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Form 990-PF

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

2016

OMB No 1545-0052

Open to Public Inspection

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

For cal-	endar year 2016 or tax year beginning	, 2016,	, and ending		
DODG	E FAMILY FUND		A	Employer identification num	
	ROZENA DRIVE MONT, CO 80503		В	Telephone number (see ins 202-316-6778	tructions)
			c	If exemption application is	pending, check here
G Che	eck all that apply Initial return	Initial return of a form	ner public charity D	1 Foreign organizations, chec	ck here
	Final return Address change	Amended return Name change		2 Foreign organizations meet	ing the 85% test, check
H Che		1 501(c)(3) exempt private for	oundation	here and attach computation	
	Section 4947(a)(1) nonexempt charitat		private foundation E	If private foundation status	
	market value of all assets at end of year m Part II, column (c), line 16)	Accounting method X C	<u></u>	under section 507(b)(1)(A)	·
(1101 ► \$, , , , , , ,	Other (specify) art I, column (d) must be on	cash basis) F	If the foundation is in a 60 under section 507(b)(1)(B)	
Part		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
<u> </u>	Expenses (The total of amounts in columns (b), (c), and (d) may not nec sarily equal the amounts in column (a (see instructions))	es- expenses per books	income	income	for charitable purposes (cash basis only)
	Contributions, gifts, grants, etc., received (attach schedule				
	2 Check ► if the foundation is not required to attach Sch	В	<u> </u>	` ` ` ` `	*
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities 5 a Gross rents	4,501.	4,501.	4,501.	
	b Net rental income or (loss)				
R E V	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all	37,469.		<u> </u>	
Ž	assets on line 6a 7 Capital gain net income (from Part IV, line 2)	'' 	37,469.	 	
E N	8 Net short-term capital gain			17,221.	
U E	9 Income modifications 10 a Gross sales less	·	<u> </u>	 	
	allowances		!		
	b Less Cost of goods sold		,		•
	C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule)		· · · · · · · · · · · · · · · · · · ·	 	
	12 Total. Add lines 1 through 11	515,536.	41,970.	21,722.	
	13 Compensation of officers, directors, trustees. 14 Other employee salaries and wages	etc. 0.		 	
	15 Pension plans, employee benefits				
Ç∕A D	16a Legal fees (attach schedule) b Accounting fees (attach sch) SEE ST	1		1 645	<u> </u>
M - N	c Other professional fees (attach sch)	1,645.		1,645.	
O N	17 Interest				
E T T	18 Taxes (attach schedule)(see instrs) 19 Depreciation (attach	RECEIVED			
A A	schedule) and depletion			<u> </u>	
ÄŽ V G⊃ E	20 Occupancy 21 Travel, conferences, and meetings	10V 1 4 2017 18		ļ	
Æ E	22 Printing and publications	10 1 4 2017 3		 	
## 41-># #XP#	23 Other expenses (attach schedule) SEE STATEMENT	GDEN LIT 314.	112.	202.	
2017	24 Total operating and administrative				· · · · · · · · · · · · · · · · · · ·
ī 5	expenses Add lines 13 through 23 25 Contributions, gifts, grants paid PART	1,959. 82,500.	112.	1,847.	82,500.
	26 Total expenses and disbursements. Add lines 24 and 25	84,459.	112.	1,847.	82,500.
	27 Subtract line 26 from line 12	3,7133.		1,037.	02,300.
	a Excess of revenue over expenses and disbursements	431,077.			
	b Net investment income (if negative, enter -0-)		41,858.		
	C Adjusted net income (if negative, enter 0-)			19,875.	

