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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 Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

rui (alell	dar year 2016 or tax year deginining		, and ending		
Nar	ne of	foundation			A Employer identification	n number
В	US	BROWN FOUNDATION			42-1383328	3
Nun	nber ar	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_3	<u> 37:</u>	17 NORTH SCOTTSDALE ROA	D, STE 120		602-955-21	L44
City	or to	own, state or province, country, and ZIP or foreign pe	ostal code		C If exemption application is	pending, check here
_S	CO	TTSDALE, AZ 85266				
G	heck	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return			
		X Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	atus was terminated
	<u>] Sec</u>	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	under section 507(b)(1	
l Fa	ır ma	rket value of all assets at end of year J Accounting	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
(fr	om F	Part II, col (c), line 16)	her (specify)		under section 507(b)(1	. 1 1
<u></u>	\$	120 , 329 . (Part I, colu	mn (d) must be on cash b	asis)		
Pa	ırt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	3,183.	3,183.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
ø	6a	Net gain or (loss) from sale of assets not on line 10	2,351.			
Ž	b	Gross sales price for all assets on line 6a 9, 438.				
Revenue	7	Capital gain net income (from Part IV, line 2)		2,351.		
Œ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances			<u> </u>	<u> </u>
	b	Less Cost of goods sold	-u			
	C	Gross profit or (loss) MAY 15 2017	8			
	11	Other income & MAY 15 2017	en			
	12	Total Add lines 1 through 11	5,534.	<u>5,534</u> .		
	13	Compensation of officers, directors, trustees etc	0.	0.	 	0.
	14	Other employee salaries and wages			 	
S		Pension plans, employee benefits				
ıses		Legal fees				
ē	b	Accounting fees STMT 2	1,875.	1,875.		0.
ű	C	Other professional fees				
Operating and Administrative Expen	17	Interest				
itra	18	Taxes		 		
ij	19	Depreciation and depletion				
Ę	20	Occupancy			 	
ΨÞ	21	Travel, conferences, and meetings			}	
a	22	Printing and publications				
gui	23	Other expenses	 _ 		 	
<u>ra</u>	24	Total operating and administrative	1 075	1 075		
ြီ	0.5	expenses Add lines 13 through 23	1,875.	1,875.	 	6 500
_	25	Contributions, gifts, grants paid	6,500.		 	6,500.
	26	Total expenses and disbursements	0 275	1 075		6 500
, <	07	Add lines 24 and 25	8,375.	1,875		6,500.
(27	Subtract line 26 from line 12:	<2,841.			
	1	Excess of revenue over expenses and disbursements	<4,041.	3,659	 	
	1	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)		3,033	N/A	
	j C	Aujusteu Het Hicolife (il negative, enter -0-)		<u></u>	14/47	

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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15,581.

6,500.

7

R

Add lines 5 and 6

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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.

