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Form 990-PF Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

For	alen	dar year 2016 or tax year beginning		, and ei	nding		
Nar	ne of	foundation				A Employer identification	number
Sturm Zachary Family Foundation  Number and street (or P O box number if mail is not delivered to street address)  Room/suite R						52-2098180	l
,						B Telephone number	
		Box 410				970-925-31	.41
-		wn, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is p	ending, check here
_A	sp	en, CO 81612					
G (	heck	all that apply: Initial return	Initial return of a fo	ormer public c	harity	D 1. Foreign organizations	s, check here
		Final return	Amended return			2 Foreign organizations me	noting the 95% test
		Address change	Name change			<ol><li>Foreign organizations me check here and attach co</li></ol>	emputation
H C	_	type of organization: X Section 501(c)(3) ex	• •			E If private foundation sta	tus was terminated
上			Other taxable private founda			under section 507(b)(1)	)(A), check here
I Fa	ır ma	rket value of all assets at end of year   J   Accounti		X Accr	ual	F If the foundation is in a	60-month termination
			ther (specify)			under section 507(b)(1)	)(B), check here
_			mn (d) must be on cash i	basis)			
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	( <b>b</b> ) Net int		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	55000.	<del>,</del>	··	N/A	
	2	Check I if the foundation is not required to attach Sch. B		<del> </del>	<del> </del>	<u> </u>	
	3	Interest on savings and temporary cash investments	3.		3.		Statement 1
	4	Dividends and interest from securities	430.		430.		Statement 2
	5a	Gross rents					
	b	Net rental income or (loss)					
ē		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					
Revenue	b	assets on line 6a					
ě	7	Capital gain net income (from Part IV, line 2)			0.		
_	8	Net short-term capital gain					
	9	Income modifications Gross sales less returns					
	10a	and allowances				,	
		Less Cost of goods sold	1				
		Gross profit or (loss)					
	11	Other income	55433.		433.		-
	12	Total. Add lines 1 through 11	0.		- 433.		0.
	14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	0.	•	. 0•		0.
	15	Pension plans, employee benefits			<del></del>		<del> </del>
es		Legal fees			<del></del>		
penses		Accounting fees				R	CEIVED
	_	Other professional fees	-			ın	13
Б	17	Interest					AY 1 1 2017 191
Operating and Administrative Ex	18	Taxes				i i i	
istr	19	Depreciation and depletion				00	
ä	20	Occupancy					
Adı	21	Travel, conferences, and meetings					
þ	22	Printing and publications			-		
ğ	23	Other expenses					
atin		Total operating and administrative					
per		expenses. Add lines 13 through 23	0.		0.		0.
ō	25	Contributions, gifts, grants paid	58250.				58250.
		Total expenses and disbursements.					
		Add lines 24 and 25	58250.		0.		58250.
	27	Subtract line 26 from line 12:				-	
	a	Excess of revenue over expenses and disbursements	-2817.				
	Ь	Net investment income (if negative, enter -0-)			433.		
	c	Adjusted net income (if negative, enter -0-)				N/A	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

34775.