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	-11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
Han	CHI	Balance Sheets column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	16,952.	836.	836.
	2	Savings and temporary cash investments		1,235.	1,235.
	3	Accounts receivable			
	1	Less allowance for doubtful accounts	- 7		
	4	Pledges receivable			
	1	Less allowance for doubtful accounts	-7	•	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
) "	disqualified persons (attach schedule) (see instructions)	\		
	7	Other notes and loans receivable (attach sch)			
Ą	Ì	Less allowance for doubtful accounts			<u> </u>
A S E T	8	Inventories for sale or use			
Ē	9	Prepaid expenses and deferred charges			
Š	10 a	Investments – U.S. and state government			
		obligations (attach schedule)			}
		Investments — corporate stock (attach schedule) STATEMENT 3	183,808.	432,676.	594,312.
	C	: Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis	_]	,	
	<u> </u>	Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)	-]		
	15 16	Other assets (describe > Total assets (to be completed by all filers —)	424 747	506 202
		see the instructions. Also, see page 1, item 1)	200,760.	434,747.	596,383.
Ļ	17	Accounts payable and accrued expenses	 		-
À	18	Grants payable	 		
B	19	Deferred revenue			-
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
ŧ	21	Mortgages and other notes payable (attach schedule)	\ 		4
Ī	22	Other liabilities (describe	- ' 		<u> </u>
E S	23	Total liabilities (add lines 17 through 22)	0.1	0.	ļ
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	x		
N F	24	Unrestricted	200,760.	434,747.	
E U T N	25	Temporarily restricted			,
, D	26	Permanently restricted	¬ 		-
A B S A E T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	_		
	27	Capital stock, trust principal, or current funds			
SNC	28	Paid-in or capital surplus, or land, bldg, and equipment fund			1
ΟĔ	29	Retained earnings, accumulated income, endowment, or other funds			
R S	30	Total net assets or fund balances (see instructions)	200,760.	434,747.	
	31	Total liabilities and net assets/fund balances (see instructions)	200,760.	434,747.	
Par	<u> </u>	Analysis of Changes in Net Assets or Fund Bala		101/11/1	
		I net assets or fund balances at beginning of year — Part II, co		ee with	T
1	end-	i net assets or fund balances at beginning of year — Part II, co of-year figure reported on prior year's return)	Julin (a), line 30 (must agr	ee wiiii	200,760.
2		r amount from Part I, line 27a		2	431,077.
3		increases not included in line 2 (itemize)		3	
					631,837.
5	107 000				
6	Total	net assets or fund balances at end of year (line 4 minus line	5) – Part II, column (b), lin	e 30 6	434,747.

Par		Losses for Tax off filvestifie		T 41 5		,	
	(a) List and describe 2-story brick wareho	the kind(s) of property sold (e g , ro ouse; or common stock, 200 shares	eal estate, MLC Company)	(b) How acc P — Purcha D — Dona	ise '	Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	175 APPLE INC			D		5/19/15	12/12/16
b	25 APPLE INC			D		5/19/15	12/12/16
c	376 WALT DISNEY CO			D		5/08/15	2/10/16
	100 FACEBOOK INC			D_		5/19/15	12/12/16
e	200 STARBUCKS CORP		42.5	l D			12/12/16
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa	le	((h) Gain or (e) plus (f) mi	inus (g)
a				5,714.			4,085.
b				2,091.			737.
q	33,104. 11,839.			5,883. 2,302.			17,221. 9,537.
<u>u</u>	44 655			5,788.			5,889.
		ing gain in column (h) and owned by				(I) Gains (Col	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			minus col (k), bi	ut not less
a							4,085.
b							737.
c							17,221.
d							<u>9,537.</u>
е		<u> </u>					5,889.
	Capital gain net income or (net	capital loss). — If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	-	2		37,469.
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	and (6)	}	1		
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see instructions) If	(loss), enter -0-	-	3		17,221.
Par	V Qualification Under	r Section 4940(e) for Reduce	ed Tax on Net Invest	ment Inc	ome		
Was I	s,' the foundation does not qual	tion 4942 tax on the distributable an ify under section 4940(e) Do not con n each column for each year, see the	mplete this part	· 	ies	Yes	X No
	(a) Base period years Calendar year (or tax year	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets	(col	(d) Distribution (b) divided	
	beginning in) 2015	20,000.	20	3,305.			0.098374
	2014	20,000.		3,303.	_		0.0303/4
	2013			-			
	2012						
	2011						
2	Total of line 1, column (d)				2		0.098374
		e 5-year base period — divide the to has been in existence if less than !		e	3		0.049187
4	Enter the net value of nonchar	table-use assets for 2016 from Part	X, line 5		4		376,657.
5	Multiply line 4 by line 3				5		18,527.
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		419.
7	Add lines 5 and 6			-	7		18,946.
	Enter qualifying distributions fro	·		Ĺ	8		82,500.
	If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI,	line 1b, and complete that	part using	a 1% ta	x rate See th	ne

