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Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491236007047

2016

OMB No. 1545-0052

Return of Private Foundation

Do not enter social security numbers on this form as it may be made public.

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

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

Open to Public

Inspection For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number FREDERICK GARDNER COTTRELL FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite 6440 N SWAN ROAD SUITE 200 B Telephone number (see instructions) (520) 748-4420 City or town, state or province, country, and ZIP or foreign postal code TUCSON, AZ 85718 $\boldsymbol{C}\,$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ Name change Address change E If private foundation status was terminated under section 507(b)(1)(A), check here ✓ Section 501(c)(3) exempt private foundation **H** Check type of organization \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end ☐ Cash ☑ Accrual J Accounting method F If the foundation is in a 60-month termination of year (from Part II, col (c), line 16)▶\$ 20,933,383 under section 507(b)(1)(B), check here Other (specify) (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) income equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach 3.002.438 schedule) Check ► L If the foundation is **not** required to attach 2 Interest on savings and temporary cash investments 4 Dividends and interest from securities 238,722 238,722 5a Net rental income or (loss) 124,986 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 1,334,022 Net short-term capital gain . . . Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) Other income (attach schedule) 12 **Total.** Add lines 1 through 11 3,366,146 1,572,744 Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses اروه 653 Legal fees (attach schedule) . . 6,529 5,876 9 2,456 Accounting fees (attach schedule) 3,275 819 روه 15.551 15.551 0 Other professional fees (attach schedule) 17 ارچە 105,720 9.700 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 21 Travel, conferences, and meetings . 22 Printing and publications . . . 23 Other expenses (attach schedule) 11,178 11,104 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 142,253 3,183 1,184,000 25 Contributions, gifts, grants paid 1.784.000 26 Total expenses and disbursements. Add lines 24 and 1,926,253 43,050 1,187,183 27 Subtract line 26 from line 12 Excess of revenue over expenses and 1,439,893 disbursements 1,529,694 Net investment income (if negative, enter -0-) **Adjusted net income**(If negative, enter -0-)

Cat No 11289X

Form **990-PF** (2016)

122,000

17.804.508

20,933,383

1,600,000

1,605,977

19 327 406

19,327,406

20,933,383

2

3

4

5 6 17,342,634

1,439,893

19,327,406

19,327,406

Form **990-PF** (2016)

544,879

5,977

15,379,406

19.042.634

400,000

1,300,000

1,700,000

17 342 634

17,342,634

19.042.634

122,000

17.804.508

20,933,383

	6
	7
2	8
Assets	9
As.	10a

b

c

11

12

13

14

15

16

17

18

19 20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

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

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Unrestricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶.

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Permanently restricted . .

