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Form **990-PF** Department of the Treasury

EXTENDED TO NOVEMBER 15, 2017 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

For calendar year 2016 or tax year beginning DEC	20, 2016	, and ending	DEC 31, 2016	
Name of foundation			A Employer identification	number
Name of the second				
ZEPPELIN FAMILY FOUNDATION			81-4744210	
Number and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
3455 RINGSBY COURT		100	303-573-078	81
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is pe	nding, check here
DENVER, CO 80216				•
G Check all that apply X Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here
Final return	Amended return			
Address change	Name change		2 Foreign organizations mee check here and attach cor	eting the 85% test, inputation
H Check type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation stat	us was terminated
	Other taxable private founda	tion	under section 507(b)(1)(
I Fair market value of all assets at end of year J Accounts	ng method: X Cash	Accrual	F If the foundation is in a 6	60-month termination
(from Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)(
▶\$ 435,000 • (Part I, colu	mn (d) must be on cash b	pasis)		
Part 1 Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
1 Contributions, gifts, grants, etc., received	500,000.		N/A	, ,
2 Check If the foundation is not required to attach Sch. B			Α	•
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)			,	
6a Net gain or (loss) from sale of assets not on line 10		*		
Gross sales price for all assets on line 6a		<u> </u>	,	
Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Not short-term capital gain		0.		
8 Net short-term capital gain				ý.
9 Income modifications Gross sales less returns		· · · · · · · · · · · · · · · · · · ·		
10a and allowances		*		
b Less Cost of goods sold	,		, , , , , , , , , , , , , , , , , , ,	
c Gross profit or (loss)				
11 Other income	F00 000	0.		
12 Total. Add lines 1 through 11	500,000.	0.		0.
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
\$ 16a Legal-fees b Accounting ResCEIVED				
b Accounting ReECEIVED				
c Other professional fees			-	
9 17 Interest OCT 1 6 2017				
17 Interest 18 Taxes OCT 16 2017 19 Depreciation and depletion 20 Occupand GDEN IIT				;
20 Occupand GOEN IIT				
21 Travel; conferences; and meetings				
22 Printing and publications				
og Other cyneness				
24 Total operating and administrative			-	
24 Total operating and administrative expenses. Add lines 13 through 23	0.	0.		_0.
25 Contributions, gifts, grants paid	65,000.			65,000.
26 Total expenses and disbursements.	·			
Add lines 24 and 25	65,000.	0.		65,000.
27 Subtract line 26 from line 12;				
Excess of revenue over expenses and disbursements	435,000.			
b Net investment income (if negative, enter -0-)		0.		
c Adjusted net income (if negative, enter -0-)			N/A	
623501 11-23-16 LHA For Paperwork Reduction Act Notice	e, see instructions.		17	Form 990-PF (2016)

<u>_</u>	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		435,000.	435,000.
	2	Savings and temporary cash investments		 	
	3	Accounts receivable			
	Ì	Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
)	Less: allowance for doubtful accounts			·
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	1	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	1	Investments - corporate bonds			
	ı	Investments - land, buildings, and equipment basis			1
		Less accumulated depreciation	man hayang gal dippenaga garancada district di sasari sasarinsa at h haafiirit. James	Annual to the first section to the first transmitted of the	and an an experimental major to a primarile to these means of layers should be result.
	12	Investments - mortgage loans			
	13	Investments - other			
	1	Land, buildings, and equipment: basis			,
	١	Less accumulated depreciation	And a state of the second	eren harmet producer dan n'Arab a del da n	the server a more and a beauty object on the
	15	Other assets (describe			
	1	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	0.	435,000.	435,000.
_	17	Accounts payable and accrued expenses			· · · · · · · · · · · · · · · · · · ·
	18	Grants payable			
	19	Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
Ξq	1	Mortgages and other notes payable			,
<u>a</u>		Other liabilities (describe			, ,
					,
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			1
	1	and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
Juc	25	Temporarily restricted			
Net Assets or Fund Balan	26	Permanently restricted			*, *
P		Foundations that do not follow SFAS 117, check here			,
Fu	ļ	and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	,
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	435,000.	,
et	30	Total net assets or fund balances	0.	435,000.	
Z					
	31	Total liabilities and net assets/fund balances	0.	435,000.	
_			alances		
_	art	III Analysis of Changes in Not Assets of Table b			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	0.
2	Enter	amount from Part I, line 27a		2	435,000.