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	see	instruct	ions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1			_		
	Date of ruling or determination letter (attach copy of letter if necessary – see instructions)		[
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	-	1			419.
	chèck 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 Part I, line 12, col (b)					3
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		2			0
•	foundations only Other's enter -0-) Add lines 1 and 2		3			$\frac{0.}{419.}$
3	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-		4			$\frac{419.}{0.}$
4	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	'	5			419.
2	Credits/Payments		 			417.
6	2016 estimated tax pmts and 2015 overpayment credited to 2016		1 1			
	Exempt foreign organizations — tax withheld at source 6b		1 1			
	Tax paid with application for extension of time to file (Form 8868)		1 1		,	
	Backup withholding erroneously withheld 6 d		1 1	- 1	,	*
	Total credits and payments Add lines 6a through 6d		1			0.
,	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
٥	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 5	•	9			419.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			1 17.
10 11	Enter the amount of line 10 to be Credited to 2017 estimated tax	•	111			
	t:VII-A Statements Regarding Activities		1			
					Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did i participate or intervene in any political campaign?	l		1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any material or distributed by the foundation in connection with the activities	s pub	lished			
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) imposed during the year					
	(1) On the foundation >\$ 0. (2) On foundation managers >\$			0.		[
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impost foundation managers \$ 0.	eu o	11	,)
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					
9	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, and	ıcles				1
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	5		3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
ь	olf 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	_ N	/A
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				,	1
	By language in the governing instrument, or					}
	 By state legislation that effectively amends the governing instrument so that no mandatory directions the with the state law remain in the governing instrument? 	at cor	oflict	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV			7	X	
	Enter the states to which the foundation reports or with which it is registered (see instructions)	-				-
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	Х	-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3 for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' com	or 4 olete	942(j)(5) Part XI	9		x
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses			10		y
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Part VIEB Statements Regarding Activit		n 4720 May Be Red	uired (continued)			
5 a During the year did the foundation pay or incur (1) Carry on propaganda, or otherwise attemp		(section 4945(e))?	Yes [No			
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registral	c election (see section	4955), or to carry	Yes [No			•
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	Yes	No			
(4) Provide a grant to an organization other th in section 4945(d)(4)(A)? (see instructions)	an a charitable, etc , or	ganization described	Yes	No			
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	s, charitable, scientific, of cruelty to children c	literary, or or animals?	Yes	No			
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to d a current notice regard	qualify under the except ing disaster assistance	ions		5 b	N	Ά
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ [] [$\neg \uparrow$		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	ibility for the grant?		N/A Yes	No			
If 'Yes,' attach the statement required by Regu	lations section 53 4945	–5(d)				- 1	
6 a Did the foundation, during the year, receive an on a personal benefit contract?				₹]No	6 b		17
b Did the foundation, during the year, pay premit	arns, directly or indirect	iy, on a personal benen	t contract?	+			<u>X</u>
7 a At any time during the tax year, was the found				No		-	
b If 'Yes,' did the foundation receive any proceed				N/A	7 b		
Part VIII Information About Officers, Dire	ectors, Trustees, Fo	oundation Managers	s, Highly Pald Emp	loyees,			
1 List all officers, directors, trustees, foundation	managers and their co	mnensation (see instru	ctions)				
1 List an officers, uncetors, dustees, foundation	(b) Title, and average	(c) Compensation	(d) Contributions to	(2) 5			
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Ex	pense ner allo		
SEE STATEMENT 6							
		0.	0				0.
		<u>.</u>		-			<u> </u>
				1			
	 	·					
	1			1			
	İ)			
				 			
2 Compensation of five highest-paid employees	(other than those inclu	ided on line 1 — see ins		er 'NONE	<u>::'</u>		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expoth	pense ier allo		
NONE			compensation	+		 -	—
				}			
							
