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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. For calendar year 2016 or tax year beginning and ending

		4101	idal year 2010 of tax year beginning		, and ci	numy		
			foundation				A Employer identificatio	n number
			ALSKI FAMILY FOUNDATION	•				
			OF THOMAS KOWALSKI				84-139740	4
,			and street (or P O box number if mail is not delivered to street			Room/suite	B Telephone number	
_			6 SOUTH ALTON WAY BLDG.				303-694-40	573
(own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is	pending, check here
_			LEWOOD, CO 80112					
G	U	песк	call that apply: Initial return Final return	Initial return of a fo	ormer public c	narity	D 1. Foreign organization	is, check here
~ ~			Address change	Amended return Name change			Foreign organizations m check here and attach or	neeting the 85% test,
₩ ₩	CI	heck	type of organization: X Section 501(c)(3) ex				1	
ا رہے		•		Other taxable private founda	ation		E If private foundation st under section 507(b)(1	
<u>کی آ</u>	Fai		arket value of all assets at end of year J Accounti		Accr	ual	F If the foundation is in a	
100			· —	her (specify)			under section 507(b)(1	
	<u></u>		1,498,529 . (Part I, colu		basis.)			
	<u>а</u>	<u>rt l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for charitable purposes
.) [] —			necessarily equal the amounts in column (a))	expenses per books	Inco	ome	income	(cash basis only)
		1	Contributions, gifts, grants, etc., received	175,500.			N/A	<u> </u>
57		2	Check Interest on savings and temporary		<u> </u>			
Ž	}	3	cash investments	3,860.		3,860.		STATEMENT 1
צ		4	Dividends and interest from securities	32,092.	3	2,092.		STATEMENT 2
			Gross rents	-				
			Net rental income or (loss)	<21,674.				
	ē		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 37,500.	<41,074.				
	Revenue	ь 7	assets on line 6a 37,300 • Capital gain net income (from Part IV, line 2)			0.		
1	۳)	8	Net short-term capital gain					
		9	Income modifications		-			
		10a	Gross sales less returns and allowances					
			Less Cost of goods sold					
	j	C	Gross profit or (loss)					
		11	Other income	1,093.		<u>1,093.</u>		STATEMENT 3
	\dashv	12	Total Add lines 1 through 11	190,871.	3	<u>7,045.</u>	ļ	
	ļ	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
]	14	Other employee salaries and wages					
			Pension plans, employee benefits	<u> </u>				
	ž	IDa		1,200.		600.	 	600.
	×		Accounting fees: MAY & STMT 4 Q Other professional fees	1,200.				1 000.
	9	17	Interest					
	<u></u>	18	Taxes STMT 5	949.		0.		0.
	힐	19	Depreciation and depletion					
	直	20	Occupancy					
	₹	21	Travel, conferences, and meetings					<u> </u>
	틺	22	Printing and publications	<u> </u>				
	ē	23	Other expenses STMT 6	10.		0.		0.
	Operating and Administrative Expenses	24	Total operating and administrative					600
	8		expenses Add lines 13 through 23	2,159.		600.	<u> </u>	600.
		25	Contributions, gifts, grants paid	96,400.				96,400.
	- }	26	Total expenses and disbursements.	00 EEO		600.		97,000.
-	+	27	Add lines 24 and 25 Subtract line 26 from line 12:	98,559.		600.	 	91,000.
	-		Subtract life 20 from life 12 Excess of revenue over expenses and disbursements	92,312.			1	
			Net investment income (if negative, enter -0-)	72,312.	3	6,445.		
	-		Adjusted net income (if negative, enter -0-)			<u> </u>	N/A	

