Form **990-PF**

Department of the Treasury Internal Revenue Service

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

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information 2017

Open to Public Inspection

	1010	alelluar year 2017 or tax year beginning	, 2017	7, and ending	•			
	CLE	LLAND FAMILY FOUNDATION		A Employer identification number 26-3910224				
)	239 PHO	B E CAMELBACK RD STE 200 ENIX, AZ 85016			B Telephone number (see instructions) (602) 262-8212			
λ			C If exemption application is pending, check here					
	G C	neck all that apply. Initial return	D 1 Foreign organizations, check here					
		Final return Address change	Amended return Name change		2 Foreign organizations meeting the 85% test, check			
	H Ch	neck type of organization X Section 50	1(c)(3) exempt private		here and attach computation			
	I Fai	Section 4947(a)(1) nonexempt charitable r market value of all assets at end of year J Ac	trust Other taxable counting method X C	private foundation	E If private foundation status was terminated under section 507(b)(1)(A), check here .			
	(fre	om Part II, column (c), line 16)	Other (specify)		F If the foundation is in a 60-month termination			
	Part	I Analysis of Revenue and	, column (d) must be or		under section 507(b)(1)(B), check here			
		Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investmen income	t (c) Adjusted net (d) Disbursements for charitable purposes (cash basis only)			
•		1 Contributions, gifts, grants, etc., received (attach schedule)	300,000.		(**************************************			
		2 Check ► if the foundation is not required to attach Sch B						
		3 Interest on savings and temporary cash investments 4 Dividends and interest from securities	21 212	21 01	N/A			
0		5 a Gross rents b Net rental income	31,213.	31,21	3.			
9107	R	b Net rental income or (loss) a Net gain or (loss) from sale of assets not on line 10	23,161.					
S	E V	b Gross sales price for all assets on line 6a 347, 996.	23,101.					
, מסת	E N	7 Capital gain net income (from Part IV, line 2). 8 Net short term capital gain.	1	23,161				
Ĭ	U E	9 Income modifications 10 a Gross sales less	,		- manager date to			
		returns and allowances b Less Cost of						
		goods sold C Gross profit or (loss) (attach schedule)		-				
		11 Other income (attach schedule)						
_		12 Total. Add lines 1 through 11	354,374.	54,374				
		13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	0.					
		15 Pension plans, employee benefits.						
	A D M	b Accounting fees (attach schedule) b Accounting fees (attach sch) SEE ST 1 SEE ST 2		3,333	· · · · · · · · · · · · · · · · · · ·			
	I N	c Other professional fees (attach sch) SEE ST 3	2,935.	2,935				
	O I S E T R	18 Taxes (attach schedule)(see instrs) SEE STM 4	738.	738				
	R R A A T T	19 Depreciation (attach schedule) and depletion	, 30.	750				
	K V	20 Occupancy21 Travel, conferences, and meetings						
	A E N X D P	22 Printing and publications						
	D P E N	Other expenses (attach schedule) SEE STATEMENT 5	10.	10				
	S E	24 Total operating and administrative expenses. Add lines 13 through 23						
		25 Contributions, gifts, grants paid PART XV	7,035. 42,022.	7,026	1,675. 42,022.			
_		Total expenses and disbursements. Add lines 24 and 25	49,057.	7,026				
		27 Subtract line 26 from line 12* a Excess of revenue over expenses	,	, 020	23,037.			
		and disbursements b Net investment income (if negative, enter -0-)	305,317.	45 050				
_		C Adjusted net income (if negative, enter -0-)		47,348	•			
В	AA Fo	or Paperwork Reduction Act Notice, see inst	ructions	TECANONIA ORION				

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Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

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

1,747,809.

1,747,809.