		 					
				-			
				 			
				-			
	<u> </u>	<u> </u>	<u> </u>				
Total number of other employees paid over \$50,000							0
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RankX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities 357,564. b Average of monthly cash balances 1 Ь 24,829 c Fair market value of all other assets (see instructions) 1 c 1 d d Total (add lines 1a, b, and c) 382, 393 e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 0 Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 382 393. Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 5,736. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 376,657 Minimum investment return. Enter 5% of line 5 18,833. PartXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 1 Minimum investment return from Part X, line 6 1 18,833. 2 a Tax on investment income for 2016 from Part VI, line 5 2 a 419 b Income tax for 2016 (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b. 419 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 18,414 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 18,414 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 7 18,414 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1 a 82,500 **b** Program-related investments - total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the ${\bf a}$ Suitability test (prior IRS approval required) 3 a **b** Cash distribution test (attach the required schedule) 3 b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 500 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 Adjusted qualifying distributions. Subtract line 5 from line 4 6 081

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				10 /1/
line 7 2 Undistributed income, if any, as of the end of 2016				18,414.
a Enter amount for 2015 only	į		0.	
b Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011			,	
b From 2012				
c From 2013				
d From 2014			}	
e From 2015 20,000.	^ '			
f Total of lines 3a through e	20,000.			
4 Qualifying distributions for 2016 from Part				
XII, line 4. \$ 82,500. 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	•			
(Election required – see instructions)	0.			10 414
d Applied to 2016 distributable amount e Remaining amount distributed out of corpus	64 096			18,414.
5 Excess distributions carryover applied to 2016	64,086.			0.
(If an amount appears in column (d), the				
same amount must be shown in column (a))				
6 - 4 4 4 6 4 4 4 4 4 4 4 4 4 4 4 4 4 4		ļ		
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	84,086.			
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		0.		
amount — see instructions		ļ·		
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
				
f Undistributed income for 2016 Subtract 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 (see instructions)	0.			
9 Excess distributions carryover to 2017.	04.006			
Subtract lines 7 and 8 from line 6a	84,086.			
10 Analysis of line 9 a Excess from 2012		į	l	
b Excess from 2013				
c Excess from 2014				
d Excess from 2015 20,000.				
e Excess from 2016 64,086.				
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Part XIV: Private Operating Founda					N/A
1 a If the foundation has received a ruling or d is effective for 2016, enter the date of the r	ruling		-		
b Check box to indicate whether the foundation		rating foundation de		4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	T	(e) Total
investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a			<u> </u>	<u></u>	
c Qualifying distributions from Part XII, line 4 for each year listed		<u> </u>			
d Amounts included in line 2c not used directly for active conduct of exempt activities			ļ		
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter				\$!
(1) Value of all assets		ļ	ļ	ļ	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		ļ	ļ Ļ		
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					1
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section)					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	s part only if the	e foundation ha	d \$5,000 or mor	e in
assets at any time during th		nstructions.)			
Information Regarding Foundation Manage a List any managers of the foundation who h		ara than 20/ of the to	atal aantributions ros	sound by the foundation	tion before the
close of any tax year (but only if they have	contributed more	than \$5,000) (See s	section 507(d)(2))	ceived by the founda	ition before the
LOWELL DODGE					
b List any managers of the foundation who o	wn 10% or more of	the stock of a corn	oration (or an equal	y lorge portion of th	o ownership of
a partnership or other entity) of which the f	oundation has a 10)% or greater interes	st	y large portion of th	e ownership of
2 Information Departing Contribution Const	Citt Loon Cohol	auchia eta Duagueu			
2 Information Regarding Contribution, Grant Check here ► X if the foundation only m				and does not accen	t uncolleited
requests for funds If the foundation makes					
complete items 2a, b, c, and d		<u> </u>		·	
a The name, address, and telephone number	r or e-mail address	of the person to wh	nom applications sho	ould be addressed	
SEE STATEMENT 7					
b The form in which applications should be s	ubmitted and inform	mation and materials	s they should include	9	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards, si	uch as by geograp	hical areas, charitab	le fields, kinds of ins	stitutions, or other fa	octors
SEE STATEMENT FOR LINE 2A					
BAA	т	EA0310L 12/16/16		F	orm 990-PF (2016)
				•	