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KOWALSKI FAMILY FOUNDATION

	990-PF (2016) C/O OF THOMAS KOWALSKI	Beginning of year	84-: End of	1397404 Page 2
Par	t II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
;	Cash - non-interest-bearing Savings and temporary cash investments	453,444.	367,226.	367,226.
	Accounts receivable ►			
	Less: allowance for doubtful accounts ► Grants receivable			
	Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable Less: allowance for doubtful accounts			
sset	Inventories for sale or use Prepaid expenses and deferred charges Investments - U.S and state government obligations			
	b Investments - corporate stock STMT 7 c Investments - corporate bonds	803,722.	792,252.	941,303.
1	Less accumulated depreciation			
1:	3 Investments - other STMT 8	0.	190,000.	190,000.
1:	Less accumulated depreciation Cother assets (describe ►)			
- 1	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	1,257,166.	1,349,478.	1,498,529.
1	, , , , , , , , , , , , , , , , , , ,			
Liabilities	Loans from officers, directors, trustees, and other disqualified persons			
Lia 2	2 Other liabilities (describe)			
_ 2		0.	0.	
Ses 2	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Unrestricted			
Assets or Fund Balances	6 Permanently restricted			
or Fund	Foundations that do not follow SFAS 117, check here And complete lines 27 through 31			
ssets o	B Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net A		1,257,166. 1,257,166.	1,349,478. 1,349,478.	
3	1 Total liabilities and net assets/fund balances	1,257,166.	1,349,478.	
Pai	t III Analysis of Changes in Net Assets or Fund Ba	alances 		
	tal net assets or fund balances at beginning of year - Part II, column (a), line 3 iust agree with end-of-year figure reported on prior year's return)	30	1	1,257,166.
	ter amount from Part I, line 27a her increases not included in line 2 (itemize)		3	92,312.
	d lines 1, 2, and 3 creases not included in line 2 (itemize)		5	1,349,478.
<u>6 To</u>	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6_	1,349,478. Form 990-PF (2016

Part IV Capital G	ains and L	osses for Tax on Ir	ivestment	Income						
		kind(s) of property sold (e.g ; or common stock, 200 sh			(b),	How ac - Purcl - Dona	nase i '	c) Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr)
1a SABINE OIL	DEEMED	WORTHLESS					P V	ARI	ous	08/31/16
b 1500 SHARES	OF BAC	CAPITAL TRU	ST VII	I				ARI		08/31/16
C										
_d					<u> </u>					
e										
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		t or other basis xpense of sale			·		ain or (loss (f) minus	
_a				27,73	9.					<27,739. 6,065.
b 37,5	00.			31,43	5.					6,065.
_d										
_ e										
Complete only for assets	showing gain in	column (h) and owned by	the foundation	on 12/31/69			(1) (Gains (C	ol. (h) gaın	n minus
(i) F.M.V as of 12/31/6	9	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			col. (k), but n	ot less tha (from col	ın -0-) or
a		*								<27,739.
b				- `						6,065.
C										
d				 						
e										
_ <u>*</u>			L		<u> </u>					
2 Capital gain net income or	(net capital loss	If gain, also enter If (loss), enter -0				2				<21,674.
	` '	, ((1.555), 5.11.5. 5		,	7	-				\ZI,074.
3 Net short-term capital gain If gain, also enter in Part I,	line 8, column		nd (6):		}				BT / 7	
If (loss), enter -0- in Part I		Section 4940(e) for	Poduood	Tay on Not	· les	3	ont Inco		N/A	<u> </u>
If section 4940(d)(2) applies, Was the foundation liable for If "Yes," the foundation does r Enter the appropriate amo	the section 4942 not qualify under	2 tax on the distributable am	mplete this pa	rt.		•				Yes X No
		T	1311 40110113 501	ore making any c				Ι"		(d)
(a) Base period yea Calendar year (or tax year l		Adjusted qualifying dis		Net value of no		ıtable-			Distril (col. (b) div	bùtión ratio vided by col. (c))
2015			4,389.				<u>2,224.</u>			.051579
2014			0,511.				<u>7,346.</u>			.052370
2013			7,278.	_ 			6,869.			.058683
2012			8,475.	 			1,928.	+		.050650
2011		<u> </u>	3,820.		<u> 1</u>	<u>, 50</u>	<u>2,151.</u>	ļ		.049143
2 Total of line 1, column (d)								2		.262425
3 Average distribution ratio			on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in	existence if les	s than 5 years						3		.052485
4 Enter the net value of none	charitable-use as	ssets for 2016 from Part X,	line 5					4		1,319,826.
5 Multiply line 4 by line 3								5		69,271.
6 Enter 1% of net investmen	it income (1% o	f Part I, line 27b)						6	<u></u>	364.
7 Add lines 5 and 6								7		69,635.
8 Enter qualifying distribution								8	-	97,000.
If line 8 is equal to or grea See the Part VI instruction		heck the box in Part VI, line	1b, and comp	lete that part usin	g a 1º	% tax r	ate.			·