Temporarily restricted

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Capital Gall	s and Losses for Tax on Th	Vestille	ne meonie				
(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) (b) How acq P-Purc D-Done						(c) te acquired o , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED ST	оск						
b CAPITAL GAINS DIVID	ENDS			Р			
С							
d							
e							
(e) Gross sales price	(f) Depreciation allo (or allowable)	wed	Cost or c	g) other basis ense of sale			r (loss) minus (g)
a 4	510,803			3,486,6	55		1,024,148
b	309,874						309,874
С							
d							
e							
Complete only for ass	ets showing gain in column (h) ar	d owned	by the foundation o	n 12/31/69		- (I)
(i) F M V as of 12/31/	(j)	;	(Excess	k) of col (ı) (յ), ıf any	co	Gains (Col (l l (k), but not	n) gain minus less than -0-) or om col (h))
a							1,024,148
b							309,874
С							
d							
e							
3 Net short-term capit	me or (net capital loss) al gain or (loss) as defined in sect Part I, line 8, column (c) (see ins	If (I		art I, line 7	3		1,334,022
Part V Qualificatio	n Under Section 4940(e) fo	r Bodue	rod Tay on Not	Invoctment 1	ncome	.	
						•	
For optional use by domesti	c private foundations subject to th	e section	4940(a) tax on net	t investment inco	ome)		
if section 4940(d)(2) applies Was the foundation liable for	, leave this part blank the section 4942 tax on the distr	butable a	mount of any year	in the base perio	od?	☐ Ye	es 🗸 No
	not qualify under section 4940(e						
	amount in each column for each y	ear, see	instructions before	making any enti	ies		
(a) Base period years Calendar year (or tax year beginning in)			(c) t value of noncharitable		(col	(d) Distribution rati (b) divided by c	ol (c))
2015		,887		14,262,118			0 015908
2014	5,651	'		12,363,611			0 457120
2013	1,929			10,059,212			0 191798
2012		,238		7,299,734			0 134695
2011		,000		4,841,666			0 085095
2 Total of line 1, colum							0 884616
	atio for the 5-year base period—di oundation has been in existence if			or by the			0 176923
	noncharitable-use assets for 2016			4			17,370,598
5 Multiply line 4 by line	3			5			3,073,258
6 Enter 1% of net invest	ment income (1% of Part I, line 2	7b)		6			15,297
7 Add lines 5 and 6 .				7			3,088,555
8 Enter qualifying distrib	outions from Part XII, line 4 , .			8			1,187,183
	greater than line 7, check the box			plete that part u	sing a 1º	% tax rate Se	e the Part VI

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). 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 rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	
1		
		
2		
2		
2		
3		
		
4		
4		
Part IX-B Summary of Program-Related Investments (see	<u> </u>	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	Amount
1		
2		+
2		
All other program-related investments. See instructions		
all other program-related investments. See instructions		
<u> </u>		
Total. Add lines 1 through 3		▶ 0
		Form 990-PF (2016)

Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation qualifies for

1a

1b

2

За 3b

4

5

1,187,183

1.187.183

1.187.183

Form 990-PF (2016)

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

1

2

3

4

5

837.936

Form **990-PF** (2016)

a Enter amount for 2015 only. **b** Total for prior years Excess distributions carryover, if any, to 2016 428,899

1.438.468

a From 2011. 5,090,539

b From 2012.

c From 2013. . . . **d** From 2014. e From 2015.

f Total of lines 3a through e.

XII, line 4 > \$

4 Qualifying distributions for 2016 from Part a Applied to 2015, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions).

same amount must be shown in column (a))

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

c Excess from 2014. . . . d Excess from 2015. . . e Excess from 2016. . .

b Excess from 2013. .

Subtract lines 7 and 8 from line 6a

indicated below:

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

c Treated as distributions out of corpus (Election

required—see instructions). d Applied to 2016 distributable amount.

349.247

0

7,307,153

7,307,153

428.899 1,438,468

5.090.539

349.247

6,957,906

Form 990-PF (2016)				Page 11
Part XV Supplementary Informa	tion (continued)			
3 Grants and Contributions Paid D	uring the Year or Approve	ed for Future	Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	1,184,000
b Approved for future payment MED TECH INNOVATOR 10956 WEYBURN AVENUE SUITE 261 LOS ANGELES, CA 90024		PC	GRANT TO SUPPORT MEDICAL DEVICE, DIGITAL HEALTH AND DIAGNOSTIC COMPANY INNOVATION	800,000
Total			▶ 3b	800,000 Form 990-PF (2016)

Form 990-PF (2016)					Page 12
Part XVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated	Unrelated bu	Isiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a b					
с					
d					
e f					
g Fees and contracts from government agencies					
 2 Membership dues and assessments. 3 Interest on savings and temporary cash investments 					
4 Dividends and interest from securities			14	238,722	
5 Net rental income or (loss) from real estate					
a Debt-financed property.b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	124,986	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory11 Other revenue a					
b					
c d					
e					
12 Subtotal Add columns (b), (d), and (e).		0		363,708	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations	ons)		1	3	363,708
Part XVI-B Relationship of Activities to the		ment of Exem	pt Purposes		
Line No. Explain below how each activity for which the accomplishment of the foundation's exinstructions)					
				Fo	rm 990-PF (2016)