3 Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	recipient			
a Paid during the year SEE STATEMENT 8			,		
		1			
Total		!	▶ 3a	92 500	
b Approved for future payment			- 3a	82,500.	
Tabel					
Total			► 3b		

Part XVI	Analysis of Income-Producing		4)	15.3.4.11	5:0 5:0	
Enter gross	amounts unless otherwise indicated		d business income		by section 512, 513, or 514	(e)
		(a) Business	(b) Amount	(c) Exclu-	(d) Amount	Related or exempt function income
	•	code	Amount	sion	Amount	(See instructions)
1 Progr	am service revenue			code	<u>-</u> -	
a:		ļ				
b		<u> </u>				
c		L				
d		<u></u>				
e		<u> </u>				
f						
g Fees	and contracts from government agencies			1 - 1		
2 Memb	pership dues and assessments					
3 Interes	t on savings and temporary cash investments					
4 Divide	ends and interest from securities			14	4,501.	
5 Net re	ental income or (loss) from real estate	* *				
a Debt-	financed property					· · · · · · · · · · · · · · · · · · ·
	ebt-financed property			1		
	ntal income or (loss) from personal property			1		
	investment income			+-+		
• • •	(loss) from sales of assets other than inventory	<u> </u>		18	37,469.	
	ncome or (loss) from special events			╅	37,403.	
	s profit or (loss) from sales of inventory	 		+		
	revenue			++		
a	·			+		
				++		
		 		+-+		
<u></u>		 		+	}	
d		 		+		
е	11.4111.				41 272	
19 Cubia						
	otal Add columns (b), (d), and (e)	L		<u>.ll.</u>	41,970.	
13 Total	Add line 12, columns (b), (d), and (e)	اــــــــــــــــــــــــــــــــــــ		<u>.l l</u> .	41,970.1	41,970.
13 Total (See works	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation		abmont of Even	+ D	13	41,970.
13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			13 _	
13 Total (See works	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B. Relationship of Activities to the Explain below how each activity for which income.	Accompli	ed in column (e) of Pa	rt XVI-A co	5es	the

Page **13**

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes	NO
de	id the organization direct escribed in section 501(delating to political organiz	:) of the Code (o	ngage in any of the follo ther than section 501(c)(wing with ai 3) organizat	ny other organization tions) or in section 52	27,	-		
	- •		a noncharitable exempt	organizatio	n of				ĺ
(1) Cash			-			1 a (1)		Х
•) Other assets						1 a (2)		X
•	ther transactions						<u>`</u>		
(1) Sales of assets to a n	oncharitable exe	mpt organization				1 b (1)		Х
(2	Purchases of assets f	rom a noncharita	able exempt organization	1			1 b (2)		X
(3	Rental of facilities, eq	uipment, or othe	r assets				1 b (3)		X
•-) Reimbursement arran	-					1 b (4)		X
(5) Loans or loan guarant	tees					1 b (5)		X
(6	Performance of service	es or membersh	nip or fundraising solicita	tions			1 b (6)		X
c S	haring of facilities, equip	ment, mailing lis	sts, other assets, or paid	employees			1 c		X
						'			
d If th ar	the answer to any of the ne goods, other assets, on ny transaction or sharing	e above is 'Yes,' or services given i arrangement, s	complete the following s by the reporting foundar how in column (d) the va	chedule Co tion If the fo tlue of the g	olumn (b) should alwa oundation received le joods, other assets, c	ays show the fair ma ss than fair market or services received	irket value value in	of	
(a) Line	no (b) Amount involved	(c) Name	of noncharitable exempt organi	zation	(d) Description of tran	sfers, transactions, and s	haring arran	gements	
N/A									
			····						
							 		