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

	ribe the kind(s) i	of property sold (e.g. nmon stock, 200 shs	, real estate,		( <b>b)</b> I	How acquired - Purchase - Donation	(0	) Date at (mo., da		(d) Date sold (mo., day, yr.)
1a							┷			
b NO	NE				<b>├</b>					
<u>c</u> d					<del>-</del>					
е	<del></del>				╁		+			<del></del>
(e) Gross sales price		ation allowed llowable)		t or other basis xpense of sale					n or (loss) (f) minus (	
a										
<u>b</u>										
C										
d e	<u> </u>									
Complete only for assets showing	la gain in colum	n (h) and owned by t	he foundation	on 12/31/69		<del></del>	(I) G	ains (Co	ıl. (h) gaın ı	miniis
(i) F.M.V. as of 12/31/69	(j) Adji	usted basis 12/31/69	(k) Ex	cess of col. (1) col. (j), if any			col. (k	), but no	ot less than from col. (I	ı -0-) or
2				(//, )						
ab										
C			<b> </b>		_	<del></del>				
d							-		-	
Capital gain net income or (net ca	ıpıtal loss)	{ If gain, also enter If (loss), enter -0-	n Part I, line in Part I, line	7 7	}	2				
Net short-term capital gain or (los	ss) as defined in	`								
If gain, also enter in Part I, line 8,		3000013 1222(0) 411	10 (0).		31	}				
If (loss), enter -0- in Part I, line 8  Part V   Qualification U					ال	3				
as the foundation liable for the sec "Yes," the foundation does not qua Enter the appropriate amount in	lify under section	n 4940(e). Do not co	mplete this pa	rt.		<del> </del>	<u>-</u> .	<del></del>	<del> </del>	Yes X
(a)	each column for	(b)	istractions ber	ore making any e	(c)					(d)
Base periód years Calendar year (or tax year beginni	ng in) Ad	ljusted qualifying dis	tributions	Net value of no			sets	(	Distrib col. (b) divi	(d) ution ratio ided by col. (c))
2015	,		68365.			360	22.	<del>                                     </del>		1.8978
2014			88055.			339	57.		*	2.5931
2013			86660.				03.			4.2474
2012			11503.				40.			3.5019
2011		1	70394.			251	57.			6.7732
Total of line 1, column (d)								2		19.0136
Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the number	r of ye	ears		3		3.8027
Enter the net value of noncharitat	ole-use assets fo	or 2016 from Part X,	line 5					4		3791
Multiply line 4 by line 3								5		14418
Fatas 40/ of antique to all	ne (1% of Part I	. line 27h)						6		
Enter 1% of net investment incor		, = ,								
	,	, 2. 2,						7		14418
Enter 1% of net investment incor  Add lines 5 and 6  Enter qualifying distributions from	·	·						7 8		144184 5825

Form 990-PF (2016) Sturm Zachary Family Foundation			<u> 198180</u>		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a)	, 4940(b), 4940(e), or 4	<del>1948 -</del> s	<u>ee instru</u>	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here  and enter "I	N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if necessa	ry-see instructions)	1 1			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	<u> </u>			<u>   9                                 </u>
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Pa	art I, line 12, col. (b).	1 1			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others	enter -0-)	2			_ 0 .
3 Add lines 1 and 2		3			9.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others	enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			<del>9.</del>
6 Credits/Payments.					
a 2016 estimated tax payments and 2015 overpayment credited to 2016	a				
b Exempt foreign organizations - tax withheld at source 6t	b	1 1			
c Tax paid with application for extension of time to file (Form 8868)	c	1			
d Backup withholding erroneously withheld	<del></del>	1			
7 Total credits and payments. Add lines 6a through 6d	<del></del>	1 7 1			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		-	9.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			_ <del></del> _
11 Enter the amount of line 10 to be; Credited to 2017 estimated tax	Refunded	11	<del></del>		
Part VII-A   Statements Regarding Activities	Heldilded				
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation	or did it participate or intervens	. In		Yes	No
any political campaign?	or and it participate or intervent	<i>,</i> 111	1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (s	cae instructions for the definition	.)2	16	<u> </u>	X
		•	10	<del> </del>	<del>  ^</del>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and conditional distributed by the foundation in connection with the activities	opies of arry materials publis	nea or			. '
·					X
c Did the foundation file Form 1120-POL for this year?			1c	<u> </u>	<del>  ^</del>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year;	_				
(1) On the foundation.  \$\begin{align*} 0 \cdot (2) On foundation managers.  \$\begin{align*}	· <del></del>	-		j	]
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure t	tax imposed on foundation				ļ
managers. > \$ 0.					<del>.</del>
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 instru	iment, articles of incorporation,	or	١.		- V
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	}	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N/I	4 <u>a</u>	ļ	┼┷╌
b If "Yes," has it filed a tax return on Form 990-T for this year?		14 / 1			X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	<del> </del>	<del>  ^</del>
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:			ļ		
By language in the governing instrument, or		- 1-	j	l	
By state legislation that effectively amends the governing instrument so that no mandatory directions are the service of	ections that conflict with the stat	e iaw		v	
remain in the governing instrument?	. 5 . 11		6	X	┼
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete	te Part II, col (c), and Part X	<b>V</b>	7	Х	├
	h Mama		}		1
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	▶ None			1	
No. 10 Control of the	0			l	1
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorne	ey General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation	40.404.5/05		86	X	—
9 Is the foundation claiming status as a private operating foundation within the meaning of section		endar		1	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," comp			9	<u> </u>	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list	ing their names and addresses	<del></del>	10		X
			Form <b>99</b> 0	U-PF	(2016)