4

5

6

(a) List and describe 2-story brick ware	the kind(s) of property sold (for example the kind(s) of property sold (for example house, or common stock, 200 shares	MLC Company) I P	How acquired — Purchase — Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE STATEMENT 7			Donation		
b					
<u> </u>					<u> </u>
d					L
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or ((e) plus (f) m	
a					
b	 - - - 				
<u>c</u>	 				
d					
е	<u> </u>	·			
Complete only for assets sho	wing gain in column (h) and owned b	y the foundation on 12/31/69		(I) Gains (Col	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		pain minus col (k), b an -0-) or L osses (fr	
a					
b					
С					
d					
е					
2 Capital gain net income or (n	et capital loss). If gain, also	enter in Part I, line 7 er -0- in Part I, line 7	2		23,161
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)			 	23,101
If gain, also enter in Part I, Iii in Part I, line 8	ne 8, column (c) See instructions If	(loss), enter -0-	3		167
	er Section 4940(e) for Reduce	d Tay on Not Investmen		 _	
	ection 4942 tax on the distributable a lify under section 4940(e). Do not coi		e period?	Yes	X No
	each column for each year, see the ins		tries		
	(b)	(c)		(d)	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	s	Distribution (col. (b) divided	
2016	54,615.	1,139,8	829.		0.04791
2015	71,367.	1,061,0			0.06726
2014	63,639.	955,			0.06660
2013	65,225.	894,2			0.07293
2012	61,651.	974,8			0.06323
2 Total of line 1, column (d)	<u></u>	<u>-</u>	2		0.31795
3 Average distribution ratio for the number of years the foundation	e 5-year base period — divide the total o on has been in existence if less than	on line 2 by 5 0, or by the 5 years	3		0.06359
4 Enter the net value of noncha	aritable-use assets for 2017 from Pari	t X, line 5	4		L,537,615
5 Multiply line 4 by line 3			5		97,780
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		473
7 Add lines 5 and 6			7		98,253
8 Enter qualifying distributions	from Part XII, line 4		_8		43,697
If line 8 is equal to or greater the Part VI instructions	an line 7, check the box in Part VI, line	1b, and complete that part usin	g a 1% tax i	rate See the	