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		Ţ	
	(must agree with end-of-year figure reported on prior year's return)	1	(0.
2	Enter amount from Part I, line 27a	2	435,000	0.
	Other increases not included in line 2 (itemize)	3	(0.
	Add lines 1, 2, and 3	4	435,000	0.
5	Decreases not included in line 2 (itemize)	5		Ō.
-	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	435,000	Ō.
_				

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See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

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Enter qualifying distributions from Part XII, line 4

7 Add lines 5 and 6

_	m 990-PF (2016) ZEPPELIN FAMILY FOUNDATION art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	81- 948 -	4744 see in	21	0 Ictio	Page 4
1	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	T	T			113)
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1				
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	ļ			0.
	of Part I, line 27b	 	 			
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		İ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			·	0.
3		3				0.
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				0.
6	Credits/Payments:					
	a 2016 estimated tax payments and 2015 overpayment credited to 2016		l			
	b Exempt foreign organizations - tax withheld at source 6b		1			
	c Tax paid with application for extension of time to file (Form 8868)		l			
	d Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7		******		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				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11		11				
	art VII-A Statements Regarding Activities					
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in			Yes	No
	any political campaign?		ĺ	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or				
	distributed by the foundation in connection with the activities				1	
	Did the foundation file Form 1120-POL for this year?		- 1	10		X
(Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
_	(1) On the foundation. ► \$ (2) On foundation managers. ► \$		j		1	Ι.
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		I			
9	managers. > \$0.		- 1	···		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ļ	2		X
2	If "Yes," attach a detailed description of the activities					,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		j			
40	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		1	_3_		X
∓a h	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?			4a		X
5		N/	'A	4b_		
J	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		Ļ	5		X
6	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					1
•	By language in the governing instrument, or		1		'	
						1 :
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state is remain in the governing instrument?	aw	-			
7			 -	6	X	<u> </u>
	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	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) CO					1
h					l	i
J	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_			l
9	of each state as required by General Instruction G? If "No," attach explanation		L	8b	Х	
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend year 2016 or the tayable year beginning in 2016 (see instructions for Best VIVII).	iar]
10	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		, -	9		<u>X</u> _
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	ГМТ	1	10	X	
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orm 990-PF (2016) ZEPPELIN FAMILY FOUNDATION			81-47442	10 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	nued)	
5a During the year did the foundation pay or incur any amount to:				1 1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	, ,,		es X No	l i
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			1)
any voter registration drive?		Y	es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1 1
4945(d)(4)(A)? (see instructions)		Y	es 🗓 No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		} }
the prevention of cruelty to children or animals?		Y	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	<u> </u>	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ined		
expenditure responsibility for the grant?	I.	1/A 🗀 y	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 4945	-5(d)	_ 		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	` '			
a personal benefit contract?	•	Y	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		——— I——	6b X
If "Yes" to 6b, file Form 8870			F	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Truste		nagers, Highly		···
Paid Employees, and Contractors	-,	g,g,		
List all officers, directors, trustees, foundation managers and their of	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deterred compensation	account, other allowances
MICKEY ZEPPELIN	DIRECTOR, CHA		Compensation	unowanees
3455 RINGSBY CT., NO. 100	7211202011, 0121	T]	
DENVER, CO 80216	1.00	0.	0.1	0.
	DIRECTOR, SEC			
3455 RINGSBY CT., NO. 100	Princeron, DEC	TREATED]`	
DENVER, CO 80216	1.00	0.	l o.l	0.
MANUALLY CO OUDIO	1.00	 	 	
			i i	
			1	
		 	 	
		1		
		1		
Compensation of five highest-paid employees (other than those incl	luded on line 1) If none	enter "NONE "	<u> </u>	
Compensation of the inglicat paid employees (outer than those the	(b) Title, and average	I IIII	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans (account, other
NONE	devoted to position	 	compensation	allowances
NONE		,		
		 		
			,	
			 	
		}		
		<u> </u>		
		<u> </u>		
		<u> </u>		
		<u> </u>	<u> </u>	
otal number of other employees paid over \$50,000				0
· · · -			Form !	990-PF (2016)