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Par	t XVII	Exempt Organ	-	Ialis	1615 10 6	alla ITalisacti	ons ar	iu Keiatio	iisiiips witii ivo	iiciiai ital	,ie		
		rganization directly or Code (other than sect	ındırectly enga							ion 501		Yes	No
a Tra	ansfers	from the reporting for	undation to a r	oncha	arıtable ex	empt organizatio	n of						
(1) Cash	1								. 12	1(1)		No
(2) Othe	er assets								. 12	1(2)		No
b Ot	- her trai	nsactions											
(1) Sale	s of assets to a nonch	arıtable exemp	t orga	nızatıon.					11	(1)		No
(2) Purc	hases of assets from a	noncharitable	exem	npt organiz	zation				11	(2)		No
(3) Rent	al of facilities, equipm	ent, or other a	ssets.						11	(3)		No
(4) Reim	nbursement arrangeme	ents							. 11	(4)		No
(5) Loan	ns or loan guarantees.								. 11	(5)		No
(6) Perfo	rmance of services or	membership o	r fund	raising so	licitations				. 11	(6)		No
c Sh	arıng o	f facilities, equipment,	mailing lists,	other	assets, or	paid employees.					1c		No
		wer to any of the abov									ie		
		ods, other assets, or se insaction or sharing ar											
III	any ua	insaction or snaring ar	rangement, sn	OW III	column (c	a) the value of th	e goods	s, other asse	its, or services recei	iveu			
(a) Lin	e No	(b) Amount involved	(c) Name of	nonch	arıtable exe	mpt organization	(d)	Description of	transfers, transactions	, and sharing	arra	ngemen	its
	-												
	-												
2a Is	the fou	indation directly or ind	rectly affiliate	d with	. or relate	d to, one or more	e tax-ex	empt organ	ızatıons				
		in section 501(c) of the	•		•	•				🗆	'es	✓ N	la
		complete the following	·			(-)(-))				–			
D 1.	103,	(a) Name of organiza			1 (b) Type of organizat	ion		(c) Description	n of relationsl	קוו		
		• • • • • • • • • • • • • • • • • • • •			,				, ,				
		der penalties of perjury											
c:	1	ny knowledge and beli ch preparer has any k		orrect	, and com	piete Declaration	i of prej	parer (otner	than taxpayer) is b	ased on all	intor	mation	n or
Sign	•	*****	nowieage			2017 00 22		*****	6	May the IRS	discin	e this r	aturn
Here						2017-08-23				with the prep			
		Signature of officer or	trustee			Date	,	Title	ı	(see instr)?	✓ γ	es 🗆 N	lo
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		Print/Type prepare	rs name	Prep	arer's Sigi	nature	Date	1	Check if self-	PTIN			
									employed ▶ □	P0	0022	2644	
Paid	I	JON W MITCHEL	_ CPA				20	17-08-23					
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-	Only	THIT S HAILE F OL	IFTONLARSON	ALLEN	I LLP					Fırm's EIN	▶41	-07467	49
Joe	UIII		5255 EAST WI	ΙΙΤΔΜ	S CIRCLE	STE 5000							
										Phone no	(520) 7an-1	3500
		•	TUCSON, AZ 8	35711						i none no	,520	, , , , , , .	5500
		1											

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation GARY MUNSINGER DIRECTOR/PRESIDENT n 1 00 6440 N SWAN ROAD SUITE 200 TUCSON, AZ 85718 CHRISTOPHER MARTIN DIRECTOR/TREASURER 1 00 6440 N SWAN ROAD SUITE 200 TUCSON, AZ 85718 JOHN MCINTYRE DIRECTOR 1 00 6440 N SWAN ROAD SUITE 200

JOHN SCHAEFER	DIRECTOR	0	0	0
6440 N SWAN ROAD SUITE 200 TUCSON, AZ 85718	1 00			
SHAUN KIRKPATRICK	DIRECTOR	0	0	0
6440 N SWAN ROAD SUITE 200	1 00			