X

3Ь

4a

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2016)

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

b if "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:	· <del></del>			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indir			
any voter registration drive?		Y	es 🗶 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗶 No	ł
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
4945(d)(4)(A)? (see instructions)		Y	es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i	for		
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	in Regulations		1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru	<u>-</u>	J	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	·			<u> </u>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined	· <u> </u>	
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494:		•/	···	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	* *			
a personal benefit contract?	pay promiums on		es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	oreanal hanafit contract?	ا ليبا	1	6b X
	ersonar benefit contract?		<u> -</u> '	A
If "Yes" to 6b, file Form 8870	haltas tura a satura O		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		L Y	. –	<del>,   -</del> -
b If "Yes," did the foundation receive any proceeds or have any net income attributed in the foundation of the state of th				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highl	y	
List all officers, directors, trustees, foundation managers and their	compensation			<del></del>
List all officers, directors, a disters, foundation managers and their	<del> </del>	(c) Compensation	(d) Contributions to	(a) Evpence
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Melanie L. Sturm	President			
P.O. Box 410			!	
Aspen, CO 81612	10.00	0.	0.	0.
Marc G. Zachary	Vice Presider	ut		
P.O. Box 410				
Aspen, CO 81612	10.00	0.	0.	0.
		<del></del>		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	اـــــــا	
	(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 plans and deferred compensation	account, other allowances
NONE		<del> </del>	compensation	
		<del> </del> -		
		ļ	Į į	
				-
		ļ		
		1	]	
	<u> </u>	<u></u>	<u>                                     </u>	
Total number of other employees paid over \$50,000			▶	
			Form	990-PF (2016

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	28914.
b	Average of monthly cash balances	1b	9578.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	38492.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) le 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	38492.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	577.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	37915.
6	Minimum investment return. Enter 5% of line 5	6	1896.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	1896.
2 a	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	2c	9.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1887.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1887.
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	1887.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		50050
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	58250.
	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	3 (1) 11 11 11 11	3a	<u></u>
	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	58250.
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	58250.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	the section

	ted Income (see if	y ramity rot nstructions)	macron	52-	2098180 Page 9
<u> </u>	<del>`</del> <del>`</del>	(a)	(b)	(c)	(d)
		Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 201	6 from Part XI,				
line 7					1887.
2 Undistributed income, if any, as of	the end of 2016				
a Enter amount for 2015 only				0.	
<b>b</b> Total for prior years:	•			i	
- <del> '</del> ' -			0.		<del> </del>
3 Excess distributions carryove					
a From 2011	169148.				
b From 2012	109923.				
c From 2013	85649.				
d From 2014	86366. 66568.		İ		
e From 2015	00308.	517654.			
f Total of lines 3a through e	NO (	31/034.			
4 Qualifying distributions for 20					
Part XII, line 4: ►\$	58250.			_	
a Applied to 2015, but not more				0.	
<b>b</b> Applied to undistributed incom	• 1		0		
years (Election required - see	· -		0.		
c Treated as distributions out o	· .	0			
(Election required - see instru	,	0.			1007
d Applied to 2016 distributable	<u> </u>	56363			1887.
e Remaining amount distribute	· —	56363.			
5 Excess distributions carryover app (If an amount appears in column (d)	lied to 2016 ), the same amount	0.			0.
must be shown in column (a) )  6 Enter the net total of each coindicated below:	olumn as				
	N. h	574017.			
a Corpus Add lines 3f, 4c, and 4e S b Prior years' undistributed inci	<del></del>	3/401/•		<del></del> -	
line 4b from line 2b	onie. Subtract		0.		
c Enter the amount of prior yea	re'		0.		
undistributed income for white deficiency has been issued, of the section 4942(a) tax has be assessed	ch a notice of ir on which		0.		
d Subtract line 6c from line 6b.	Taxable				
amount - see instructions			0.		
e Undistributed income for 201	5. Subtract line		<u> </u>		
4a from line 2a. Taxable amoi	unt - see instr.			0.	
f Undistributed income for 201	6. Subtract				
lines 4d and 5 from line 1. Th	is amount must				
be distributed in 2017					0.
7 Amounts treated as distribution	ons out of				
corpus to satisfy requirement	ts imposed by				
section 170(b)(1)(F) or 4942	(g)(3) (Election				
may be required - see instruc	tions)	0.			
8 Excess distributions carryove	r from 2011				
not applied on line 5 or line 7		169148.			
9 Excess distributions carryov	er to 2017.				
Subtract lines 7 and 8 from lin	ne 6a	404869.			
10 Analysis of line 9:					
a Excess from 2012	109923.		†		
<b>b</b> Excess from 2013	85649.				
c Excess from 2014	86366.		]		
d Excess from 2015	66568.				
e Excess from 2016	56363.			ŀ	