	F (2017) CLELLAND FAMILY FOUNDATION	26-	-39102	24	Pa	age 4
Part VI	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 – se	e instruc	tions)		
1 a Exempt	operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	7		_1		\$ 1 F
	ruling or determination letter: (attach copy of letter if necessary – see instructions)					
	stic foundations that meet the section 4940(e) requirements in Part V,	- ·	1		9	<u>47.</u>
	here. and enter 1% 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)		}			
2 Tax ur	nder section 511 (domestic section 4947(a)(1) trusts and taxable					
founda	ations only, others, enter -0-).		2			0.
-	nes 1 and 2		3		9	<u>47.</u>
	e A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, e	enter -0-)	4			0.
	ased on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		9	47.
	s/Payments:		1.		1 4 , , 1	
	amated tax pmts and 2016 overpayment credited to 2017	500.				, *
	ot foreign organizations — tax withheld at source					a 1 5/ •
	aid with application for extension of time to file (Form 8868)		يتبرأ ويناء والم		· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	\$4.5 ; \$1.6 † }
	p withholding erroneously withheld 6 d			;;;;		
	credits and payments. Add lines 6a through 6d		7		5	<u>00.</u>
_	any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		8			
	If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT	8 •	-		4	<u>47.</u>
	ment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10	<u> </u>		
	e amount of line 10 to be Credited to 2018 estimated tax	ed '	11			
Part VII-A	Statements Regarding Activities					
1 a During	the tax year, did the foundation attempt to influence any national, state, or local legislation	or did it		- , g x ,	Yes	No
particip	pate or intervene in any political campaign?			1 a		<u>X</u> _
b Did it si	pend more than \$100 during the year (either directly or indirectly) for political purposes?					
	e instructions for the definition			1 b		<u>X</u> _
If the ar	nswer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials puributed by the foundation in connection with the activities	iblished		· -		,
					-	
d Enter t	e foundation file Form 1120-POL for this year? he amount (if any) of tax on political expenditures (section 4955) imposed during the year			1 c		<u>X</u>
(1) On	the foundation \Rightarrow 0. (2) On foundation managers \Rightarrow \$			0.		
e Enter th	ne reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed on		" 1		
	tion managers ►\$ 0.					
2 Has the	e foundation engaged in any activities that have not previously been reported to the IRS?			2		X
If 'Yes,	attach a detailed description of the activities					
3 Has the	foundation made any changes, not previously reported to the IRS, in its governing instrument, arti	cles		, F 44		m ()
of incol	rporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the c	changes		3		X
	foundation have unrelated business gross income of \$1,000 or more during the year?			4 a		<u>X</u> _
	has it filed a tax return on Form 990-T for this year?			4 b	N/	<u>A_</u> _
	e a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u> _
	' attach the statement required by General Instruction T			- +	- x - 5	
	requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.					
• By la	nguage in the governing instrument, or					
● By sta	ate legislation that effectively amends the governing instrument so that no mandatory directions that	at conflict			-	
	the state law remain in the governing instrument?			6	X	
	oundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV			7	Х	
	he states to which the foundation reports or with which it is registered. See instructions.	-				
_AZ						
b If the ans	swer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General nate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation			: :	-3.7	,
				8 b	X	
9 Is the for cale	oundation claiming status as a private operating foundation within the meaning of section 4 endar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If 'Yes	942(j)(3) o	r 4942()	(5) 9	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	v
			o i ail Ai	` - 		<u>X</u> _
10 Did any and add	persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the dresses	eir names		10		Х
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Continued)	-		
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		Yes	No
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	11	+	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application. Website address:	12		Х
N/A	? 13	X	<u> </u>
14 The books are in care of F. WESLEY CLELLAND Located at P. 2398 F. CAMELRACK PD. STE. 200 PURPLY AND Telephone no P. (6)	502) 262	-821	2 -
Located at 2398 E CAMELBACK RD STE 200 PHOENIX AZ ZIP + 4 85016 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here			
and enter the amount of tax-exempt interest received or accrued during the year	_N/} !	<i>Y</i>	
At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		Yes	N/A
See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country.	16		<u>X</u>
The raine of the roleight 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.			
1 a During the year, did the foundation (either directly)		Yes	No
(1) Engage in the sale or exchange or lossing of property with the sale of exchange of property with the sale of the sal			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	No		-,
(3) Furnish goods, services, or facilities to (an asset the first term) Yes X	No		,
(4) Pay compensation to or pay or reimburge the average of the second of		.	
	No '	-	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes	No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes	No		
b If any answer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1 b	N/	
organizations relying on a current notice regarding disaster assistance, check here .		- 1	<u> </u>
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1 c	, e	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		-	,
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? Yes XI	lo l		
If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2 b	N	- 7
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20	N/I	<u>A.</u>
20 , 20 , 20		-	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X N	ار الله الله الله الله الله الله الله ال		1
b If 'Yes,' did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to	3 b	NT / 7	, , , , , , ,
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		N/A	
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could geopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4 a		<u>x</u> x
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Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)		
5 a During the year, did the foundation pay or incur a (1) Carry on propaganda, or otherwise attemption		- (t 4045(-))2	□v 6	Yes No	
· · · · ·	_		∐ Yes ∑	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?		<u> </u>	No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi	ization described	Yes [X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes [X	No	
b If any answer is 'Yes' to 5a(1)—(5), did any or described in Regulations section 53.4945 or in a See instructions	f the transactions fail to current notice regarding c	qualify under the exce disaster assistance?	ptions	5b N/A	
Organizations relying on a current notice rega	irding disaster assistant	ce, check here .	▶ [7	_
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?.	emption from the	N/A ∏Yes [□ No	
If 'Yes,' attach the statement required by Reg	ulations section 53 4945	5-5(d).	ليا ل	-	
6 a Did the foundation, during the year, receive a on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premium	S Yes	(No	
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b X	
If 'Yes' to 6b, file Form 8870				_	
7a At any time during the tax year, was the found				No	
b If 'Yes,' did the foundation receive any process Part VIII Information About Officers, D				N/A 7b	_
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, nignly Paid	Employees,	
1 List all officers, directors, trustees, and foun	dation managers and th	heir compensation. See	instructions.		_
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances	:,
F. WESLEY CLELLAND III	PRESIDENT	0.	0.	 	j .
2398 E CAMELBACK RD STE 200	1.00				
PHOENIX, AZ 85016					
JULIE H. CLELLAND	TREASURER	0.	0.		Ò.
_2398 E_CAMELBACK RD_STE_200 PHOENIX, AZ 85016	1.00				
ANN C. WATTS	SECRETARY	0.	0.	(Ō.
2398 E CAMELBACK RD STE 200	2.00				
PHOENIX, AZ 85016					
	4		-> 16 111011		_
2 Compensation of five highest-paid employees (o	1	on line i — see instructio	(d)Contributions to	E	_
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account other allowances	i,
NONE				 	
			 	 	_
	Ì		Ì		
			<u> </u>	<u> </u>	
	1				
					_
		\			
	 	 	 	 	