									
							·		
	····								
						\			
d€	escribed in section 501(c) of the Code (o	ated with, or related to, of ther than section 501(c)(one or more 3)) or in sec	tax-exempt organiza ition 527?	tions	Yes	Χı	۷o
b lf	'Yes,' complete the follo		·						
	(a) Name of organiz	ation	(b) Type of orga	anization	(c	Description of rela	tionship		
<u>N/A</u>									
			<u> </u>						
									
			<u>L</u>						
	under penalties of perjury, I declar correct, and complete. Declarat	are that I have examine tion of preparer (othe	d this return, including accompany r than taxpayer) is based on all i	ing schedules an information of w	nd statements, and to the best which preparer has any knov	of my knowledge and belief vledge	, it is true,		
Sign	\bigvee	_					May the IF	RS discu	SS 2
Here	1 De	reel 1.	10000A		EXECUTIVE	DIRECTOR	preparer s (see instru	hown he	elow I
	Signature of officer or trustee		Date Date		Title		X	res]No
	Print/Type preparer's	name	Preparer signature	7/00	Pate	Check If	PTIN		
Paid	ARRONE APP	EL, CPA		NVINGE	// CM11/07/17	self-employed	P00093	857	
Prepa		ARRONE AP	PEL, CPA LLC	11 11 V		Firm's EIN - 84-14			
Use O		2425 BALS.		- V					
	,		0 80304			Phone no (303)	545-5	755	
BAA					·····		Form 990		2016)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

2016

OMB No 1545-0047

Name of the organization		Employer identification number
DODGE FAMILY FUND		46-4306959
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	•
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a privi	ate foundation
	501(c)(3) taxable private foundation	ato roundation
	private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
, , , , , , , , , , , , , , , , , , , ,	·	151.5
Note. Only a section 501(c)(/), (8), or (10) organ	nization can check boxes for both the General Rule and a Sp	pecial Rule. See instructions
General Rule		
For an organization filing Form 990, 990-EZ property) from any one contributor Complete	, or 990-PF that received, during the year, contributions totalle Parts I and II. See instructions for determining a contribut	ing \$5,000 or more (in money or or's total contributions
Special Rules		
For an organization described in section 50°	(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% suppo	ort test of the regulations
under sections 509(a)(1) and 170(b)(1)(A)(v), that checked Schedule A (Form 990 or 990-EZ), Part II, line year, total contributions of the greater of (1) \$5,000 or (2)	ne 13, 16a, or 16b, and that
Form 990, Part VIII, line 1h, or (ii) Form 990	0-EZ, line 1 Complete Parts I and II	2% of the amount on (i)
For an organization described in section 50° during the year, total contributions of more	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fr than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lit	om any one contributor, erary, or educational
purposes, or for the prevention of cruelty to	children or animals. Complete Parts I, II, and III	s.o.y, or occasiona.
	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	
#1 000 If the a training all and a standard at the	religious, charitable, etc , purposes, but no such contribution to total contributions that were received during the year for a	
charitable, etc., purpose Don't complete an	e total contributions that were received during the year for all y of the parts unless the General Rule applies to this organization of the year to contributions totaling \$5,000 or more during the year	zation because
it received nonexclusively religious, charitab	le, etc , contributions totaling \$5,000 or more during the yea	r • \$

BAA 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)

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)

	B (F,orm 990, 990-EZ, or 990-PF) (2016)	Page	1 of 1 of Part
Name of orga	FAMILY FUND	· ·	er identification number 306959
	Contributors (see instructions) Use duplicate copies of Part I if additional sp		300939
			(4)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DIANE DODGE		Person Payroli
	6900 ROZENA DR	\$252,097.	(- 🗀
	LONGMONT, CO 80503		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DIANE DODGE	_	Person
į	6900 ROZENA DR	\$ 201,081.	Noncash X
	LONGMONT, CO 80503		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	KAREN GRACE		Person Payroll
	5309 WEHAUKEN RD	\$ 10,348.	Noncash X
	BETHESDA, MD 20816		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SHANNON DODGE		Person X
ļ	383 FAIR OAKS ST	\$10,000.	Payroll Noncash
	SAN FRANCISCO, CA 94110		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)