623581 11-23-16

Form 990-PF (2016) Sturm 2	achary Fami	ly Foundat:	ion	52-20	98180 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2016, enter the date of	the ruling	<b>&gt;</b>		
b Check box to indicate whether the foun	dation is a private operatii	ng foundation described		4942(j)(3) or49	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	ļ				
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 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					
• •			<u> </u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		1		,	
b "Endowment" alternative test - enter		<del></del>			
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
	-				<u> </u>
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)	-		<del></del>		
(2) Support from general public and 5 or more exempt		1			
organizations as provided in					•
section 4942(j)(3)(B)(iii)	· · · · · · · · · · · · · · · · ·			<del>-</del>	
(3) Largest amount of support from					
an exempt organization			+		
(4) Gross investment income	umantina (Camala	As Abis south south	if the formulation	- b-d &E 000	
Part XV Supplementary Info			ir the foundation	n nad \$5,000 or me	ore in assets
		i dottoris.,			<del></del>
1 Information Regarding Foundation	•	4b 00/ - 64b - 4-4-1	4-1-4		
a List any managers of the foundation where the contributed is a contributed of the co			uributions received by the	e foundation before the clos	se of any tax
Melanie L. Sturm	(555).	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
b List any managers of the foundation wi	no own 10% or more of th	a ctack of a corporation	(or an equally large port	ion of the ownership of a n	artnerehin or
other entity) of which the foundation ha	is a 10% or greater intere	st.	to an equally large pure	ion of the ownership of a p	artiici əriip vi
None	-				
2 Information Regarding Contribu	tion, Grant, Gift, Loan	Scholarship, etc., F	Programs:		
Check here ► X if the foundation				not accept unsolicited requ	iests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone nun	nber or e-mail address of	the person to whom app	lications should be addre	essed:	<del>, , , , , , , , , , , , , , , , , , , </del>
<b>b</b> The form in which applications should	be submitted and informa	ition and materials they	should include;		
c Any submission deadlines:	<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·		· · · ·
d Any restrictions or limitations on award	ls such as hy gengraphic	al areas, charitable fields	kinds of institutions or	other factors:	
4 7 my 100m of or militations of aware	o, soon as by geographic	ar arous, onarnable licius	, ands of monutions, Of	outer factors,	

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
· _ · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient	<u> </u>	<del></del>
a Paid during the year				
Theatre Aspen	None	501(C)(3)	To Further Tax Exempt	
110 E. Hallam St. # 103 Aspen, CO 81611			Purpose.	35870
Rocky Mountain Big Horn Society	None	501(C)(3)	To Further Tax Exempt	
PO Box 8320 Denver, CO 80201	None	501(0)(3)	Purpose.	1200
National Jewish Health 1400 Jackson St.	None	501(C)(3)	To Further Tax Exempt Purpose.	
Denver, CO 80206				1000
Judaism Your Way 600 Grant St. #308	None	501(C)(3)	To Further Tax Exempt Purpose.	
Denver, CO 80203				3600
Jewish National Fund 7120 Hayvenhurst Ave. Van Nuys, CA 91406	None	501(C)(3)	To Further Tax Exempt Purpose.	500
	ontinuation shee	et(s)	▶ 3a	58250
b Approved for future payment				
None				
Total			<b>▶</b> 3b	