		}			
Table and all and a second	<u> </u>	l	<u></u>		_
Total number of other employees paid over \$50,000	J			<u> </u>	0

3 Five highest-paid independent contractors for professional services. See i	nstructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE	1	
		
		}
):
otal number of others receiving over \$50,000 for professional services		<u> </u>
PartiX:A: Summary of Direct Charitable Activities		
		
st the foundation's four largest direct charitable activities during the tax year. Include relevant statistic ganizations and other beneficiaries served, conferences convened, research papers produced, etc	al information such as the number of	Expenses
1 N/A		
2		
3		
"		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
4		
art IX;B Summary of Program-Related Investments (see instru		
escribe the two largest program-related investments made by the foundation during th	e tax year on lines 1 and 2	Amount
1 N/A		
26.5		
2		
All other program-related investments. See instructions		
All other program-related investments. See instructions		

see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 1 a 1,038,240. b Average of monthly cash balances 1 b 522,790. c Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c) 1 d 1,561,030. e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 0. Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 3 1,561. 030. Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 23,415. 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 537,615. Minimum investment return. Enter 5% of line 5 6 76,881. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations, check here and do not complete this part.) Minimum investment return from Part X, line 6 76,881. 1 2 a Tax on investment income for 2017 from Part VI, line 5 2 a 947 b Income tax for 2017 (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b 2 c 947. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 75,934. Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 75,934. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 7 75,934. Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part 1, column (d), line 261 a 43,697. **b** Program-related investments — total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a **b** Cash distribution test (attach the required schedule) 3 b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 43,697. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6 43,697. Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations,

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## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	<b>(c)</b> 2016	<b>(d)</b> 2017
Distributable amount for 2017 from Part XI, line 7				75,934.
2 Undistributed income, if any, as of the end of 2017.			<del></del>	13, 334.
a Enter amount for 2016 only	•		0.	
<b>b</b> Total for prior years 20 , 20 , 20	<del> </del>	0.		
3 Excess distributions carryover, if any, to 2017.	<del></del>			
a From 2012 13, 604.				
<b>b</b> From 2013 20, 977.				
c From 2014 16, 332.		,		
d From 2015 18,812.				
e From 2016				
f Total of lines 3a through e .	69,725.			
4 Qualifying distributions for 2017 from Part				
XII, line 4. ► \$ 43,697.				
a Applied to 2016, but not more than line 2a			0.1	
<b>b</b> Applied to undistributed income of prior years				
(Election required — see instructions)		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
<b>d</b> Applied to 2017 distributable amount				43,697.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017	32,237.			32,237.
(If an amount appears in column (d), the same amount must be shown in column (a))				
same amount must be shown in column (a)				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	37,488.			
<b>b</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.		<del></del>
e Undistributed income for 2016 Subtract line 4a from				
line 2a. Taxable amount — see instructions.	<del></del>		0.	
f Undistributed income for 2017 Subtract lines				
4d and 5 from line 1. This amount must be				0
distributed in 2018				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions)		Ì		!
	0.			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	0.			
	<u> </u>			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	37,488.			
10 Analysis of line 9 ⁻				
a Excess from 2013 2, 344.			1	
<b>b</b> Excess from 2014 16, 332.				
c Excess from 2015 18,812.			-	
d Excess from 2016				
e Excess from 2017	<u></u>			
BAA				Form 990-PF (2017)