Page

to

of Part II

Name of organization

Employer identification number

46-4306959 DODGE FAMILY FUND Partili: Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) Nỏ. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (d) Date received (see instructions) PUBLICLY TRADED SECURITIES WITH ACTIVE MARKETS AND READILY ASCERTAINABLE FAIR MARKET VALUES 252,097. 5/11/16 (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received PUBLICLY TRADED SECURITIES WITH ACTIVE MARKETS AND 2___ FAIR MARKET 201,081 12/28/16 (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I **ENERGY CORP** 3 10,348. 9/27/16 (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (d) Date received Part I (see instructions) (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

1 to

_1 of Part III

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

DODGE FAMILY FUND

Employer identification number 46-4306959

Partill.	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)						
	Use duplicate copies of Part III if additional s	Enter this information once Sei space is needed	e instructions)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	N/A						
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee			
			L				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Rela	ationship of transferor to transferee			
(a)	(b)	(c)		(q)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	itionship of transferor to transferee			

2	N	1	6
_	v		u

FEDERAL STATEMENTS

PAGE 1

DODGE FAMILY FUND

46-4306959

STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE <u>PURPOSES</u>
ACCOUNTING FEES	TOTAL \$	1,645. 1,645.	\$ 0.	\$ 1,645. \$ 1,645.	\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) PENSES R BOOKS	(B) NET INVESTMENT INCOME	Al <u>NET</u>	(C) DJUSTED 'INCOME	(D) CHARITABLE PURPOSES
BANK FEES FILING FEES		\$ 192. 10.	A 110	\$	192. 10.	
INVESTMENT EXPENSES	TOTAL	\$ 112. 314.	\$ 112. \$ 112.	\$	202. \$	0.

STATEMENT 3 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION <u>METHOD</u>	 BOOK VALUE	FAIR MARKET VALUE
ADOBE SYSTEMS	COST	\$ 4,387.	
ALPHABET CL A	COST	5,317.	7,925.
ALPHABET CL C	COST	5,301.	7,718.
APPLE INC	COST	22,087.	28,955.
CISCO SYSTEMS INC	COST	3,760.	6,044.
COSTCO WHOLESALE	COST	8,405.	16,011.
WALT DISNEY CO	COST	0.	0.
FACEBOOK INC KUBOTA ADR	COST COST	27,811.	36,356.
NETFLIX	COST	4,868. 20,467.	7,110. 24,760.
NIKE	COST	15,295.	30,041.
NORDSTROM	COST	5,391.	4,793.
SIRIUS XM	COST	3,696.	4,450.
STARBUCKS	COST	19,079.	27,871.
WHOLE FOODS	COST	5,050.	3,076.
AIA GROUP	COST	19,400.	28,042.
DASSAULT SYSTEMS	COST	17,616.	29,872.
SPECTRA ENERGY CORP	COST	7,191.	9,944.
VISA INC	COST	31,448.	48,918.
WPP PLC	COST	15,941.	26,669.
JP MORGAN EMERGING MKTS EQTY	COST	172,951.	203,603.
ACCENTURE PLC	COST	17,215.	31,859.
	TOTAL	\$ 432,676.	\$ 594,312.

2016	FEDERAL STATEMENTS		PAGE 2
	DODGE FAMILY FUND		46-4306959
STATEMENT 4 FORM 990-PF, PART III, LINE OTHER DECREASES	E 5		
NET UNREALIZED GAINS OR	R LOSSES ON INVESTMENTS	TOTAL \$	197,090. 197,090.
STATEMENT 5 FORM 990-PF, PART VI, PEN BALANCE DUE	IALTY AND INTEREST		
TAX DUE LATE INTEREST		\$ TOTAL \$	419. 9. 428.
			