KOWALSKI FAMILY FOUNDATION

Form 990-PF (2016) C/O OF THOMAS KOWALSKI		<u>84-13</u>			Page 4
Part VI Excise Tax Based on Investment Income (Section	4940(a), 4940(b), 4940(e), or	1948 - se	<u>e instru</u>	uctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.				
Date of ruling or determination letter:	if necessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check he		1 1		3	64.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations en	ter 4% of Part I, line 12, col. (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations o		2			0.
3 Add lines 1 and 2	, , , , , , , , , , , , , , , , , , , ,	3		3	64.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of	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		3	64.
6 Credits/Payments:				X	
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a 2,779				
b Exempt foreign organizations - tax withheld at source	6b	1			
c Tax paid with application for extension of time to file (Form 8868)	6c	-			
d Backup withholding erroneously withheld	6d	1			
7 Total credits and payments. Add lines 6a through 6d	00	7		2 7	79.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220	io attached	8		4,1	12.
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	is attached	9			
	ata .			2 1	15.
•	2,415. Refunded	10		4,4	0.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax ► Part VII-A Statements Regarding Activities	Z,415. Retunded	11			<u> </u>
	I la colation ou did it acution at an internal		1	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local	a legislation of did it participate of interven	e in	-	163	
any political campaign?		-10	1a	-	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political i	· · ·	-	1b		
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activi	ties and copies of any materials publis	nea or			
distributed by the foundation in connection with the activities.					٠,,
c Did the foundation file Form 1120-POL for this year?			1c	ļ <u> </u>	<u>X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed duri	-			ļ	
(1) On the foundation. ► \$ (2) On foundation mar		<u>-</u>			
e Enter the reimbursement (if any) paid by the foundation during the year for political ex	xpenditure tax imposed on foundation			ĺ	
managers. ► \$0.				ŀ	1
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					ł
3 Has the foundation made any changes, not previously reported to the IRS, in its gover	·	or			٠,,
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the c	•		3	-	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	he year?	37/3	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	•	N/A	4b		37
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) satis	itied either:		İ		
By language in the governing instrument, or		_			1
By state legislation that effectively amends the governing instrument so that no man	ndatory directions that conflict with the sta	e law			
remain in the governing instrument?			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 X	V	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see inst	tructions) -		-		
<u>CO</u>		<u> </u>			
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			8b	X	_
9 Is the foundation claiming status as a private operating foundation within the meaning		endar			
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "You	· · · · · · · · · · · · · · · · · · ·		9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a	schedule listing their names and addresses		10		X
			Form 99	U-PF	(2016)

KOWALSKI FAMILY FOUNDATION Form 990-PF (2016) C/O OF THOMAS KOWALSKI 84-1397404 Part VII-A 'Statements Regarding Activities (continued) Yes 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 N/A Website address Telephone no. > 303-694-467314 The books are in care of THOMAS R. KOWALSKI Located at ▶ 7006 SOUTH ALTON WAY BLDG. A. CO ZIP+4 ▶80112 CENTENNIAL, 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year 15 16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, Yes securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country

Part VII-B	Statements Regarding Activities for Which Form 4720 May Be Required				
File Form	4720 If any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the	rear did the foundation (either directly or indirectly):				
(1) Engage	in the sale or exchange, or leasing of property with a disqualified person?	Yes X	No	-	
(2) Borrov	money from, lend money to, or otherwise extend credit to (or accept it from)		ŀ		
a dısqı	alified person?	Yes 🗶	No		
(3) Furnisl	goods, services, or facilities to (or accept them from) a disqualified person?	Yes X	No	1	
(4) Pay co	mpensation to, or pay or reimburse the expenses of, a disqualified person?	Yes 🗶	No		
(5) Transf	r any income or assets to a disqualified person (or make any of either available		1		
for the	benefit or use of a disqualified person)?	Yes 🗓	No		
(6) Agree	o pay money or property to a government official? (Exception. Check "No"		į		
if the fe	undation agreed to make a grant to or to employ the official for a period after				
termin	ition of government service, if terminating within 90 days.)	Yes 🗓	No		
b If any answ	er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				1
section 53	1941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N	<u>'A 11</u>)	
Organizatio	ns relying on a current notice regarding disaster assistance check here	▶[
c Did the four	idation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
before the f	rst day of the tax year beginning in 2016?		10		X
2 Taxes on fa	lure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	n			
defined in s	ection 4942(j)(3) or 4942(j)(5)):			ŀ	
a At the end	of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) begins		1		
before 2010		Yes 🗶	No		
lf "Yes," list	the years \blacktriangleright		ŀ		
b Are there a	ly years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre	ect	ļ		
valuation o	assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and atta				
statement -	see instructions.)	N/	'A <u>2</u>)	<u> </u>
c If the provis	ions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
▶					
3a Did the four	idation hold more than a 2% direct or indirect interest in any business enterprise at any time				
during the	ear?	Yes X	No		
	it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons				
	59; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to		1		
of holdings	acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule		_		
Form 472), to determine if the foundation had excess business holdings in 2016)	N/	'A 3	b	

