing in 195	-			
4	Enter the net value of no	oncharitable-use assets for 2016 from	om Part X June 5	4	5.	713,123.
-	·	official tradic add added for 2010 in	om are x, mic o ,			,,
-	Marie la line A burline 2			5		205,975.
5	iviuitiply line 4 by line 3.		• • • • • • • • • • • • • • • • • • • •	 	 	202,213.
_	E 40' (اءا		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
_] _		205 025
7	Add lines 5 and 6			-7 -		205,975.
				1 1		005 465
8	Enter qualifying distribut	tions from Part XII. line 4		8		275,407.
			A B . A 0 1			
	If line 8 is equal to or general VI instructions.	greater than line 7, check the box	in Part VI, line 1b, and complete	that par	t using a 1% ta	

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) Domestic foundations that meet the section 4940(e) requirements in Part V, check		1.7	ONE
b			N	<u>ON</u> E
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J			
_	Part I, line 12, col. (b) Tay under section 511 (domestic section 4947/a)(1) trusts and tayable foundations only. Others enter A-1			
2	Tax ditter section 311 (domestic section 434/lax) indias and taxable isolabilities only. Cities cities 67		N	ONE
3	Add lines I and 2			ONE
4	Subilitie A fincoline) tax fuorinestic section 4547/a)(1) trasts and taxable fouriedations only. Stricts circle 6)			ONE
5	Tax based on investment income, Subtract line 4 non-line 3, it 2010 of 1033, Onc. 10			ONL
6	Credits/Payments 2016 estimated tax payments and 2015 overnayment credited to 2016.			
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a Exempt foreign organizations - tax withheld at source			
b	Tax paid with application for extension of time to file (Form 8868)			
C	Backup withholding erroneously withheld			
d	Total credits and payments. Add lines 6a through 6d		N	ONE
7 8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		N	ONE
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u> </u>
11	Enter the amount of line 10 to be Credited to 2017 estimated tax NONE Refunded 11			
_	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		-	_
	Instructions for the definition)?	1b		X
	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)		
С	Did the foundation file Form 1120-POL for this year?	1c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$(2) On foundation managers ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. • \$		}	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	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	_		37
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_ <u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	
	conflict with the state law remain in the governing instrument?	7	$-\frac{X}{X}$	
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	\vdash		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	[[
	Make any or Wall to live 7 has the foundation formation of Farm 000 DF to the Assessment County			
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	Х	
^	(or designate) of each state as required by General Instruction G? If "No," attach explanation	""		
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,"	9		X
	complete Part XIV			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	Х	
			0 DE	

	27-12123		
	VII-A Statements Regarding Activities (continued)	- 1 1/	FI-
11	, , , , , , , , , , , , , , , , , , , ,		es No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X
	Website address ►N/A		
14	The books are in care of ► SEE STATEMENT 7 Telephone no ►		
	Located at ▶ ZIP+4 ▶		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. ▶ X
	and enter the amount of tax-exempt interest received or accrued during the year		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		es No
	over a bank, securities, or other financial account in a foreign country?	16	, X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of		4 71
	the foreign country	N At	63 (A)
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		an Na
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		es No
1a	During the year did the foundation (either directly)	17 3 (11 11
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		4 4
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	$L_{\mathbf{A}}$	11 4
	disqualified person?	7	//
		•	# #
		1.4	11
	(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		$Y \mid Y$
	foundation agreed to make a grant to or to employ the official for a period after	4.4	
	termination of government service, if terminating within 90 days)	1	
b	• • • • • • • • • • • • • • • • • • • •		
_	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	-	21
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	F 1	$r = l_{x,y}$
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	e since	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		H^{-1}
	6e, Part XIII) for tax year(s) beginning before 2016?	1 2	
	If "Yes," list the years		7
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	10	1 1/1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	/ £	1
	all years listed, answer "No" and attach statement - see instructions.)	2b	X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
	<u> </u>	4	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1/3
	at any time during the year?	200	
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or	3.	4/4/
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		44
	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	2 b	
_	foundation had excess business holdings in 2016)	3b	- v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X III HE
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		Z V
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	DE 1001