	TORS, TRUSTEES, AND KEY EMPLOYEES TITLE AND AVERAGE HOURS COMPEN-		
FORM 990-PF, PART VIII, LIN	TITLE AND AVERAGE HOURS COMPENS SS PER WEEK DEVOTED SATION		ACCOUNT/ OTHER
NAME AND ADDRESS LOWELL DODGE 6407 32ND ST. NW	TITLE AND AVERAGE HOURS PER WEEK DEVOTED EXECUTIVE DIR. \$	BUTION TO EBP & DC	ACCOUNT/ OTHER
NAME AND ADDRES LOWELL DODGE 6407 32ND ST. NW WASHINGTON, DC 20015 DIANE DODGE 6407 32ND ST. NW	TITLE AND AVERAGE HOURS PER WEEK DEVOTED EXECUTIVE DIR. \$ DIRECTOR DIRECTOR O DIRECTOR O	BUTION TO EBP & DC 0. \$ 0.	ACCOUNT/ OTHER \$ 0.
NAME AND ADDRES LOWELL DODGE 6407 32ND ST. NW WASHINGTON, DC 20015 DIANE DODGE 6407 32ND ST. NW WASHINGTON, DC 20015 SHANNON DODGE 383 FAIR OAKS ST	TITLE AND AVERAGE HOURS PER WEEK DEVOTED EXECUTIVE DIR. \$ DIRECTOR DIRECTOR DIRECTOR O DIRECTOR O	BUTION TO EBP & DC 0. \$ 0. 0. 0.	ACCOUNT/OTHER \$ 0.
NAME AND ADDRES LOWELL DODGE 6407 32ND ST. NW WASHINGTON, DC 20015 DIANE DODGE 6407 32ND ST. NW WASHINGTON, DC 20015 SHANNON DODGE 383 FAIR OAKS ST SAN FRANCISCO, CA 94111 KAREN GRACE 5309 WEHAWKEN RD	TITLE AND AVERAGE HOURS PER WEEK DEVOTED EXECUTIVE DIR. DIRECTOR BUTION TO EBP & DC 0. \$ 0. 0. 0.	ACCOUNT/OTHER \$ 0.	

APPLICATION SUBMISSION INFORMATION

DODGE FAMILY FUND LOWELL DODGE

NAME OF GRANT PROGRAM: NAME: CARE OF: STREET ADDRESS: CITY, STATE, ZIP CODE:

6900 ROZENA DRIVE LONGMONT, CO 80503

2016

FEDERAL STATEMENTS

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DODGE FAMILY FUND

46-4306959

STATEMENT 7 (CONTINUED) FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

TELEPHONE: E-MAIL ADDRESS: FORM AND CONTENT: SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS:

STATEMENT 8 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
DUMBARTON CONCERTS INC. 3133 DUMBARTON ST. NW WASHINGTON DC 20007	NONE	PC	TO EXPAND THREE PROGRAMS RELATED TO READING READINESS AND PARENTAL INVOLVEMENT IN ENCOURAGING YOUNG CHILDREN TO READ	\$ 25,000.
DIMENSIONS EDUCATIONAL RESEARCH FOUNDATI 1010 LINCOLN MALL LINCOLN NE 68508	NONE	PC	TO SUPPORT A SERIES OF EDUCATOR WORKSHOPS TO EQUIP TEACHERS TO SUSTAIN THE POSITIVE IMPACTS OF NATURE EXPLORE OUTDOOR CLASSROOMS FOR LOW-INCOME CHILDREN IN SEVERAL LOCATIONS IN THE DENVER AREA	20,000.

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FEDERAL STATEMENTS

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DODGE FAMILY FUND

46-4306959

STATEMENT 8 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	<u> </u>	AMOUNT
WOW! CHILDREN'S MUSEUM 110 N. HARRISON AVE LAFAYETTE CO 80026	NONE	PC	SUPPORT FOR MUSEUM'S PLAY FOR ALL INITIATIVE PROVIDING REDUCED MEMBERSHIP FEES FOR LOW-INCOME FAMILIES AND SCIENCE CLASSES FOR HEAD START CENTERS IN BOULDER COUNTY, CO.	\$	7,500.
KNOCK KNOCK CHILDREN'S MUSEUM 2561 CITIPLACE COURT STE 750-260 BATON ROUGE LA 70808	NONE	PC	SUPPORT FOR HEAD START PROGRAMS AND TO PROVIDE LOW COST ACCESS TO 800 LOW-INCOME CHILDREN AND THEIR FAMILIES IN THE BATON ROUGE, LA AREA.		30,000.
			TOTAI.	Š	82,500