	990-PF (2016) BUS BROWN FOUNDATION rt VI Excise Tax Based on Investment Income (Section 4940)(a) 404	0(b) 4040(a			1383			age 4
), or 4	940 -	see ii	istruc	Juon	5/
1 a`	Exempt operating foundations described in section 4940(d)(2), check here and entire) i					
	Date of ruling or determination letter: (attach copy of letter if nece]					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and and	enter 1%	P	_1				<u>73.</u>
	of Part I, line 27b								
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%		• •)	i				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers enter -()-)		2				0.
3	Add lines 1 and 2				_3				<u>73.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	thers enter -	0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5				73.
6	Credits/Payments:								
а	2016 estimated tax payments and 2015 overpayment credited to 2016	6a		<u>426.</u>					
b	Exempt foreign organizations - tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments. Add lines 6a through 6d				7			4	26 <u>.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched			8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			>	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			•	10			3	53.
11	Enter the amount of line 10 to be. Credited to 2017 estimated tax		353. Refun	ded 🕨	11				0.
	rt VII-A Statements Regarding Activities							· -	_
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisla	lation or did	it participate or	ntervene	ın			Yes	No
	any political campaign?						1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see inst	ructions for the	definition)?		16		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an								
	distributed by the foundation in connection with the activities	•	•				İ		
C	Did the foundation file Form 1120-POL for this year?						1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear:							
-	(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation managers	-		0.					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expendit				-		ĺ		
٠	managers. ► \$ 0.								
2	Has the foundation engaged in any activities that have not previously been reported to the IR	RS?					2		Х
-	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument :	articles of incorn	oration, o	or.		lli		
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		a	o. u, .	•		3		X
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year						4a		X
	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
ŭ	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 en	ither:							
Ŭ	By language in the governing instrument, or								
	 By state legislation that effectively amends the governing instrument so that no mandatory 	v directions	that conflict with	the state	e law				
	remain in the governing instrument?	, an ootiono	that bollingt with	i ino otac			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	nniete Par	til col (c) and	Part X	,		7	X	_
•	bio the foundation have at least \$6,000 in assets at any time during the year. In thes, con	ripiete i ai	. n, con (c), and	i i ui c X i	•				
R۵	Enter the states to which the foundation reports or with which it is registered (see instruction	nne\ ►							
0.0	AZ		·						
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Al	Attorney Gen	eral (or designat	e)					
•	of each state as required by General Instruction G? If "No," attach explanation		(S. 000.8/101	-,			8ъ	X	1
g	Is the foundation claiming status as a private operating foundation within the meaning of sei	ection 4942/	i)(3) or 4942(i)(5) for cal	endar				_
•	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," c	-		_ , . o. oan			9		x
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	•		ses			10		X
<u></u>	and the second s	and making mich				Fo)-PF	(2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ied)		
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))?	☐ Ye	s X No	1	ŀ
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ectly.			
any voter registration drive?			s X No	1	
(3) Provide a grant to an individual for travel, study, or other similar purposes?)	X Ye			
(4) Provide a grant to an organization other than a charitable, etc., organization			•		
4945(d)(4)(A)? (see instructions)	i described iii section		s X No		
, , , , , ,	an ad		s LA NO		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		s X No		
the prevention of cruelty to children or animals?		 _	S LAL NO	1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instrui	•		}	5b	X
Organizations relying on a current notice regarding disaster assistance check hi			▶∟」∤		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				}	
expenditure responsibility for the grant?	N	「/A	s No	- 1	
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d).		ł	ł	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on		ĺ		
a personal benefit contract?		☐ Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.			Ī		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	[Ve	s X No	1	
b. If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trusto		magers Highly		70	
Paid Employees, and Contractors	oos, i oanaation inc	inagers, riigini	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid.	(d) Contributions to employee benefit plans and deferred	acc	Expense count, other
TI A DI ANTOND	to position	enter -0-)	compensation	- a	llowances
	PRESIDENT				
1010 N. TATUM BLVD. #100	2 22		1	1	•
PHOENIX, AZ 85028	0.00	0.	0		<u> </u>
]		
	a).				
			<u>.</u>	_	
				ļ	
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to	, (e	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plan and deferred compensation	' acc	count, other llowances
NONE	devoted to position		Compensation	 _	- Iowanioo
NONE				Į.	
	 	 	 	+	
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	ļ <u>.</u>	 	 	+	
	}	· ·	{		
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			1		
]				
	<u> </u>	<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000					0
			For	m 990	-PF (2016)

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Part VIII	Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
Five highes	st-paid independent contractors for professional services. If none, enter	"NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NO	ONE		
		4	
			
		-	
			
		7	
Dart IX-A	f others receiving over \$50,000 for professional services Summary of Direct Charitable Activities		<u>▶</u> 0
	tion's four largest direct charitable activities during the tax year. Include relevant statist	tical information such as the	
number of orga	inizations and other beneficiaries served, conferences convened, research papers prod	Juced, etc.	Expenses
N	/A		
2			
	· · · · · · · · · · · · · · · · · · ·		
 3			
\$			
Part IX-B	Summary of Program-Related Investments		
	o largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 <u>N</u>	/A		
			
2			
All other progra	am-related investments. See instructions.		
3			
Total Add line	es 1 through 3		0

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P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	47.
b	Average of monthly cash balances	1b	47. 119,520.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	119,567.
	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	0.
3	Subtract line 2 from line 1d	3	119,567.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,794.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	117,773.
6	Minimum investment return Enter 5% of line 5	6	5,889.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here	id certain	
1	Minimum investment return from Part X, line 6	1	5,889.
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.)		
C	Add lines 2a and 2b	20	73.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,816.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	5,816.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,816.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	6,500.
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 charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	6,500.
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	5_	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for	r the section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				5,816.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2015 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2016:		0.		
a From 2011 2,602.				
b From 2012 2,394.				
c From 2013 10,761.				
d From 2014 1,625.				
e From 2015				
f Total of lines 3a through e	17,382.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 6,500.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Efection required - see instructions)	0.			
d Applied to 2016 distributable amount				5,816.
e Remaining amount distributed out of corpus	684.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	18,066.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract			3-	
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	2,602.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	15,464.			
10 Analysis of line 9				
a Excess from 2012 2,394.			1	
b Excess from 2013 10,761.				
c Excess from 2014 1,625.				
d Excess from 2015			1	}
e Excess from 2016 684.			L	5- 000 DE (0040)