ator groce amounte unloce othonuca indicated	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	
nter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt
1 Program service revenue:	code		code	Amount	function income
a	_	<del> </del>			
b	_		+		
c	_		1		
d	_ <del>    _</del>		+		<del></del>
e	_	· · · · · · · · · · · · · · · · · · ·	$\bot$		
f	_				
g Fees and contracts from government agencies			<del>                                     </del>		
2 Membership dues and assessments			$\perp$		
Interest on savings and temporary cash					
investments			14	3.	
Dividends and interest from securities			14	430.	
Net rental income or (loss) from real estate.			$\perp$		
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
7 Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
C					
d					
е					
2 Subtotal. Add columns (b), (d), and (e)		0 .	•	433.	
3 Total. Add line 12, columns (b), (d), and (e)		•		13	43
ee worksheet in line 13 instructions to verify calculations	S.)				
Part XVI-B Relationship of Activitie	s to the Accom	plishment of E	xempt P	urposes	-
ine No. Explain below how each activity for which i	income is reported in co	olumn (e) of Part XVI-	A contribute	1 importantly to the accomp	ulishment of
▼ the foundation's exempt purposes (other to	han by providing funds	for such purposes).		p	
	<del></del>				
		<del></del>			

623621 11-23-16

Part XVII	Information Re Exempt Organ		sfers To	and Transa	ctions ar	nd Relations	hips With Nonc	haritable	е	2
1 Did the c	organization directly or indi		of the following	ng with any other	organization	described in section	on 501(c) of		Yes	No
	e (other than section 501(c								$\vdash$	
	s from the reporting found							]		
(1) Cash										Х
(2) Other assets										X
<b>b</b> Other tra								1a(2)		<del></del> -
	es of assets to a noncharita	ible evemnt organiza	tion					1b(1)		х
	chases of assets from a no	•						1b(2)		X
٠,	tal of facilities, equipment,	•	nyamzanom					1b(3)	_	X
								1b(4)		X
	nbursement arrangements	1						1b(5)	•	X
	ns or loan guarantees							<del>- ` '</del>	_	X
	formance of services or me	•	-					1b(6)		X
•	of facilities, equipment, ma	•			N - 6 - 14 - 1 - 1			1c		
	swer to any of the above is								sets,	
	es given by the reporting f				market value	in any transaction	or snaring arrangeme	nt, snow in		
	(d) the value of the goods,					T (4)				
(a)Line no	(b) Amount involved	(c) Name of		e exempt organi	zation	(0) Description	of transfers, transactions,	and sharing ar	rangeme	nts
			N/A			<u> </u>				
				<u> </u>						
						ļ				
				<u> </u>						
							_			
				,					-	
ın sectio	undation directly or indirec n 501(c) of the Code (othe	r than section 501(c)			empt organiza	ations described		Yes	X	No
D If "Yes,"	complete the following sch (a) Name of org		<del></del>	(b) Type of or	nanization		(a) Department of relati	ionchin		
_		Janizalion		(b) Type of or	yanızatıdı		(c) Description of relati	опѕпр		
	N/A						<del></del>			
		<del></del>		ļ						
				ļ			<del> </del>			
				ļ						
	- 17.1			l						
Here	er penalties of perjury, I declare belief it is true correct, and cor	J. Spu	s return, including the separer (other that	in taxpayer) is base	chedules and side on all informa	Keside	has any knowledge	May the IRS return with the shown below Yes	e prepar v (see ins	er
	gnature of officer or trustee			Date		Title	AL 1			
	Print/Type preparer's na	ame	Preparer's s	signature	7	Date		ΓIN		
					İ	ļ.	self- employed			
Paid										
Preparer							Firm's EIN ▶	· · · · · · · · · · · · · · · · · · ·		
Use Only	L _									
Firm's address   Phone no										

### 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, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

**2016** 

Name of the organization

**Employer identification number** 

	Sturm Zachary Family Foundation	52-2098180								
Organization type	(check one)									
Filers of:	Section:									
Form 990 or 990-EZ 501(c)( ) (enter number) organization										
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	ation								
	527 political organization									
Form 990-PF X 501(c)(3) exempt private foundation										
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ı								
	501(c)(3) taxable private foundation									
Note: Only a section	nization is covered by the <b>General Rule</b> or a <b>Special Rule.</b> on 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See instructions								
General Rule										
	ganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution from any one contributor. Complete Parts I and II. See instructions for determining a c									
Special Rules										
sections 5 any one co	ganization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 <sup>t</sup> 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, lir ontributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of a 990-EZ, line 1. Complete Parts I and II	ne 13, 16a, or 16b, and that received from								
year, total	ganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive to the following section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive to contributions of more than \$1,000 exclusively for religious, charitable, scientific, literal nation of cruelty to children or animals. Complete Parts I, II, and III									
year, contr is checked purpose [	ganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receivable to the section of the contributions exclusively for religious, charitable, etc., purposes, but no such contributions d, enter here the total contributions that were received during the year for an exclusive Don't complete any of the parts unless the <b>General Rule</b> applies to this organization to charitable, etc., contributions totaling \$5,000 or more during the year	s totaled more than \$1,000 If this box ely religious, charitable, etc.,								
but it must answer	ization that isn't covered by the General Rule and/or the Special Rules doesn't file Sch "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 EZ n't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)									