Part	t VII-B Statements Regarding Activ	vities for Which Form	4720 May Be Req	uired (continued)				
5a	During the year did the foundation pay or incur	any amount to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No							
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	directly or indirectly, any voter registration d	Irive?		. Yes X No	,			
	(3) Provide a grant to an individual for travel, sti				,			
	(4) Provide a grant to an organization other	than a charitable, etc., org	ganization described i	n				
	section 4945(d)(4)(A)? (see instructions).	· · · · · · · · · · · · · · · · · · ·	-		,			
	(5) Provide for any purpose other than relig							
	purposes, or for the prevention of cruelty to				,			
b	If any answer is "Yes" to 5a(1)-(5), did any				ı			
	Regulations section 53.4945 or in a current noti				. 5b			
	Organizations relying on a current notice regard	ing disaster assistance check	here					
c	If the answer is "Yes" to question 5a(4), d	-				ŧ		
•	because it maintained expenditure responsibility		•		,			
	If "Yes," attach the statement required by Regula	<u>-</u>				,		
6a	Did the foundation, during the year, receive		rectly, to pay premiur	ns		ę		
	on a personal benefit contract?	•			,	i.		
ь	Did the foundation, during the year, pay premiur				. 6b	X		
	If "Yes" to 6b, file Form 8870	, ,	•					
7a	At any time during the tax year, was the foundat	tion a party to a prohibited tax	x shelter transaction?.	. Yes X No	,			
b	If "Yes," did the foundation receive any proceeds							
Part	t VIII Information About Officers, I	Directors, Trustees, Fou	ındation Manager	s, Highly Paid Em	oloyees,			
1	and Contractors List all officers, directors, trustees, founda	tion managers and their	compensation (see	instructions)				
•	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e account.		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	owances		
Peter	R. Giovale	President						
450 S	River Run Road, Flagstaff, AZ 86001		-0-	-0-		-0-		
Danie	d G. Giovale	Vice President						
450 S	River Run Road, Flagstaff, AZ 86001		-0-	-0-		-0-		
<u>Micha</u>	el A. Giovale	Secretary						
	River Run Road, Flagstaff, AZ 86001		-0-	-0-		-0-		
	N. Giovale	Treasurer						
	River Rund Road, Flagstaff, AZ 86001		-0-	-0-	1 16	-0-		
	Compensation of five highest-paid emp "NONE."	loyees (other than thos	se included on line	e 1 - see instruction	ons). If no	one, enter		
	THORIE.	(b) Title, and average		(d) Contributions to				
(a)	Name and address of each employee paid more than \$5		(c) Compensation	employee benefit plans and deferred	(e) Expense other allo	e account, owances		
		devoted to position		compensation				
NONT			NONE	NONE).	ONE		
NON	<u> </u>	<u> </u>	NONE	NONE	N	ONE		
			 					
								
				.				
	I manage of the country of the count				27	ONE		
ı otal	number of other employees paid over \$50,0	000	<u> </u>	<u> </u>	N	ONE		

	nighest-paid independent contractors for professional services (see instructions). If none, enter "NONE	."
3 Five I	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		NONE
-		
otal numb	er of others receiving over \$50,000 for professional services	NONE
Part IX-A	Summary of Direct Charitable Activities	
	- Cuminary of Bridge Grantable Floring	
List the fou organizatio	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of as and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1NONE		
2		
3		
4		
IV D	Commence of December Polated Investments (see naturations)	
Part IX-B	Summary of Program-Related Investments (see instructions)	Amount
1 NONE	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	
INCINE		
2		
All other pr	ogram-related investments. See instructions	
3NONE		
3 <u>NONE</u>		

Form 9	90-PF (2016) 27-4272105		Page 8
Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes:		
а	Average monthly fair market value of securities	1a	5,765,500.
b	Average of monthly cash balances	1b	34,625.
С	Fair market value of all other assets (see instructions)	1c	NONE NONE
d	Total (add lines 1a, b, and c)	1d	5,800,125.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	5,800,125.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	87,002.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,713,123.
_6	Minimum investment return. Enter 5% of line 5 · · · · · · · · · · · · · · · · · ·	6	285,656.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	285,656.
2 a	Tax on investment income for 2016 from Part VI, line 5 2a NONE		
b	Income tax for 2016. (This does not include the tax from Part VI.).		
С	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	285,656.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	285,656.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	285,656.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	275,407.
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	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	275,407.
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	275,407.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	lculating	
	qualifies for the section 4940(a) reduction of tax in those ware	J	