Form 990-PF (2017) CLELLAND FAMILY  Part XIV   Private Operating Foundary		untinue and David	\/II	26-3910224	
Part XIV Private Operating Foundation has received a ruling or determined and the foundation has received a ruling or determined.					N/A
is effective for 2017, enter the date of the	ruling	•		_	4042(1)(5)
<ul><li>b Check box to indicate whether the founda</li><li>2a Enter the lesser of the adjusted net</li></ul>		erating toundation de		4942(j)(3) or	4942(j)(5)
income from Part I or the minimum	Tax year	42 2016	Prior 3 years	(d) 2014	(e) Total
investment return from Part X for each year listed	(a) 2017	<b>(b)</b> 2016	(c) 2015	(a) 2014	<i>J</i>
<b>b</b> 85% of line 2a	<del></del>	<del> </del>			
c Qualifying distributions from Part XII,	<del></del>	†			
line 4 for each year listed					·
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter:	1			}	
(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 listed					
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(¡)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Management		istructions.)			
a List any managers of the foundation who have close of any tax year (but only if they have SEE STATEMENT 9	e contributed more t	han 2% of the total co than \$5,000) (See	ntributions received section 507(d)(2))	by the foundation befo	ore the
SEE STATEMENT 9					
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the foundation has a 1	stock of a corporation 10% or greater intere	n (or an equally large est.	portion of the owner	ship of
2 Information Regarding Contribution, Grant,	Gift, Loan, Scholars	hip. etc Programs			
Check here ► X if the foundation only ma requests for funds. If the foundation make	kes contributions to	preselected charitable	e organizations and o ganizations under o	does not accept unsol ther conditions, com	icited iplete items
2a, b, c, and d. See instructions  a The name, address, and telephone number o	r amail address of th	a parson to whom an	nlications should be	addrascad	
a me name, address, and telephone number o	Terrial address of the	ie person to whom ap	prications should be	addiessed	
<b>b</b> The form in which applications should be	submitted and info	rmation and material	s they should inclu	de [.]	
	·				
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charitat	ole fields, kinds of i	nstitutions, or other	factors

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
Name and address (home or business)  a Paid during the year  SEE STATEMENT 10	any roundation manager or substantial contributor	recipient	contribution	
		ļ		
Total		<u> </u>	► 3a	42,022.
<b>b</b> Approved for future payment				