LHA 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

Employer identification number

## Sturm Zachary Family Foundation

52-2098180

Part I	Contributors (See instructions) Use duplicate copies of Part I in	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Melanie L. Sturm P.O. Box 410 Aspen, CO 81612	\$55000.	Person X 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)
(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
c23452 10-1		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

52-2098180

artll N	loncash Property (See instructions) Use duplicate copies of Pa	art II if additional space is needed.	
	, 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		<del></del>
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	
		\$	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
<del>-</del>			<del> </del>
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_   _			
-		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		_	
_   _		\ \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	
-   -			
153 10-18-16		\$	990, 990-EZ, or 990-PF)

art III	the year from any one contributor. Complete	tributions to organizations described in columns (a) through (e) and the following	n section 501(c)(7), (8), or (10) that total more than \$1,000 h				
	completing Part III, enter the total of exclusively religiou	is, charitable, etc., contributions of \$1,000 or le	ess for the year (Enter this info once ) \$				
No.	Use duplicate copies of Part III if addition	al space is needed					
om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
] -							
		(e) Transfer of gift					
	Transferee's name, address, a	Relationship of transferor to transferee					
-	<del></del>						
) No. rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
art I	(2), 1, 1, 1, 2, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	(0,000 0.83.					
] :							
.							
-		(e) Transfer of gift					
	(e) Transfer of gift						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
-							
) No.		<u> </u>					
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
[ ·							
Ĺ							
	(e) Transfer of gift						
L	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
Γ.							
] -		————					
) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I			<del></del>				
		<u> </u>					
	(e) Transfer of gift						
	<b>-</b>		Delete a bio add				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
		<del></del>					

Form 990-PF Intere	est on Savings	s and Tempor	ary	Cash	Inv	estmen	nts St	atement	1
Source		(a) Revenue Per Book		Net	Inv	b) restmer come		(c) Adjusted Wet Incom	e
ANB Bank			3.			3	3.		
Total to Part I, la	ine 3		3.			3	3.	<del></del>	===
Form 990-PF	Dividends a	and Interest	fro	m Se	curi	ties	St	atement	2
Source	Gross Amount	Capital Gains Dividends	Re	(a) venue Bool			vest-	(c) Adjust Net Inc	
	430.	0.		4	30.		430.		
Century Link	430.								
To Part I, line 4	430.	0.		4:	30.		430.		
To Part I, line 4		0.	or			ances	<del></del>	atement	3
To Part I, line 4	430.	0.	or			ances	<del></del>	atement	3
To Part I, line 4 Form 990-PF Other	430.	0. n Net Assets	or			ances	<del></del>	Amount	3
To Part I, line 4  Form 990-PF Other  Description	430.  r Increases increase	0. n Net Assets tments	or			ances	<del></del>	Amount	
Form 990-PF Other  Description  Unrealized Gain (Lo	430.  r Increases increase	0. n Net Assets tments		Fund		ances	St	Amount	09.
To Part I, line 4  Form 990-PF Other  Description  Unrealized Gain (Lo	430.  r Increases increase	0. n Net Assets tments line 3		Fund	Bal	ances	St	Amount 7	09.
To Part I, line 4  Form 990-PF Other  Description  Unrealized Gain (Lo Total to Form 990-PF	430.  r Increases in oss) on Invest	0. n Net Assets tments line 3		Fund	Bal		St Fa	Amount 7 7 catement air Marke Value 252	09. 09. 4