Form **990-PF** (2016)

Pa	rt XIII Undistributed Income (see instr	uctions)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
٠	line 7	•			285,656.
_	Undistributed income, if any, as of the end of 2016				203,030.
	Enter amount for 2015 only,			263,482.	
	Total for prior years 20 14 ,20 ,20 ,20		NONE	203,102.	
	Excess distributions carryover, if any, to 2016		110112		
	From 2011 NONE				
	From 2012 NONE				
	From 2013 NONE				
	From 2014 NONE				
	From 2015 NONE				
	Total of lines 3a through e	NONE			•
	Qualifying distributions for 2016 from Part XII,	-			
	line 4 ▶ \$275,407				
a	Applied to 2015, but not more than line 2a			263,482.	
Ŀ	Applied to undistributed income of prior years				
	(Election required - see instructions)		NONE		
	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
c	Applied to 2016 distributable amount				11,925.
E	Remaining amount distributed out of corpus	NONE			· · · · · · · · · · · · · · · · · · ·
5	Excess distributions carryover applied to 2016.	NONE			NONE
	(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	NONE			
á	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
k	Prior years' undistributed income. Subtract		NONE		
	line 4b from line 2b		NONE		
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
	· · · ·		110112		
•	Subtract line 6c from line 6b. Taxable amount - see instructions	·	NONE		
6	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount - see instructions				
		,			
Т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2017		,		273,731.
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)	NONE			
8	Excess distributions carryover from 2011 not				
	applied on line 5 or line 7 (see instructions)	NONE			· · · · · · · · · · · · · · · · · · ·
9	Excess distributions carryover to 2017.	NONE			
	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9				
	Excess from 2012 NONE				
	Excess from 2013 NONE	,			
	Excess from 2014 NONE				
	S Excess from 2015 NONE				
	Excess from 2016 NONE				- 000 PF

Pa	rt XIV Private Ope	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	ating	
	foundation, and the ruling	j is effective for 2016, en	ter the date of the ruling			
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section 49	42(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	т-	(e) Total
	justed net income from Part	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
	I or the minimum 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 Subtract line					
3	2d from line 2c		-		<u> </u>	
3	Complete 3a, b, or c for the 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)					
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
Ü	"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)					
	port from an exempt organization					
	(4) Gross investment income .				<u> </u>	
Pa				only if the foundar	tion had \$5,000	or more in assets at
		uring the year - see				
	Information Regarding			a than 20/ of the tat	al aantubutana ra	soowed by the foundation
а	before the close of any					eceived by the foundation 2).)
	N/A	at the transfer to	100/	f 4541: -6		
b	ownership of a partner					ually large portion of the
	Ownership of a partitor	ship of other entity, o	William the loundation	i nas a 10% or greater	intorost.	
	NT / 7					
2	N/A Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:		
_					ıtahle organizatio	ns and does not accept
	unsolicited requests f	or funds. If the found	ation makes gifts, gra	ants, etc. (see instruc	tions) to individua	als or organizations under
	other conditions, comp			i,		-
а	The name, address, an	d telephone number o	r e-mail address of the	e person to whom app	olications should be	e addressed.
b	The form in which app	lications should be su	omitted and information	on and materials they	should include	
	Any submission deadli	ines		 -		
d	Any restrictions or I factors:	imitations on awards	, such as by geogr	aphical areas, charita	able fields, kinds	of institutions, or other

Part XV Supplementary Information (continued)

Recipient Name and address (home or business)				
Name and address /home or husiness)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
u rold during the year				
SEE STATEMENT 15				275,000.
·				
				1
Total			▶ 3a	275,000.
b Approved for future payment				
		:		
Total			▶ 3b	