Pairt VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	31-4/44	ZIU Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	e	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part X-A: Summary of Direct Charitable Activities	<u> </u>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		
3		-
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments See instructions.		
3		
		
Total. Add lines 1 through 3	Fori	0 • n 990-PF (2016)

Rart Minimum Investment Return (All domestic foundations must complete this part	Foreign foundations, see	e instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a Average monthly fair market value of securities	1a	435,000.
b Average of monthly cash balances	1b	
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	435,000.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	435,000.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,525.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	428,475.
6 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERI	OD 6	704.
Part XI 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	704.
2a Tax on investment income for 2016 from Part VI, line 5	الروان ال	
b Income tax for 2016. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2¢	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	704.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	704.
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	704.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	~~~	
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	65,000.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:	and the said	
a Suitability test (prior IRS approval required)		
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	65,000.
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	65,000.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	ne foundation qualifies for the	section
4940(e) reduction of tax in those years.		

Part XIII Undistributed Income	FAMILY FOUNDAT		81-	4744210 P
	(a)	(h)		
1 Distributable amount for 2016 from Part XI,	Corpus	(b) Years prior to 2015	(c) 2015	(d)
line 7			2015	2016
2 Undistributed income, if any, as of the end of 2016			1	
a Enter amount for 2015 only				70
b Total for prior years:				
· · · · · · · · · · · · · · · · · · ·			0.	
3 Excess distributions carryover, if any, to 2016:		0.	1	
a From 2011				
b From 2012	1			
c From 2013	1	l l		
d From 2014		1	1	
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from	0.			
Part XII, line 4: ►\$ 65 000	1	· T		
a Applied to 2015, but not more than line 20				
Applied to undistributed income of prior			0.	
years (Election required - see instructions)	_		<u> </u>	
c Treated as distributions out of corpus		0.		
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus	64,296.			704
(If an amount appears	0.			704.
1				
Enter the net total of each column as indicated below:	* *			<u> </u>
maicated belom:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	64,296.		1	
b Prior years' undistributed income. Subtract line 4b from line 2b		· · · · · · · · · · · · · · · · · · ·		,
Enter the amount of organia		0.	,	
unusulullen income for which		U.		
deficiency has been issued, or on which	*			
the section 4942(a) tax has been previously assessed	*			
Subtract line 6c from line 6b. Taxable		0.		<i>t</i>
amount - see instructions	~			
Undistributed income for 2015. Subtract line		0.		
4a from line 2a. Taxable amount - see instr.				
Unustributed income for 2016 Subtract				
ines 4d and 5 from line 1. This amount must			0.	
or distributed in 2017				
Amounts treated as distributions out of			1	
orpus to satisfy requirements imposed by	-			0.
ection 1/0(b)(1)(F) or 4942(a)(3) (Election	1	1		
ray be required - see instructions)		1		į.
xcess distributions carryover from 2011	0.			İ
or applied on line 5 or line 7				
cess distributions carryover to 2017	0.			
Jouract lines 7 and 8 from line 62	54 200			
ialysis of line 9:	64,296.		1	-
cess from 2012	1			
cess from 2013				
Cess from 2014				ĺ
cess from 2015				j
ess from 2016 64,296.	1	1	}	į

art XIV Private Operating For	inuations (see in	structions and Part V	II-A, question 9)	N/A	
a If the foundation has received a ruling or d	etermination letter tha	t it is a private operating			
foundation, and the ruling is effective for 2			>		
b Check box to indicate whether the foundat			in section	4942(J)(3) or	4942(J)(5)
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			ļ		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not		<u> </u>			
used directly for active conduct of			1		
exempt activities			j		
e Qualifying distributions made directly				· -	
for active conduct of exempt activities.			[
Subtract line 2d from line 2c			İ		
Complete 3a, b, or c for the				'	
alternative test relied upon:		}	}		
a "Assets" alternative test - enter: (1) Value of all assets					
``					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			ļ. <u> —</u>		
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,			1		
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 Infor			if the foundati	on had \$5,000 c	or more in assets
at any time during th	e year-see insti	ructions.)			
Information Regarding Foundation	Managers:				
a List any managers of the foundation who			tributions received by	the foundation before	the close of any tax
year (but only if they have contributed mo	re than \$5,000). (See	section 507(d)(2).)			
YLE ZEPPELIN					
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large p	ortion of the ownershi	p of a partnership or
ONE					
Information Regarding Contributio	n, Grant, Gift, Loan	, Scholarship, etc., F	rograms:		
Check here X if the foundation on	ly makes contributions	to preselected charitabl	e organizations and do		
the foundation makes gifts, grants, etc. (s					o, c, and d.
a The name, address, and telephone number	er or e-mail address of	the person to whom app	dications should be ad	ldressed [.]	
b The form in which applications should be	submitted and informa	ation and materials they	should include:		<u> </u>
c Any submission deadlines:					······································
		<u></u>			