Name and address (home or business)  any fubulation infancior of substantial contributor of substantia	3 Grants and Contributions Paid During the	<del></del>	<del></del>		
Name and address (nome or business)  or substantial contributor recipient  None  501(C)(3)  Fo Further Tax Exempt Purpose.  1  Chabad-JCC  Chabad-JCC  135 W. Maint Street Aspen, C0 81611  Central Jewish Congregation - St.  None  501(C)(3)  To Further Tax Exempt Purpose.  None  Aspen AV8R Program  None  501(C)(3)  To Further Tax Exempt Purpose.  None  501(C)(3)  To Further Tax Exempt Purpose.  None  501(C)(3)  To Further Tax Exempt Purpose.		show any relationship to		Purpose of grant or contribution	Amount
Purpose.  1 200 S. Dahlia St. #300  Penver, CO 80246  None  501(C)(3)  To Further Tax Exempt Purpose.  12 20 S. Maint Street  AVPD Benevolent Fund  120 E Hopkins Ave  120 S. Hopkins Ave  120 S. Hopkins Ave  121 Sapen, CO 81611  None  122 Sapen, CO 81611  None  133 Sapen AV8R Program  144 Sapen, CO 81611  None  1501(C)(3)  150 Further Tax Exempt Purpose.  1501(C)(3)  150 Further Tax Exempt Purpose.  164 Sapen, CO 81611  None  1501(C)(3)  150 Further Tax Exempt Purpose.  165 Sapen, CO 81611  None  1501(C)(3)  150 Further Tax Exempt Purpose.  165 Sapen, CO 81611  None  1501(C)(3)  150 Further Tax Exempt Purpose.  165 Sapen, CO 81611  None  165 Sapen, CO 81611	Name and address (home or business)	or substantial contributor			
Denver, CO 80246  Purpose.  1  Chabad-JCC A35 W. Maint Street Aspen, CO 81611  Central Jewish Congregation - St. Louis 5020 Waterman Blvd. St. Louis, MO 63108  AVPD Benevolent Fund A20 E Hopkins Ave Aspen, CO 81611  Aspen AV8R Program Purpose  None  S01(C)(3)  To Further Tax Exempt Purpose.  American Heart Association None  S01(C)(3)  To Further Tax Exempt Purpose.  American Heart Association None  S01(C)(3)  To Further Tax Exempt Purpose.					
Chabad-JCC A35 W. Maint Street Aspen, CO 81611  Central Jewish Congregation - St. Louis Solu Waterman Blvd, St. Louis, MO 63108  AVPD Benevolent Fund Aspen, CO 81611  Aspen, CO 81611  Aspen, CO 81611  Aspen AV8R Program O235 High School Road Aspen, CO 81611  American Heart Association American Heart Association Anne Construction None  501(C)(3)  To Further Tax Exempt Purpose.  501(C)(3)  To Further Tax Exempt Purpose.  For Further Tax Exempt Purpose.  To Further Tax Exempt Purpose.		None	501(C)(3)		
Chabad-JCC  435 W. Maint Street Aspen, CO 81611  Central Jewish Congregation - St. Louis 5020 Waterman Blvd. St. Louis, MO 63108  AVPD Benevolent Fund 420 E Hopkins Ave Aspen, CO 81611  Aspen AV8R Program 0235 High School Road Appen, CO 81611  American Heart Association 7272 Greenville Ave  None  501(C)(3)  To Further Tax Exempt Purpose.  501(C)(3)  To Further Tax Exempt Purpose.  To Further Tax Exempt Purpose.				Purpose.	
Aspen, CO 81611  Central Jewish Congregation - St. Louis 5020 Waterman Blvd. St. Louis, MO 63108  AVFD Benevolent Fund 420 E Hopkins Ave Aspen, CO 81611  Aspen AV8R Program 0235 High School Road Aspen, CO 81611  American Heart Association None  Dol(C)(3) Forurther Tax Exempt Purpose.  Furpose.  Forurther Tax Exempt Purpose.  Forurther Tax Exempt Purpose.  Forurther Tax Exempt Purpose.  Forurther Tax Exempt Purpose.	Denver, CO 80246		-	1	1000
Aspen, CO 81611  Central Jewish Congregation - St. Louis 5020 Waterman Blvd. St. Louis, MO 63108  AVFD Benevolent Fund 420 E Hopkins Ave Aspen, CO 81611  Aspen AV8R Program 0235 High School Road Aspen, CO 81611  American Heart Association None  Dol(C)(3) Forurther Tax Exempt Purpose.  Furpose.  Forurther Tax Exempt Purpose.  Forurther Tax Exempt Purpose.  Forurther Tax Exempt Purpose.  Forurther Tax Exempt Purpose.	Chahad ICC	None	501(C)(3)	To Further Tay Evempt	