SECRETARY 1 00

TUCSON, AZ 85718 REBECCA BUESCHER

TUCSON, AZ 85718

6440 N SWAN ROAD SUITE 200

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
AMERICAN DIABETES ASSOCIATION 3400 E SPEEDWAY SUITE 108 TUCSON, AZ 85716		PC	TOUR FOR THE CURE	4,500
TUCSON BREAKFAST LIONS CLUB P O BOX 12512		PC	CAMPS FOR DISABLED CHILDREN DONATION	2,000

TUCSON BREAKFAST LIONS CLUB P O BOX 12512 TUCSON, AZ 85732	PC	CAMPS FOR DISABLED CHILDREN DONATION	2,000
UNIVERSITY OF ARIZONA FOUNDATION 1111 N CHERRY AVENUE TUCSON. AZ 857210109	PC	SUPPORT FOUNDATION CHARITABLE PROJECTS	17,500

10C30N, AZ 83732			
UNIVERSITY OF ARIZONA FOUNDATION 1111 N CHERRY AVENUE TUCSON, AZ 857210109	PC	SUPPORT FOUNDATION CHARITABLE PROJECTS	17,500
STANFORD UNIVERSITYBIODESIGN 318 CAMPUS DRIVE ROOM E100 STANFORD, CA 943055428	PC	BIODESIGN ENDOWED FELLOW	200,000
MED TECH INNOVATOR 10956 WEYBURN AVENUE SUITE 261	PC	GRANT TO SUPPORT MEDICAL DEVICE, DIGITAL HEALTH AND	400,000

TUCSON, AZ 857210109			
STANFORD UNIVERSITYBIODESIGN 318 CAMPUS DRIVE ROOM E100 STANFORD, CA 943055428	PC	BIODESIGN ENDOWED FELLOW	200,000
MED TECH INNOVATOR 10956 WEYBURN AVENUE SUITE 261 LOS ANGELES, CA 90024	PC	GRANT TO SUPPORT MEDICAL DEVICE, DIGITAL HEALTH AND DIAGNOSTIC COMPANY INNOVATION	400,000

.0956 WEYBURN AVENUE SUITE 261 .OS ANGELES, CA 90024		DEVICE, DIGITAL HEALTH AND DIAGNOSTIC COMPANY INNOVATION	1.00,000

LOS ANGELES, CA 90024	DIAGNOSTIC COMPANY INNOVATION	1
Total	 	1,184,000

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
INTERNATIONAL FOUNDATION FOR RESEARCH IN EXPERIMENTAL ECONOMICS 2122 E CAMINO EL GANADO TUSCON, AZ 85718		PC	SUPPORT WORK IN EXPERIMENTAL ECONOMICS	500,000	
JDRF - SOUTHERN ARIZONA BRANCH 1585 E RIVER ROAD SUITE 101 TUCSON, AZ 85718		PC	SUPPORT OF DIABETES CENTER	3,000	
SARSEF - SOUTHERN ARIZONA RESEARCH SCIENCE AND ENGINEERING FOUNDATION 3247 N CHRISTMAS AVE TUCSON, AZ 85716		PC	SUPPORT FOUNDATION CHARITABLE PROJECTS	3,000	
CASCADE FOUNDATION OF SOUTHERN ARIZONA PO BOX 40397 TUCSON, AZ 85717		PC	SUPPORT FOUNDATION CHARITABLE PROJECTS	500	
GOODWILL GOLF TOURNAMENT 1696 W WINGATE PLACE ORO VALLEY, AZ 85737		PC	SUPPORT GOODWILL'S CHARITABLE PROJECTS	500	

1,184,000

Total . .