Enter gros	s amounts unless otherwise indicated.	Unrelate	ed business income	Excluded I	by section 512, 513, or 514	(e)
, 1 Prog	ram service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a				code		
b			-	+ +	-	<del></del>
c	-			+ +	-	·-
d		<del></del>			· · · · · · · · · · · · · · · · · · ·	
e	· · · · · · · · · · · · · · · · · · ·		74			
f						•
g Fees	and contracts from government agencies		-			
2 Mem	bership dues and assessments					
3 Intere	st on savings and temporary cash investments					
	dends and interest from securities			14	31,213.	
	rental income or (loss) from real estate	1 - 3 - 1	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	大學學 化氯化甲基甲基
	-financed property					
	debt-financed property					<del> </del>
	ental income or (loss) from personal property					
	r investment income					
	or (loss) from sales of assets other than inventory			18	23,161.	
	ncome or (loss) from special events			<b></b>		
	s profit or (loss) from sales of inventory revenue			<b>-</b>		
		-		-		
<u>ь</u>	IER REVENUE			<del>  -</del>		
	· · · · · · · · · · · · · · · · · · ·			+		
c				I B	l	
c			~			
c d						
d e	otal Add columns (b), (d), and (e)	2004		180.480	54 374	
d e	otal Add columns (b), (d), and (e)  I. Add line 12, columns (b), (d), and (e)	Andrew Trans		彩海	54,374. 13	54.374
e 12 Subte 13 Total See works	<ol> <li>Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat</li> </ol>	tions)			13 _	54,374
e Subto	I. Add line 12, columns (b), (d), and (e)	tions)	ishment of Exemp		13 _	54,374
d e Subto	<ol> <li>Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat</li> </ol>	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d e 12 Subte 13 Total See works Part XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d E Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d E Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d E Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d E Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the
d Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which	tions)  le Accompl	orted in column (e) of	ot Purpos	13 _ ses	v to the

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

	Exempt Organiz	zations								
describ	organization directly ed in section 501(c) to political organiza	of the Code (othe	age in any of ir than section	the following w 501(c)(3) orga	ith any of nizations	ther organization ) or in section 5	n 527,	, T. L.	Yes	No
_			noncharitable	evemnt organia	ation of			,	. 1	
<ul> <li>a Transfers from the reporting foundation to a noncharitable exempt organization of</li> <li>(1) Cash</li> </ul>									, (	X
(2) Other assets								1 a (1) 1 a (2)		<u>X</u>
b Other transactions										
Other transactions (1) Sales of assets to a noncharitable exempt organization										Х
<ul><li>(1) Sales of assets to a noncharitable exempt organization</li><li>(2) Purchases of assets from a noncharitable exempt organization</li></ul>										$\frac{X}{X}$
	ntal of facilities, equip		. •	· inzution				1 b (2) 1 b (3)		X
: * _	mbursement arrange	•	330.0					1 b (4)		X
• •	ins or loan guarantee							1 b (5)		<u>x</u>
• •	formance of services		or fundraising	solicitations				1 b (6)		X
c Sharing	of facilities, equipm	ent, mailing lists,	other assets,	or paid employ	ees			1 c		X
<b>d</b> If the are the good any tran	nswer to any of the a ds, other assets, or sen nsaction or sharing a	above is 'Yes,' co rvices given by the irrangement, show	mplete the foll reporting found w in column (d	lowing schedule dation. If the fou I) the value of t	Columindation re	n <b>(b)</b> should alw eceived less than s, other assets,	rays show the fail fair market value or services receiv	market valu	ue of	
(a) Line no.	(b) Amount involved	(c) Name of n	oncharitable exem	pt organization	(d)	Description of trans	sfers, transactions, ar	id sharing arran	gement	s
N/A	-,- <del>,-</del>						<u></u>			
					-					
					<u> </u>					
						····				
							<del></del>			
					<u> </u>					
			=							
			-		<del> </del>			<del>-</del>	<del></del>	
		<u> </u>			<u> </u>					
	oundation directly or inc ed in section 501(c) of complete the following		ith, or related to r than section	o, one or more t 501(c)(3)) or I	ax-exemp n section	t organizations 527?		Yes	X	No
	) Name of organizati		(b) Type	of organization	1	(c)	Description of re	elationship		
N/A										
	<del>,</del>					<del></del>				
Sign	penalties of perjury, I declar , and complete Declaration	re that I have examined of preparer (other than	this return, includ taxpayer) is base	ing accompanying s d on all information	chedules an of which pre	d statements, and to eparer has any knowl	the best of my knowle edge	May the	RS disc	uss
Here	Year 1	lee L	!	6-15-18	<b>▶</b> 1	PRESIDENT		this return	shown b	pelow?
Sign	ature of officer or trustee			Date		tle		See instr	Yes	No
	Print/Type preparer's nar	me	Preparer's s			Date	Check If	PTIN		لـتـــــــــــــــــــــــــــــــــــ
Paid	JEFFREY O. I	LARGAY	/so	1000		6-14-18	self-employed	P00058	3703	
			RGAY MIH	AYLO & C	0., PI	<del></del>		1009057		
Preparer Use Only				SUITE 260	U., PI	ıC		1003031		
USE UIIIY	_		85012	20115 200			Phone no (60	2) 285-	በፍሰሰ	ı
BAA	1 F	TIOENIA, AL	03017					Form <b>99</b>		
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## **FEDERAL STATEMENTS**