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Х

4a

No

X

No

X

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?

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

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

. KOWALSKI FAMILY FOUNDA	TION			
Form 990-PF (2016) C/O OF THOMAS KOWALSKI	l. F 4700 May D. 1		<u>84-13974</u>	04 Page 6
Part VII-B Statements Regarding Activities for Whic	n Form 4/20 May Be i	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:			[==]	
(1) Carry on propaganda, or otherwise attempt to influence legislation (see			es 🗓 No	
(2) Influence the outcome of any specific public election (see section 4955	5); or to carry on, directly or indir			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purpo	oses?	Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	ation described in section			
4945(d)(4)(A)? (see instructions)		Y6	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literative	ary, or educational purposes, or	for		
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify	under the exceptions described	ın Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see in	structions)?		N/A	ib
Organizations relying on a current notice regarding disaster assistance chec	ck here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	on from the tax because it mainta	ined		
expenditure responsibility for the grant?	I.	I/A 🔲 Ye	s 🔲 No	
If "Yes," attach the statement required by Regulations section 53.4				
6a Did the foundation, during the year, receive any funds, directly or indirectly,	to pay premiums on			
a personal benefit contract?	,	☐ Y6	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?			Sb X
If "Yes" to 6b, file Form 8870.	, a portonar sonem comitati			
7a At any time during the tax year, was the foundation a party to a prohibited to	ay shelter transaction?		s X No	
b If "Yes," did the foundation receive any proceeds or have any net income at		۱۰ لبیسا		7b
Part VIII Information About Officers, Directors, Tru		nagers Highly		
Paid Employees, and Contractors	istees, i ouridation wit	magers, riigin		
1 List all officers, directors, trustees, foundation managers and the	eir compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
THOMAS R KOWALSKI	PRES/TREAS	1 0	00mptm0am0	
7006 SOUTH ALTON WAY BLDG. A				
CENTENNIAL, CO 80112	0.00	0.	0.	0.
RYAN R KOWALSKI	SECRETARY		-	
7006 SOUTH ALTON WAY BLDG. A	BECKETART			
CENTENNIAL, CO 80112	0.00	0.	0.	0.
CENTENNIAL, CO 80112	0.00	·	0.	<u> </u>
	 			
· · · · · · · · · · · · · · · · · · ·				
·				
2 Compensation of five highest-paid employees (other than those	included on line 1). If none,	enter "NONE."	<u> </u>	
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred compensation	account, other allowances
NONE	devoted to position	<u> </u>	Compensation	uno manioso
NONE	 			
		 		
	\dashv			
			-	
		 		
		 		
	\dashv]	
	1	i		

Total number of other employees paid over \$50,000

KOWALSKI FAMILY FOUNDATION

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
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		(c) Compensation
NONE		
		·
Total number of others receiving over \$50,000 for professional services	—	0
Part IX-A Summary of Direct Charitable Activities		
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.	E	xpenses
1N/A		
2		
	_	
3	_	
	_	
4		
4	-	
	\neg	
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		
<u> </u>	\dashv	
	-	
Total. Add lines 1 through 3		0.
	Form	990-PF (2016)

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C/O OF THOMAS KOWALSKI

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	ГТ	
a	Average monthly fair market value of securities	1a	917,734.
	Average of monthly cash balances	1b	422,191.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,339,925.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,339,925.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	20,099.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,319,826.
6	Minimum investment return Enter 5% of line 5	6	65,991.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here	id certair	
1	Minimum investment return from Part X, line 6	1	65,991.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	364.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	65,627.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	65,627.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	65,627.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	97,000.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	97,000.
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	364.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	96,636.
	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

Form **990-PF** (2016)