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WREATHS ACROSS AMERCIA PO BOX 249 COLUMBIA FALLS, ME 04623		PC	SUPPORT MILITARY WREATH LAYING	1,500
TUCSON CLEAN AND BEAUTIFUL PO BOX 27210 TUCSON, AZ 85726		PC	SUPPORT ORGANIZATIONS TO PRESERVE AND IMPROVE ENVIRONMENT IN TUCSON	10,000
PRIMA COUNCIL ON AGING 8467 E BROADWAY BLVD TUCSON, AZ 85710		PC	SUPPORT ORGANIZATIONS EFFORTS AND SERVICES FOR OLDER ADULTS IN THE LOCAL PIMA COUNTY ARIZONA AREA	10,000
ARIZONA SONORA DESERT MUSEUM 2021 N KINNEY ROAD TUCSON, AZ 85743		PC	SUPPORT OF THE ARIZONA SONORA DESERT MUSEUM	10,000
WHITE MOUNTAIN COMMUNITY FOOD BANK 2501 JICARILLA DRIVE SHOW LOW, AZ 85901		PC	SUPPORT COMMUNITY FOOD BANK	5,000

TUCSON, AZ 85710		OLDER ADULTS IN THE LOCAL PIMA COUNTY ARIZONA AREA	
ARIZONA SONORA DESERT MUSEUM 2021 N KINNEY ROAD TUCSON, AZ 85743	PC	SUPPORT OF THE ARIZONA SONORA DESERT MUSEUM	10,000
WHITE MOUNTAIN COMMUNITY FOOD BANK	PC	SUPPORT COMMUNITY FOOD BANK	5,000

Total . За

1,184,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COMMUNITY FOOD BANK OF SOUTHERN PC SUPPORT COMMUNITY FOOD 10,000 ARIZONA BANK 3003 S COUNTRY CLUB ROAD

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

TUCSON, AZ 85713			
HUMANE SOCIETY OF SOUTHERN ARIZONA 3450 N KELVIN BLVD TUCSON, AZ 85713	PC	SUPPORT OPERATIONS OF LOCAL HUMANE SOCIETY	5,000

TUCSON, AZ 85713			
INTEGRATIVE TOUCH FOR KIDS 8340 N THORNYDALE ROAD TUCSON, AZ 85741	PC	SERVING KIDS WITH SPECIAL MEDICAL NEEDS	1,500

8340 N THORNYDALE ROAD TUCSON, AZ 85741		MEDICAL NEEDS	2,300
Total	 		1,184,000

	ON, AZ 85741		MEDICAL NEEDS	
834n	N THORNYDALE ROAD		MEDICAL NEEDS	

3a

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TY 2016 Accounting Fe	ees Sche	dule					
Name: FREDERICK GARDNER COTTRELL FOUNDATION							
	EIN:	86-0940	14/				
Category	Amo	ount		Investment Income	Adjusted Incom		Disbursements for Charitable Purposes
ACCOUNTING FEES		3,275		819			2,456

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TY 2016 Investments Corporate Stock Schedule

Name: FREDERICK GARDNER COTTRELL FOUNDATION

ETN. 06 004044

EIN: 86-0940147				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
CAPITAL GROUP CORE BOND FUND 236,564 SHARES	2,379,833	2,379,833		
SHORT TERM BOND FD OF AMERICA INC CL F2 80,426 SHARES	798,634	798,634		
EUROPACIFIC GROWTH FUND CL F2 29,160 SHARES	1,311,335	1,311,335		
FUNDAMENTAL INVESTORS CL F2 61,285 SHARES	3,335,726	3,335,726		
GROWTH FUND OF AMERICA CL F2 59,150 SHARES	2,481,363	2,481,363		
INTERNATIONAL GROWTH FUND & INCOME FUND CL F2 46,344 SHARES	1,311,985	1,311,985		
NEW PERSPECTIVE FUND CL F2 60,745 SHARES	2,140,037	2,140,037		
NEW WORLD FUND CL F2 25,616 SHARES	1,314,348	1,314,348		
SMALLCAP WORLD FUND CL F2 28,376 SHARES	1,317,218	1,317,218		
LACOSTE ROMBERG SCINTREX	1,414,029	1,414,029		