Aspen, CO 81611  Central Jewish Congregation - St. Louis 5020 Waterman Blvd. St. Louis, MO 63108  AVFD Benevolent Fund 420 E Hopkins Ave Aspen, CO 81611  Aspen AV8R Program 0235 High School Road Aspen, CO 81611  American Heart Association None  501(C)(3) To Further Tax Exempt Purpose.  For Further Tax Exempt Purpose.  For Further Tax Exempt Purpose.  For Further Tax Exempt Purpose.  For Further Tax Exempt Purpose.		None	501(0/(3/	1	
Central Jewish Congregation - St.  None  501(C)(3)  To Further Tax Exempt Purpose.  8020 Waterman Blvd.  St. Louis, MO 63108  AVFD Benevolent Fund  420 E Hopkins Ave Aspen, CO 81611  Aspen AV8R Program  None  501(C)(3)  To Further Tax Exempt Purpose.  801(C)(3)  To Further Tax Exempt Purpose.  American Heart Association  None  501(C)(3)  To Further Tax Exempt Purpose.				ruipose.	460
Louis 5020 Waterman Blvd. St. Louis, MO 63108  AVFD Benevolent Fund AVFD Benevolent Fund ASpen, CO 81611  Aspen, CO 81611  Aspen AV8R Program None  0235 High School Road Aspen, CO 81611  American Heart Association None  501(C)(3)  To Further Tax Exempt Purpose.  Furpose.  To Further Tax Exempt Purpose.	Aspen, CO 81811				
St. Louis, MO 63108  AVPD Benevolent Fund Ave Aspen, CO 81611  Aspen AV8R Program 0235 High School Road Aspen, CO 81611  American Heart Association 7272 Greenville Ave  None 501(C)(3)  To Further Tax Exempt Furpose.  501(C)(3)  To Further Tax Exempt Furpose.	Central Jewish Congregation - St.	None	501(C)(3)	To Further Tax Exempt	
AVPD Benevolent Fund AVPD Benevolent Fund ASPEN, CO 81611  Aspen AV8R Program O235 High School Road Aspen, CO 81611  American Heart Association None  501(C)(3)  To Further Tax Exempt Purpose.  For Further Tax Exempt Furpose.  For Further Tax Exempt Furpose.	Louis		1	Purpose.	
Aspen, CO 81611  Aspen AV8R Program  O235 High School Road Aspen, CO 81611  American Heart Association  None  Durpose.  Purpose.  Further Tax Exempt  Purpose.  Folician Fourther Tax Exempt  Purpose.	5020 Waterman Blvd.				
Aspen, CO 81611  Aspen AV8R Program  O235 High School Road Aspen, CO 81611  American Heart Association  None  Durpose.  Purpose.  Further Tax Exempt  Purpose.  Folician Fourther Tax Exempt  Purpose.	St. Louis, MO 63108				18
Aspen AV8R Program None  O235 High School Road Aspen, CO 81611  American Heart Association None  None  Durpose.  Purpose.  Purpose.  For Further Tax Exempt Purpose.  For Further Tax Exempt Purpose.					
Aspen, CO 81611  Aspen AV8R Program None  501(C)(3) To Further Tax Exempt Purpose.  American Heart Association None  501(C)(3) To Further Tax Exempt Purpose.	AVFD Benevolent Fund	None	501(C)(3)	To Further Tax Exempt	
0235 High School Road Aspen, CO 81611  American Heart Association None  501(C)(3)  To Further Tax Exempt Purpose.	420 E Hopkins Ave			Purpose.	
0235 High School Road Aspen, CO 81611  American Heart Association None 501(C)(3) To Further Tax Exempt Purpose.	Aspen, CO 81611				70
0235 High School Road Aspen, CO 81611  American Heart Association None 501(C)(3) To Further Tax Exempt Purpose.					
American Heart Association  None  501(C)(3)  To Further Tax Exempt Purpose.	Aspen AV8R Program	None	501(C)(3)	To Further Tax Exempt	
	0235 High School Road			Purpose.	
7272 Greenville Ave	Aspen, CO 81611				5(
7272 Greenville Ave					
		None	501(C)(3)	_	
Dallas, TX 75231				Purpose.	_
	Dallas, TX 75231	· <del> </del>	<u> </u>		10
Total from continuation sheets	· · · · · · · · · · · · · · · · · · ·				160