C/O OF THOMAS KOWALSKI 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,	00,000	704.0 \$710. 10 20 10	2010	
line 7				65,627.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2015 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2016:				-
a From 2011				
b From 2012 1,661.				
c From 2013 12,279.				
d From 2014 4,622.				
e From 2015 3,104.				
f Total of lines 3a through e	21,666.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 97,000.			•	
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	0.			
(Election required - see instructions) d Applied to 2016 distributable amount	U.			65,627.
e Remaining amount distributed out of corpus	31,373.			05,021.
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u> </u>
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c and 4e Subtract line 5	53,039.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	· · · · · · · · · · · · · · · · · · ·	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.	_ ,, ,	
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
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	0.			
may be required - see instructions) 8 Excess distributions carryover from 2011	U•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.	<u></u>			
Subtract lines 7 and 8 from line 6a	53,039.			
O Analysis of line 9:	33,033.			
a Excess from 2012 1,661.				
b Excess from 2013 12,279.				
c Excess from 2014 4,622.				
d Excess from 2015 3, 104.				
e Excess from 2016 31 . 373 .				

KOWALSKI FAMILY FOUNDATION Form 990-PF (2016) C/O OF THOMAS KOWALSKI 84-1397404 Page 10 Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling 4942(j)(3) or 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (e) Total **(b)** 2015 (d) 2013 (a) 2016 (c) 2014 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year 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 Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) THOMAS R KOWALSKI b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\sum \big| \big| \big| \big| if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.

C/O OF THOMAS KOWALSKI

84-1397404

Page 11

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year DENVER RESCUE MISSION PUBLIC CHARITY SOCIAL PO BOX 5206 SOCIAL 10,000. DENVER CO 80217 PUBLIC CHARITY EDUCATION MORGAN ADAMS FOUNDATION 5303 E EVANS AVE 15,000. DENVER, CO 80222 NATHAN YIP FOUNDATION PUBLIC CHARITY EDUCATION EDUCATION 332 N BROADWAY PITMAN, NJ 08071 900, PUBLIC CHARITY MEDICAL NATIONAL JEWISH MEDICAL AND RESEARCH CENTER 1400 JACKSON ST 15,000. DENVER, CO 80206 PUBLIC CHARITY EDUCATION THE DENVER STREET SCHOOL 1567 MARION STREET 5 500. DENVER CO 80218 SEE CONTINUATION SHEET(S) ➤ 3a 96,400. Total b Approved for future payment NONE Total

Form 990-PF (2016)

Page 12

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
a	0000		-		
b			 	-	
c			 	-	
d			1	<u></u>	
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
Investments			14		
4 Dividends and interest from securities			14	32,092.	
5 Net rental income or (loss) from real estate:			ļ		
a Debt-financed property			<u> </u>		
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income			15	1,093.	
8 Gain or (loss) from sales of assets other					
than inventory			18	<21,674.	>
9 Net income or (loss) from special events			ļ		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	<u> </u>				
a					
b			ļ		
c			}		
d					
e				15 251	
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.		15,371.	
13 Total Add line 12, columns (b), (d), and (e)				13	15,3/1.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No Explain below how each activity for which incom			contrib	outed importantly to the accom	plishment of
the foundation's exempt purposes (other than b					
THE KOWALSKI FAMILY FOU					
AND GIFTS TO VARIOUS CH					
COLORADO WITH A VARIETY					
TO HELPING UNDERPRIVILE					
SUBSIDIZING MEDICAL RES	EARCH	AND SUPPORT	OF.	ZOOLOGICAL OR	GANIZATIONS.
					·
		-			
		N			
	,				
					
				 	
					