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	DLN: 93491236007047			
TY 2016 Legal Fees Schedu	ile				
Name: FREDERICK GARDNER COTTRELL FOUNDATION EIN: 86-0940147					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LEGAL FEES	6,529	5,876		653	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491236007047	
TY 2016 Other Expenses Schedule					
Name: FREDERICK GARDNER COTTRELL FOUNDATION EIN: 86-0940147					
Other Expenses Schedule				1	
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
BANK ACCOUNT CHARGES	755	755		0	
INVESTMENT FEES	10,324	10,324		0	
OFFICE SUPPLIES	99	25		74	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491236007047	
TY 2016 Other Increases Schedule				
Name:	FREDERICK G	ARDNER COTTRELL FOUNDAT	ION	
EIN:	86-0940147			
Description Amount			Amount	
UNREALIZED GAINS/LOSSES ON INVEST	MENTS CARRIED	AT FMV	544,879	

Name: FREDERICK GARDNER COTTRELL FOUNDATION					
TY 2016 Other Professional Fees Schedule					

15,551

15,551

PORTFOLIO MANAGEMENT FEES

efile GRAPHIC print - DO NOT PR	OCESS As Filed Data	-	DLI	N: 93491236007047		
TY 2016 Taxes Schedule						
Name: FREDERICK GARDNER COTTRELL FOUNDATION EIN: 86-0940147						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES	9,700	9,700		0		
EXCISE TAXES	96,020	0		0		

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491236007047						
Schedule B (Form 990, 990-EZ,				OMB No 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	0-PF) ► Attach to Form 990, 990-EZ, or 990-PF ment of the Treasury ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at					
Name of the organizate FREDERICK GARDNER C			Employer ide	entification number		
			86-0940147			
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organ	nization				
	4947(a)(1) nonexempt charitable	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	☐ 527 political organization					
Form 990-PF	501(c)(3) exempt private foundation	ation				
	4947(a)(1) nonexempt charitable	4947(a)(1) nonexempt charitable trust treated as a private foundation				
501(c)(3) taxable private foundation						
•	ation filing Form 990, 990-EZ, or 990-PF the r property) from any one contributor. Comp		•	•		
Special Rules						
under sections received from a	tion described in section 501(c)(3) filing Fo 509(a)(1) and 170(b)(1)(A)(vi), that checked by one contributor, during the year, total co the 1h, or (ii) Form 990-EZ, line 1 Complete	l Schedule A (Form 990 or 990-EZ), Pantributions of the greater of (1) \$5,000	art II, line 13, 1	16a, or 16b, and that		
during the year	tion described in section 501(c)(7), (8), or (total contributions of more than \$1,000 excithe prevention of cruelty to children or anir	clusively for religious, charitable, scient				
during the year If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (contributions exclusively for religious, charecked, enter here the total contributions that complete any of the parts unless the General Science , contributions totaling \$5,000 or materials.	itable, etc., purposes, but no such cont twere received during the year for an e eral Rule applies to this organization be	tributions total exclusively rel ecause it rece	led more than \$1,000 igious, charitable, etc , eived <i>nonexclusively</i>		
990-EZ, or 990-PF), bu	on that is not covered by the General Rule a t it must answer "No" on Part IV, line 2, of i Form 990PF, Part I, line 2, to certify that it d	ts Form 990, or check the box on line h	H of its			
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions 00-PF	Cat No 30613X Schedu	le B (Form 990,	990-EZ, or 990-PF) (2016)		

Schedule B (Forn	n 990, 990-EZ, or 990-PF) (2016)		Page 3
Name of organization FREDERICK GARDNER COTTRELL FOUNDATION		Employer identification number	
		86-09	940147
Part II	Noncash Property		
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	FMV OF 100,910 SHARES OF AMERICAN FUNDS INTERNATIONAL GROWTH AND INCOME FUNDS (IGAAX)	\$ 2,990 972	2016-12-31
(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
		\$	
		Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

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