Part XVI-A Analysis of Income-Prod	T		I= 1		(a)
Enter gross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue	business code	Amount	Exclusion code	Amount	(See instructions)
a b			-		
c					-
d					
e					
f			<u> </u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments		<u>-</u>	14	13.	-
3 Interest on savings and temporary cash investments			14	2,499.	
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate			 	2,100.	
a Debt-financed property					
b Not debt-financed property · · · · · ·	1				
6 Net rental income or (loss) from personal property.	I			_	
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory	/		18	40,800.	
9 Net income or (loss) from special events $\cdot \cdot \cdot$	1		-		
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue a					
b					
d					
e			<u> </u>		· .
12 Subtotal Add columns (b), (d), and (e)				-38,288.	
13 Total. Add line 12, columns (b), (d), and (e)				13	-38,288.
(See worksheet in line 13 instructions to verify calculated)					
Part XVI-B Relationship of Activities	s to the A	ccomplishment of E	xempt Purp	oses	
Line No. Explain below how each activit					
▼ accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purposes). (See instructions.)
			•		· - ·
					
		NOT APPLICABL	r		
		NOI AFFIICABL	<u> </u>		<u></u>
			 	·	
		··· · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·		 -,	5 990 PE 10010

Part XVII	Exempt Organ		ansters 10 an	a Iransacti	ions and Keia	cionsnips with Non	charit	able
1 Did the	organization direct	ly or indirectly	engage in any o	f the followin	g with any other	organization described	3 ,/	Yes No
in secti	on 501(c) of the Co	de (other than	section 501(c)(3) organization	s) or in section (527, relating to political		
organiz	ations?							
a Transfe	ers from the reporting	g foundation to	a noncharitable	exempt organ	ization of:		F* (1)	
(1) Cas	sh						1a(1)	X
(2) Oth	ner assets						1a(2)	X
	ransactions:							돌기 건
(1) Sal	es of assets to a non-	charitable exen	npt organization .			· · · · · · · · · · · · · · · · · · ·	1b(1)	X
(2) Pur	chases of assets from	n a noncharitat	ole exempt organi	ization			1b(2)	<u> </u>
(3) Rer	ntal of facilities, equip	oment, or other	assets				1b(3)	X
	mbursement arrange						1b(4)	<u> </u>
	ns or loan guarantee						16(5)	<u> </u>
	formance of services						16(6)	X
d if the	goriaciilues, equiprii anciver to any of th	ent, maxing is	us, ouner assets, o	r paid employ	1 00 5	(b) should always show	1c	X
value	of the goods, other	assets or servi	ices aiven by the	reporting for	undation if the f	foundation received less	then f	air market air market
value i	n any transaction or	sharing arrang	gement, show in	column (d) ti	he value of the	goods, other assets, or s	ervices	received.
(a) Line no.	(b) Amount involved		nonchantable exempt o		T	transfers, transactions, and shai		
							_ 	
								
				*				
				\$				
-								
								
	·····							
								···· ··· ·

			· · · · · · · · · · · · · · · · · · ·					
2a is the	foundation directly of	or indirectly af	filiated with or r	elated to one	e or more tay-ey	remnt organizations		
describ	ed in section 501(c)	of the Code (or	ther than section	501(c)(3)) or	in section 5277	[Yes	s X No
b If "Yes,"	complete the follow	ving schedule.						" [
	(a) Name of organization	1	(b) Type o	of organization		(c) Description of relations	ship .	**************************************
				····				
····			· · · · · · · · · · · · · · · · · · ·				 ·	
Under	Afrailie pr perjury, I decip	that I have exami	ned this return, including	g accompanying ac	hedules and statements	, and to the best of my knowledg	o and he	deaf it is tone
	and confidence Declaration of	reparer other than t	accuryer) is based on all in	formation of which p	preparer has any knowled	ge	A SHI DO	1101, IL 10 EU9,
Sign	PHA 1	!. \Д.	W 04/20/	2017	President	May the IRS	quecuse	this return
Here Sign	ature of officer or trustee		Date	2017	Title		· 🗔	nown below
-			Λ	· . /	<u> </u>	(see Instruction	e)? [X	Yes No
Date	Print/Type preparer's nar	ne	Preparer's gnat	nte ,	Date	Check if F	TIN	
Paid -	TAMMY RENAUD	, AVP	1 1/2	$\sim \mu$ (. A .	. 10,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	P0104	13078
Preparer	Firm's name > WE	LLS FARGO		9	1,4,4/,4		30807	
Use Only			HARRIS ALVD	. D1114-0)44			
			NC	282	262	Phone no. 800-65		
				>		For	m 990	-PF (2016)