	WN FOUNDATI			42	-1383328 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2016, enter the date of t	the ruling	•		
b Check box to indicate whether the found	dation is a private operatir	ng foundation described		4942(j)(3) or	<u>4942(j)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	- T	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.				1	
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter					
(1) Value of all assets(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter			ĺ		
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section	!				
512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii) (3) Largest amount of support from			-\		
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	on had \$5,000 o	or more in assets
at any time during	the year-see inst	ructions.)			·
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi year (but only if they have contributed			ntributions received by	the foundation before	the close of any tax
NONE					
b List any managers of the foundation who other entity) of which the foundation has			n (or an equally large po	ortion of the ownership	of a partnership or
NONE					
2 Information Regarding Contribution Check here ► X if the foundation	only makes contributions	to preselected charitabl	e organizations and doe		
the foundation makes gifts, grants, etc.	. (see instructions) to indi	viduals or organizations	under other conditions	, complete items 2a, t), c, and d.
a The name, address, and telephone num	nber or e-mail address of	the person to whom app	olications should be add	dressed:	
b The form in which applications should	be submitted and informa	ation and materials they	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	ds, such as by geographic	cal areas, charitable field	s, kinds of institutions,	or other factors:	
				. ———	000 55

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Part XV Supplementary Information (continued)

3 · Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual.	Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Or Substantial Contributor	Todiplant	 	
a Tala daring the year				
MACY BIRMINGHAM C/O UNIVERSITY OF	NONE	INDIVIDUAL	TUITION	
ARIZONA				
1200 E. UNIVERSITY BLVD.		1		
TUCSON AZ 85721		 		2,000
STEPHEN THOMSON C/O UNIVERSITY OF	NONE	INDIVIDUAL	TUITION	
TOLEDO				
2801 W BANCROFT ST.				
TOLEDO, OH 43606				1,500
KATHRYN STIMPSON C/O SALVE REGINA	NONE	INDIVIDUAL	TUITION	
UNIVERSITY	NOME	TNDIVIDOAL	TOTATON	
100 ORCHE POINT AVE.	}			
NEWPORT, RI 02840				1,500
		L		
KAROLYN STIMPSON C/O SALVE REGINA	NONE	INDIVIDUAL	TUITION	
UNVERSITY 100 ORCHE POINT AVE.				1
NEWPORT RI 02840				1,500
	,			
Total			▶ 3a	6,500
b Approved for future payment				
NONE				
110212				
		ļ		
				1
				1
				<u> </u>
				1
		1		
		1		
Total			▶ 3b	

Part XVI-A **Analysis of Income-Producing Activities**

enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	<u> </u>		ļ		
b		 .			
C			<u> </u>		
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	3,183.	
5 Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·			
a Debt-financed property		 	1		
b Not debt-financed property			ļ		
6 Net rental income or (loss) from personal	1				
property					
7 Other investment income		·-····································			
8 Gain or (loss) from sales of assets other					
than inventory			18	2,351.	
9 Net income or (loss) from special events			<u> </u>		
O Gross profit or (loss) from sales of inventory			ļ		
1 Other revenue:	1		Ì	}	
8	·				
b					
C			_		
d	-	· · · · · · · · · · · · · · · · · · ·	ļ		
e	-		ļ		
12 Subtotal Add columns (b), (d), and (e)	<u></u>	0.		5,534.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	5,534.
(See worksheet in line 13 instructions to verify calculations)				<u> </u>	
Part XVI-B Relationship of Activities	to the Acco	omplishment of Ex	xemp	ot Purposes	
Line No. Explain below how each activity for which inc	ome is reported i	n column (e) of Part XVI-A	A contri	buted importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than				,,	r
		77.			
			_		
	. =				
			_		
				<u> </u>	
			-		
			_		