					
		· · · · · · · · · · · · · · · · · · ·			

Form 990-PF (2	2016) C/O O	F THOMAS	KOWALS	KI		84-1397	404	Page 13
Part XVII			sfers To	and Transactions a	nd Relationsh	nips With Nonchar	itable	· -
4 Did the er	Exempt Organ		of the follower	a with any other organization	an described in contro	20 FO1/a) of	T-	Yes No
	-			ng with any other organization 27, relating to political organ		או סט ו(כ) טו		105 110
	from the reporting founda				124110113			
(1) Cash	, ,	anon to a nononana	onompt of	gameation on			1a(1)	X
(2) Other							1a(2)	X
b Other tran								
(1) Sales	of assets to a noncharital	ble exempt organiza	tion				1b(1)	X
(2) Purc	hases of assets from a no	ncharitable exempt o	organization				1b(2)	X
(3) Renta	al of facilities, equipment,	or other assets					1b(3)	X
(4) Reim	bursement arrangements						1b(4)	X
(5) Loan	s or loan guarantees						1b(5)	X
(6) Perfo	rmance of services or me	mbership or fundrai	sıng solıcıtatı	ons			1b(6)	X
=	f facilities, equipment, ma	=					1c	X
			-	edule Column (b) should alv				ets,
	• •			red less than fair market valu	ie in any transaction	or snaring arrangement, si	now in	
T	the value of the goods,(b) Amount involved				(4) 0			
(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(U) Description	of transfers, transactions, and s	naring arra	angements
			N/A					
								
					 		•	
								-
					-			
		-			-			
					+			
		, , , , , , , , , , , , , , , , , , ,						
								
					-			
2a Is the four	ndation directly or indirec	thy affiliated with or	related to one	e or more tax-exempt organi	zations described		-	
	501(c) of the Code (other	•					Yes	X No
	omplete the following sch	·	,(o,, o, oo			_		
<u> </u>	(a) Name of org			(b) Type of organization	(c) Description of relationsh	np	
	N/A							
								
			2/2					
Unde	r penalties of perjupy, I declare	that have examined by	is return, includi	ng accompanying schedules and	statements, and to the I	pest of my knowledge May	the IRS d	iscuss this
Sign L	elief, it is true, correct, and cor	riplete Declaration of pr	reprärer (other tha	an taxpayer) is based on all inform	nation of which preparer	nas any knowledge retu	rn with the	preparer (see instr.)?
Here	11110	XX	Trust	Ce 5/5/17	PRESID		X Yes	No
Sig	nature of officer or trustee)	- / / /	Date	Title			
	Print/Type preparer's na	ame	Preparer's	signature	Date	Check If PTIN		
			21	M. H.	ا ہے جرا	self- employed		
Paid	FRED R. GR	COOTHUIS	1704	HUTUWWA	5.2-17	P0(313	458
Preparer	Firm's name ► JAN		MAN &	GROOTHUIS, P	.C.	Firm's EIN ► 84-13	1997	80
Use Only								
	Firm's address ► 64	0 PLAZA I	ORIVE,	SUITE 360			_	
	<u> </u>	GHLANDS F	RANCH,	CO 80129		Phone no. (303)	75 <u>6-</u> :	3626
						Er	rm 990	-PF (2016

KOWALSKI FAMILY FOUNDATION C/O OF THOMAS KOWALSKI

84-1397404

Grants and Contributions Paid During the Y	ear (Continuation)			
. Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
VIVERSITY OF COLORADO FOUNDATION		PUBLIC CHARITY	MEDICAL	
3001 E 17TH PLACE				50_0
IRORA, CO 80045				50,0
				<u> </u>

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.lrs.gov/form990.

OMB No 1545-0047

2016

Name of the organization

KOWALSKI FAMILY FOUNDATION C/O OF THOMAS KOWALSKI

Employer identification number

84-1397404

Organizat	ion type (check or	ne).
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 private foundation
		501(c)(3) taxable private foundation
-	a section 501(c)(covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions
Special R	ules	
s a	ections 509(a)(1) a my one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II
У	ear, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.
у 15 Г	rear, contributions s checked, enter h ourpose Don't cor	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively expected, contributions totaling \$5,000 or more during the year.
but it mus	t answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 he 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 KOWALSKI FAMILY FOUNDATION C/O OF THOMAS KOWALSKI

Employer identification number

84-1397404

Part I	Contributors	(See instructions)	Use duplicate copies of Part I	if additional space is needed.
--------	--------------	--------------------	--------------------------------	--------------------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THOMAS KOWALSKI 7006 S ALTON WAY BLDG A CENTENNIAL , CO 80112	\$100,500.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THOMAS KOWALSKI 7006 S ALTON WAY BLDG A CENTENNIAL, CO 80112	\$ 75,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroli Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

KOWALSKI FAMILY FOUNDATION C/O OF THOMAS KOWALSKI

84-1397404

Part II	Noncash Property (See instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	ILLINI 1500 SHARES AT \$67 EACH		
		\$ 100,500.	11/30/16
(a) No. rom art I	(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
		\$	
(a) No. rom Part 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
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	3-16	\$	90, 990-EZ, or 990-PF) (