DOL365 D60M 04/20/2017 10:21:49

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

Schedule of Contributors

OMB No. 1545-0047

2016

Department of the Treasury Internal Revenue Service ► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number Name of the organization 27-4272105 GEOFAMILY FOUNDATION-AD-MDP Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X 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 33 1/3 % 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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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) (2016)

Name of organization
GEOFAMILY FOUNDATION-AD-MDP
Employer identification number 27-4272105

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1_	GEOFAMILY CLAT 450 S. RIVER RUN RD FLAGSTAFF, AZ 86001	\$ 826,237.	Person X Payroll X Noncash X (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)		
(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 Payroli Noncash (Complete Part II for noncash contributions)		

Name of organization
GEOFAMILY FOUNDATION-AD-MDP

Employer identification number

27-4272105

Part II	Noncash Propert	y (See instructions)	. Use duplicate copies	of Part II if additiona	I space is needed.
---------	-----------------	----------------------	------------------------	-------------------------	--------------------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1_	3.1 SHS W.L.GORE & ASSOCIATES		
		\$ 806,000.	12/06/2016
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
·		 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

INVESTMENTS	
CASH	
TEMPORARY	
NO	11
INTEREST	
1	II II
Н	ii M
PART	
ORM 990PF,	
נצין	H

NET INVESTMENT INCOME	13.
REVENUE AND EXPENSES PER BOOKS	13.
	TOTAL
DESCRIPTION	SECURED MARKET DEPOSIT ACCOUNT

- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

NET INVESTMENT INCOME	2,499. 2,499.
REVENUE AND EXPENSES PER BOOKS	2,499.
	TOTAL
DESCRIPTION	

N

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FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET INVESTMENT INCOME	39,804. 39,804.
REVENUE AND EXPENSES PER BOOKS	39,804. 39,804. ====================================
DESCRIPTION	CUSTODIAN & MANAGEMENT FEES (A

27-4272105

EXPENSES	
OTHER	:
ı	ii II
Н	Ш
PART	
990PF,	
FORM	11 11 11 11

REVENUE AND	EAFENSES PER BOOKS	1 1 1 1 1 1	407.	
•	DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MERTING EXPENSES	

407.	407.
	TOTALS

CHARITABLE PURPOSES 407.

407.

35

4

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

664990116 W.L. GORE & ASSOCIAT

ENDING BOOK VALUE

ENDING FMV

F.M.V

3,130,426.

3,130,426.

6,786,000.

د

TOTALS

36

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GEOFAMILY FOUNDATION-AD-MDP

27-4272105

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

COST/ FMV CORF

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664990116 W.L. GORE & ASSOCIAT

TOTALS

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF ______

WELLS FARGO BANK NA

ADDRESS: 100 N MAIN ST FL6 D4001-065

WINSTON SALEM, NC 27107

TELEPHONE NUMBER: (855)834-0350

GEOFAMILY FOUNDATION-AD-MDP 2 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID	7-4272105
RECIPIENT NAME: FRIENDS OF FLAGSTAFF FUTURE ADDRESS: PO BOX23462 FLAGSTAFF, AZ 86002 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:	^
PC AMOUNT OF GRANT PAID	. 6,000.
RECIPIENT NAME: NATIONAL PERFORMANCE NETWORK INC ADDRESS: POB 56698 NEW ORLEANS, LA 70117 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID	. 8,000.
RECIPIENT NAME: FLGSTFF MOUNTAIN FILM FESTIVAL INC ADDRESS: 1602 N MESA DR FLAGSTAFF, AZ 86001 RELATIONSHIP: NONE PURPOSE OF GRANT: AZULITA PROJECT PASSTHROUGH FOUNDATION STATUS OF RECIPIENT:	
PC AMOUNT OF GRANT PAID	. 10,000.