Grants and Contributions Paid During the		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		
a Paid during the year		II.		
		j		
ARTHJUSTICE	N/A	501(C)(3)	GENERAL SUPPORT	
0 CALIFORNIA ST., STE. 500				
AN FRANCISCO, CA 94111		 		10,0
OVERS OF FRESH IDEAS ARTIST	N/A	501(C)(3)	GENERAL SUPPORT	
COALITION 22 W. 6TH AVE.				
DENVER, CO 80204		<u> </u>		10,0
MERCY HOUSING, INC	N/A	501(C)(3)	GENERAL SUPPORT	
1999 BROADWAY				** -
DENVER, CO 80202		 	 	10,00
PROJECT VOYCE	N/A	501(C)(3)	GENERAL SUPPORT	
2900 N. DOWNING ST., STE. A		İ		
DENVER, CO 80205		ļ -	 	20,0
DUE CIEDOS CLITO ECIMOSEITON	N/A	501(C)(3)	CENEDAL CHADODA	
THE SIERRA CLUB FOUNDATION B5 2ND ST., STE. 750	N/A		GENERAL SUPPORT	
SAN FRANCISCO, CA 94105				15,00
Total			► 3a	65,00
b Approved for future payment				
NONE				
			ļ	
		}		
Total		L	▶ 3b	

73/11 TA 12	Analysis of	Income	Draduaina	Activition
VVI≐A/I	AIIMIVSIS U	micome	•Proudcina	ACTIVITIES

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income	Exclu	ided by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue.	- code	 			
a	 	 		 	
b	ļ			 	
c	ľ	 	 	 	
d	ľ	 		 -	
e	ļ	 	├	 	
	ļ	 	 	 	
g Fees and contracts from government agencies 2 Membership dues and assessments		 	 		
3 Interest on savings and temporary cash					
investments]		1		
4 Dividends and interest from securities		 	 		
5 Net rental income or (loss) from real estate:	4, 77, 37, 35, 3	1311 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	:	1, 1 1, 1 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	\$25 1 1 1 1 1 T
a Debt-financed property	 		<u> </u>	<u></u>	
b Not debt-financed property		† 			<u> </u>
6 Net rental income or (loss) from personal		 			
property	1	i	l		
7 Other investment income	<u> </u>				
8 Gain or (loss) from sales of assets other		 			
than inventory	Į.				
9 Net income or (loss) from special events		 			
10 Gross profit or (loss) from sales of inventory		 			
11 Other revenue:		†			
a			1		
b					
С					
d	1				
e					
12 Subtotal Add columns (b), (d), and (e)		0.	,	0.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acco	omplishment of Eve	amnt	Purnoses	
relationship of Activities to			- inpu		
Line No. Explain below how each activity for which inco			contrit	outed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than	by providing fu	inds for such purposes).			
					