Name of organization

Employer identification number

KOWALSKI	FAMILY	FOUNDATION

O OF T	FAMILY FOUNDATION HOMAS KOWALSKI		84-1397404
t	EXCIUSIVEIY TENGIOUS, CHAPITADIE, ETC., CONT he year from any one contributor. Complete (completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	Columns (a) through (e) and the follows, charitable, etc., contributions of \$1,000 or	d in section 501(c)(7), (8), or (10) that total more than \$1,000 for owing line entry. For organizations or less for the year (Enter this info once)
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	——————————————————————————————————————	(e) Transfer of gif	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
·····		(e) Transfer of gift	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	ift
	Transferee's name, address, a		Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
			74.

FORM 990-PF	TNTEREST OF	N SAVINGS	ΔND	TEMPORARY	CASH	TNVESTMENTS	STATEMENT	1
TOME DEC	THIRDDI O	CONTACO	תואש	TEMPORANT	CHOIL	THAPSTHENTS	OIVIDIDI	

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
COMPASS BANK FRONT RANGE BANK SKI-SAR, LLC TD AMERITRADE	307. 245. 1,662. 1,646.	307. 245. 1,662. 1,646.	
TOTAL TO PART I, LINE 3	3,860.	3,860.	

DIVIDENDS	AND INTEREST	FROM SECUR	ITIES ST	'ATEMENT 2
GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
172.	0.	172.	172.	
-,		.,.	_,	
4,995.	0.	4,995.	4,995.	
2,600.	0.	2,600.	2,600.	
3,000.	0.	3,000.	3,000.	
101.	0.	101.	101.	
200.	0.	200.	200.	
1,360.	0.	1,360.	1,360.	
1,840.	0.	1,840.	1,840.	
1,463.	0.	1,463.	1,463.	
2,400.	0.	2,400.	2,400.	
3,675.	0.	3,675.		
850.	0.	850.	850.	
4,968.	0.	4,968.	4,968.	
275.	0.	275.	275.	
2,273.	0.	2,273.	2,273.	
32,092.	0.	32,092.	32,092.	
	GROSS AMOUNT 172. 1,920. 4,995. 2,600. 3,000. 101. 200. 1,360. 1,840. 1,463. 2,400. 3,675. 850. 4,968. 275. 2,273.	GROSS AMOUNT GAINS DIVIDENDS 172. 0. 1,920. 0. 4,995. 0. 2,600. 0. 3,000. 0. 101. 0. 200. 0. 1,360. 0. 1,840. 0. 1,463. 0. 2,400. 0. 3,675. 0. 850. 0. 4,968. 0. 275. 0.	GROSS GAINS REVENUE PER BOOKS 172. 0. 172. 1,920. 0. 1,920. 4,995. 0. 4,995. 2,600. 3,000. 0. 2,600. 3,000. 101. 0. 101. 200. 0. 200. 1,360. 1,360. 1,360. 1,360. 1,463. 2,400. 3,675. 850. 4,968. 275. 0. 2,273. 2,273. 0. 2,273.	GROSS GAINS DIVIDENDS PER BOOKS MENT INVEST-MENT 1,920. 172. 1,920. 0. 1,920. 1,020.

FORM 990-PF	OTHER	INCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
ROYALTIES	_	1,093.	1,093.		
TOTAL TO FORM 990-PF, PART I,	LINE 11	1,093.	1,093.		—— -
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
TAX RETURN PREP.	1,200	. 600	•	60	0.
TO FORM 990-PF, PG 1, LN 16B	1,200	. 600	•	60	0.
FORM 990-PF	TA	XES		STATEMENT	 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
TAXES	949	. 0	•		0.
TO FORM 990-PF, PG 1, LN 18	949	. 0			0.
FORM 990-PF	OTHER	EXPENSES	-	STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
FEES	10	. 0	•		0.

FORM 990-PF	CORPO	DRATE STOCK		STATEMENT	
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE	ŗ
TD AMERITRADE		-	792,252.	941,30) 3
TOTAL TO FORM 990-PF, PART II,	LINE 1	LOB	792,252.	941,30)3
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT	- {
	 -				
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	?
DESCRIPTION N/R SECOND ACT RESIDENCES LLC			BOOK VALUE 190,000.		