GEOFAMILY FOUNDATION-AD-MDP FORM 990PF, PART XV, LINE 3a - CO	•	-		PAID	-4272105
	=======================================	======	======	====	
RECIPIENT NAME: RENAISSANCE CHARITABLE FOUNDATI	ON				
ADDRESS: 6100 W 96TH ST INDIANAPOLIS, IN 46278					
RELATIONSHIP:					
NONE PURPOSE OF GRANT:					
GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:					
PC AMOUNT OF GRANT PAID					10 000
AMOUNT OF GRANT FAID	• • • • • • • • • • • • • • • • • • • •	• • • • • •	• • • • • • •	• • • • •	10,000.
RECIPIENT NAME: INDIGENOUS EDUCATIONAL NETWORK TURTLE ISLAND	OF				
ADDRESS: POB 485	-				
BEMIDJI, MN 56619 RELATIONSHIP: NONE	,				
PURPOSE OF GRANT: GENERAL SUPPORT					
FOUNDATION STATUS OF RECIPIENT: PC					
AMOUNT OF GRANT PAID			• • • • • •		8,660.
RECIPIENT NAME:					
BELL GARDEN ADDRESS:					
2708 N 4TH ST					
FLAGSTAFF, AZ 86004 RELATIONSHIP:					
NONE PURPOSE OF GRANT:					
SUPPORT FOUNDATION STATUS OF RECIPIENT:					

AMOUNT OF GRANT PAID

GEOFAMILY FOUNDATION-AD-MDP 27-4272105 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: TERRA BIRDS ADDRESS: POB 605 FLAGSTAFF, AL 86002 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING EXPENSE FOUNDATION STATUS OF RECIPIENT: PCAMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: HERO WOMEN RISING ADDRESS: 7 DOMINGO RD SANTE FE, NM 87508 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 9,500. RECIPIENT NAME: A NEW DAWN AZ ADDRESS: 718 NORTH HUMPHREYS FLAGSTAFF, AZ 86001 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

GEOFAMILY FOUNDATION-AD-MDP 27-4272105 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NATIVE AMERICANS IN PHILANTHROPY ADDRESS: 2801 21ST AVENUE SOUTH. SUITE 132D MINNEAPOLIS, MN 55407 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PCAMOUNT OF GRANT PAID 3,500. RECIPIENT NAME: SAN MIGUEL-CASA, INC ADDRESS: 2418 HARRIS BLVD AUSTIN, TX 78703 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 13,000. RECIPIENT NAME: AZULITA PROJECT INC ADDRESS: 416 N SITGRAVES SR FLAGSTAFF, AZ 86001 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SUPPORT

AMOUNT OF GRANT PAID

PC

FOUNDATION STATUS OF RECIPIENT:

GEOFAMILY FOUNDATION-AD-MDP 27-4272105 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: PEACEJAM FOUNDATION ADDRESS: 11200 RALSTON RD ARVADA, CO 80004 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: COLLECTIVE HERITAGE INSTITUTE ADDRESS: 1607 PASEO DEPERALTA STE SANTE FE, NM 87501 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 4,500. RECIPIENT NAME: LOWELL OBSERVATORY ADDRESS: 1400W MARS HILL RD FLAGSTAFF, AZ 86001 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

RECIPIENT NAME: MUSEUM OF NORTHERN ARIZONA ADDRESS: 3101 NORTH FORT VALLEY RD FLAGSTAFF, AZ 86001 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME: FLAGSTAFF ARTS COUNCIL ADDRESS: POB 296 FLAGSTAFF, AZ 86002 RELATIONSHIP: NONE

PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME: PINE FOREST EDUCATION ASSOCIATION INC ADDRESS: 120 W KAIBAB LANE FLAGSTAFF, AZ 86001 RELATIONSHIP:

NONE PURPOSE OF GRANT: GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID 41,000. RECIPIENT NAME: GRAND CANYON WILDLANDS COUNCIL ADDRESS: POB 1594

FLAGSTAFF, AZ 86002

RELATIONSHIP:

NONE

PURPOSE OF GRANT: GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 23,000.

RECIPIENT NAME:

FRIENDS OF CAMP COLTON

ADDRESS:

3825 E SPARROW AVE FLAGSTAFFf, AZ 86004

RELATIONSHIP:

NONE

PURPOSE OF GRANT: GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

WESTMINISTER COLLEGE

ADDRESS:

1840 SOUTH 1300 EAST SALT LAKE, UT 84105

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 8,840. GEOFAMILY FOUNDATION-AD-MDP 27-4272105 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

Khyentse Foundation

ADDRESS:

PO BOX 156648

San Francisco, CA 94115

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 8,000.

RECIPIENT NAME:

PACHAMAMA ALLIANCE

ADDRESS:

PO BOX 29191

SAN FRANCISCO, CA 94129

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATIONS SUPPORT

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 3,000.

TOTAL GRANTS PAID:

275,000.