Part XVII		egarding Transfers To		nd Relationships With Nonch			ge 13
•	Exempt Organi						
1 Did the c	organization directly or indire	ectly engage in any of the followi	ng with any other organization	described in section 501(c) of		Yes	No
		(3) organizations) or in section 5	· · · · · · · · · · · · · · · · · · ·	ations?			
		ition to a noncharitable exempt or	rganization of:				7.7
(1) Casi (2) Othe					1a(1)	\dashv	<u>X</u>
	insactions:				1a(2)		
	es of assets to a noncharitab	ole exempt organization			16(1)		X_
		ncharitable exempt organization			1b(2)		X
(3) Ren	tal of facilities, equipment, o	or other assets			1b(3)		X
(4) Rein	mbursement arrangements				15(4)		<u>X</u>
(5) Loa	ns or loan guarantees				1b(5)		<u>X</u>
• •		mbership or fundraising solicitati			1b(6)		X
_		iling lists, other assets, or paid en	• •		1 <u>c</u>		<u> </u>
or servic	es given by the reporting fo		ved less than fair market value	ays show the fair market value of the good in any transaction or sharing arrangemen		ets,	
a) Line no	(b) Amount involved	(c) Name of noncharitab		(d) Description of transfers, transactions, a	nd sharing an	angeme	mts
	(2)	N/A		(2) Book profit of database, adiabase, a	no on a nig an		
							
							
							
							
-							
			· · · · · · · · · · · · · · · · · · ·				
			······································				
				<u> </u>			
	•	tly affiliated with, or related to, on		ations described	□ Vaa	T	□No
		r than section 501(c)(3)) or in sec edule	CUON 5277		Yes	لما	_ NO
<u>u</u> 11 165,	complete the following sche (a) Name of orga		(b) Type of organization	(c) Description of relation	onship		
	N/A		(-, ,,-	(4)			
1							
!				statements, and to the best of my knowledge ation of which preparer has any knowledge	May the IRS or	discuss	this rer
Sign Here	(Kil)	Daniela	8 15/9/17	DDECTDENM	shown below	(see ins	str)?
🖊	gnature of officer or trustee	paragos.	Date	PRESIDENT Title	X Yes	· L	_ No
	Print/Type preparer's na			Date Check If PT	IN		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ide		self- employed			
Paid	JOSHUA P.	HAYES JOSHU	A B. HAYES	05/04/17 F	00056	669)
Prepare	Firm's name EID			Firm's EIN ▶ 45-			
Use Only	·						
		50 N CENTRAL A					
	PH	IOENIX, AZ 8500	4-4624	Phone no. 602-			
					Form 99	U-PF	(2016)

FORM · 990-PF	DIVIDENDS	AND INTER	EST FROM	SECURI	TIES	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A REVE S PER B	NUE	(B) NET INVES MENT INCO		
MOORS & CABOT	3,183.	(0. 3	,183.	3,18	3.	
TO PART I, LINE 4	3,183.		3	,183.	3,18	33.	
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		1,875.	1,	875.		····	0.
TO FORM 990-PF, PG	1, LN 16B	1,875.	1,	875.			0.
FORM 990-PF		OTHER INV	ESTMENTS			STATEMENT	3
DESCRIPTION			LUATION ETHOD	BOOI	K VALUE	FAIR MARKE VALUE	т
MUTUAL FUND			COST		120,252.	120,25	
TOTAL TO FORM 990-P	F, PART II,	LINE 13			120,252.	120,2	52.

2016 Year-End Account Summary

As of Date: 02/21/17

Account Number: 5855-3967

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THE BUS BROWN FOUNDATION 33717 N SCOTTSDALE RD STE 120

Meriocetics from Broken and Batter Exchange Transactions's continued to the contract of the co This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or tax advisor regarding specific questions.

Long Term Gains or Losses (Box 2) For Covered Securities (Box 5)



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2016 Year-End Account Summary

As of Date: 02/21/17

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Account Number: 5855-3967

THE BUS BROWN FOUNDATION 33717 N SCOTTSDALE RD STE 120

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Proceeds from Broket and Barter Exchange Transactions, continued