					
					
					
					
		- 			
				 	
					· · · · · · · · · · · · · · · · · · ·
					
623621 11-23-16					Form 990-PF (2016)

Part(XVII)	Information Re Exempt Organi		and Transactions a	nd Relationships With Nonch	aritable		
1 Did the o	rganization directly or indir	rectly engage in any of the follow	ving with any other organization	on described in section 501(c) of	9.4	Yes	No
		(3) organizations) or in section			, ,	2.3	જોર્ટ .
		ition to a noncharitable exempt			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*	Part C
(1) Cash	, -	·	•		1a(1)		X
(2) Othe					1a(2)		Х
• •	nsactions:				54/2	200	8 5 %
-	s of assets to a noncharitat	ble exempt organization			1b(1)		X
٠,,		ncharitable exempt organization			1b(2)		Х
	tal of facilities, equipment,				1b(3)		Х
• •	nbursement arrangements				1b(4)		X
(5) Loar	ns or loan guarantees				1b(5)		X
• •	-	mbership or fundraising solicita	tions		1b(6)		Х
c Sharing	of facilities, equipment, mai	iling lists, other assets, or paid o	employees		1c		X
				ways show the fair market value of the goo	ds, other asse	ets,	
			• •	e in any transaction or sharing arrangemen		,	
column (other assets, or services receive					
(a) Line no	(b) Amount involved		ble exempt organization	(d) Description of transfers, transactions, a	and sharing arra	ngemen	ts
		N/A	<u>`</u>				
							
							
							
				- 			
				- 			
							
							
							
							
							
							
		 		- 			
							
		<u></u>		-l			
	•	tly affiliated with, or related to, o	• •	zations described	Γ - 1,ν	T	No
	` '	than section 501(c)(3)) or in se	300011 3277		Yes	Δ] NO
b ii Yes, c	complete the following sche	enization	(b) Type of organization	(c) Description of relati	onchin		
(a) Name of organization			(b) Type of Organization	(c) Description of relati	Uliship		
	N/A			 			
 -	 -			 			
			- 				
				 			
Unde	r penalties of perjury, I declare the	hat I have examined this return, includ	ing accompanying schedules and st	atements, and to the best of my knowledge			
Sign and b	pelief, it is true, correct, and com	plete Declaration of preparer (other th	nan taxpayer) is based on all informa	tion of which preparer has any knowledge DIRECTOR,	May the IRS di return with the	preparer	r
Here	149-2	ameli	10/10/17	SEC/TREASURER	shown below (see instr	1' I
Sig	mature of officer or trustee		Date	Title	[<u>4</u> x] 165	<u> </u>	J No.
	Print/Type preparer's na	me Preparer's	s signature	Date Check If PT	IN		
			1 1	self- employed	-		
Paid	KIMBERLY A	RYAN KIM	by the Min	19.77.10	008299	77	
Preparer	Firm's name ► RUB		white has	Firm's EiN ► 43-			
Use Only			Į	THIN SEM P 43	5,5551	- 0	
•		00 16TH STREET	, SUITE 300				
		NVER, CO 80202	,	Phone no. 303-	698-18	883	
	<u> </u>			17 Hono no. 303	Form 990		2016)
						- 1	_0 ,0)

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 ZEPPELIN FAMILY FOUNDATION 81-4744210 Organization type (check one) Filers of: Section: ☐ 501(c)(Form 990 or 990-EZ) (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 private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I. II. and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year 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).

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)

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)

Name of organization

Employer identification number

ZEPPELIN	FAMILY	FOUNDATION

ZEPPE	LIN FAMILY FOUNDATION		81-4744210
Part I	Contributors (See instructions). Use duplicate copies of Part I if additional copies of Part	itional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
1	KYLE ZEPPELIN 3455 RINGSBY COURT, #100 DENVER, CO 80216	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
·		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
			Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) S Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
623452 10-18	3-16	Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number

ZEPPELIN FAMILY FOUNDATION

81-4744210

artill.	Noncash Property (See instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a)		\$	
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
153 10-18-1		Schedule R (Form	990, 990-EZ, or 990-PF) (2

Name of orga	anization			Employer identification number			
	IN FAMILY FOUNDATION			81-4744210			
Part III.	the year from any one contributor. Complete of completing Part III, enter the total of exclusively religious,	plumns (a) through (e) and the folio	wing line entry	c)(7), (8), or (10) that total more than \$1,000 for For organizations			
(a) Nia T	Use duplicate copies of Part III if additiona	space is needed.		(ciner uns uno once)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
-	Transferee's name, address, an	(e) Transfer of gif		nship of transferor to transferee			
(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, address, an	d ZIP + 4	Relationship of transferor to transferee				
(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, address, an	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift (c) Use of			(d) Description of how gift is held			
	(e) Transfer of gift						
-	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee			

623454 10-18-16