Description CUSIP (8m ts)	Quantity Sold	Date Acquired	Date Sold or Disposed	Proceeds (Box 10)	Cost or Other Basis	Accrued Market Discount	Wash Sale Loss Disallowed	Gain/Loss Amount	Additional information
PUTNAM HIGH YIELD TR .	6 42400	6 42400 04/24/2014	07/05/2016	47 35	52 55	00 0	000	-5 20 Bo	Box 6: Gross Proceeds
SBI CLASS A	4 62100	05/23/2014	07/05/2016	8 8	37 89	000	800	-3 83 Bo	-3 83 Box 6: Gross Proceeds
CUSIP /46/82101	3 82600	06/24/2014	07/05/2016	28 20	31 68	000	000	-3 48 Bo	Box 6: Gross Proceeds
	3 88000	07/24/2014	07/05/2016	28 29	31 82	000	000	-3 23 Bo	Box 6: Gross Proceeds
	3 90100	08/22/2014	07/05/2016	28 75	31.95	80	000	-3 20 Bo	Box 6: Gross Proceeds
	3 97600	09/24/2014	07/05/2016	88	32 09	80	8	-2.79 Bo	Box 6: Gross Proceeds
	4 02400	10/24/2014	07/05/2016	29 68 29 68	32.23	80	000	-2.57 Bo	Box 6: Gross Proceeds
	4 07200	11/24/2014	07/05/2016	30 01	32 37	80	000	-2 36 Bo	Box 6: Gross Proceeds
	4.17900	12/24/2014	07/05/2016	30 80 80 80	32.51	80	000	-1 71 Bo	Box 6: Gross Proceeds
	4,20300	01/23/2015	07/05/2016	30 98 30 98	32 66	000	000	-1 68 Bo	Box 6: Gross Proceeds
	4 14700	02/24/2015	07/05/2016	30 57	32 80	000	000	-2 23 Bo	Box 6: Gross Proceeds
	4.19200	03/24/2015	07/05/2016	8 8	32 95	000	000	-2 05 Bo	Box 6: Gross Proceeds
	4 16400	04/24/2015	07/05/2016	30 88 88	33 10	80	000	-2 41 Bo	Box 6: Gross Proceeds
	4 18600	05/22/2015	07/05/2016	30.85	33 24	8 0	000	-2 39 Bo	Box 6: Gross Proceeds
	3 11500	06/24/2015	07/05/2016	22 96	24 48	0.00	80	-1 52 Bo	Box 6: Gross Proceeds
Subtotals	385.74600			\$2,842.90	\$3,033.93	\$0.00	\$0.00	(\$191.03)	
Totals				\$2,842.90	\$3,033.93	\$0.00	\$0.00	(\$191.03)	

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Account Number: 5855-3967

2016 Year-End Account Summary

As of Date: 02/21/17

THE BUS BROWN FOUNDATION 33717 N SCOTTSDALE RD STE 120

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Long Term Gains or Losses (Box 2) For Noncovered Securities (Box 5)

Proceeds from Broker and Barter Exchange Transactions, continued

Description CUSIP (5ta 1s)	Quantity Sold	Date Acquired	Date Sold or Disposed (Bw 1¢)	Proceeds	Cost or Other Basis	Accrued Market Discount	Wash Sale Loss Disallowed	Gain/Loss Amount Additional Information
PUTNAM ASSET ALLOC FD BALANCED PORTFOLIO CUSIP 746444306	215 98300 12/13/2001 132 97900 12/13/2001	12/13/2001	07/13/2016 08/23/2016	3,000 00 1,875 00	2,073 30 1,276 51	00 0	000	926 70 Box 6: Gross Proceeds 598 49 Box 6: Gross Proceeds
Subtotals	348.96200			\$4,875.00	\$3,349.81	\$0.00	\$0.00	\$1,525.19
PUTNAM HIGH YIELD TR .	14 34000	14 34000 09/23/2011	07/05/2016	105 68	103 10	000	000	2.58 Box 6: Gross Proceeds
SBI CLASS A	17 10300	17 10300 10/24/2011	07/05/2016	126 04	12451	80	000	1 53 Box 6: Gross Proceeds
CUSIP /46/82101	17 49700	17 49700 11/23/2011	07/05/2016	128 95	125 28	80	8	3 67 Box 6: Gross Proceeds
	17 31 700	17 31 700 12/23/2011	07/05/2016	127 62	126 07	00 0	000	1 55 Box 6: Grass Proceeds
Subtotals	68.25700			\$488.29	\$478.96	\$0.00	\$0.00	\$9.33
Totals				\$5,363.29	\$3,828.77	\$0.00	\$0.00	\$1,534.52

For some tax lots complete data is not available. Therefore, you may see NIA in the Proceeds, Gain/Loss or Cost columns. In these situations, you should determine the actual cost or proceeds and calculate the Gain/Loss is marked NIA.