PAGE 2

### **CLELLAND FAMILY FOUNDATION**

26-3910224

STATEMENT 5 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ANNUAL REPORT FEES	TOTAL \$	10. 10.	\$ 10. \$ 10.		\$ 0.

STATEMENT 6 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

ROUNDING

	BOOK	VALUE	 MARKET ALUE
	\$	1.	 
TOTAL	\$	1.	\$ 0.

# STATEMENT 7 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<u>ITEM</u> 1 2 3	JPM # 4008 JPM # 4008 385.784 BL	S/T-COVERE L/T COVERE ACKROCK HIG	D H YIELD BO			(B) ACOUI PURCH PURCH PURCH	RED ASED ASED	(C) DATE ACQUIRED VARIOU VARIOU VARIOU	S S	D) DATE SOLD VARIOUS VARIOUS 4/03/2017
4 5 6 7	241.280 COM 792.753 DOM 201.416 HAM 82.518 JPM	JBLELINE TO	TAL RETURN TABLE SECU	BOND RITIES		ID PURCH PURCH PURCH	ASED	VARIOU VARIOU 7/20/201	'S 4	1/03/2017 1/03/2017 1/03/2017
8 9 10 11 12 13	422.245 JPM 149.972 MA 246.397 RII	M UNCONSTRA TTHEWS ASIA DGEWORTH FI I DIVIDEND	AINED DEBT A DIV INST OS SEIX FLR GROWTH FD TLOAT RETUR	FD- SELECT T HI I I	r Funi	PURCH PURCH PURCH PURCH PURCH PURCH PURCH	ASED ASED ASED ASED ASED	VARIOU VARIOU VARIOU 5/19/201 VARIOU 5/19/201 VARIOU	IS 4 IS 4 IS 4 IS 4	2/08/2017 4/03/2017 4/03/2017 4/03/2017 4/03/2017 4/03/2017 VARIOUS
ITEM 1 2 3 4 5 6 7 8 9	(E) GROSS SALES 26,836. 69,241. 2,986. 3,335. 8,451. 2,179. 814. 4,189. 2,602. 2,158.	(F) DEPREC. ALLOWED	(G) COST BASIS 26,669. 68,940. 2,887. 2,898. 8,859. 1,992. 824. 4,167. 2,104. 2,222.	(H) GAIN (LOSS) 167. 301. 99. 437. -408. 187. -10. 22. 498. -64.	(I FM <u>12/3</u>	ſV	(J) ADJ. BA 12/31/		SS	(L) GAIN (LOSS) 167. 301. 99. 437. -408. 187. -10. 22. 498. -64.

2017	FEDERA	L STATEMENTS	PAGE
•	CLELLAND	FAMILY FOUNDATION	26-391022
STATEMENT 7 (CONTINUED FORM 990-PF, PART IV, LIN CAPITAL GAINS AND LOSS	Ě1	/ESTMENT INCOME	
(E) (F) GROSS DEPRE SALES ALLOW 11 4,101. 12 1,963. 13 219,141.	C. COST	(H) (I) (J) GAIN FMV ADJ. BAS (LOSS) 12/31/69 12/31/6 64064. 21,356.	
STATEMENT 8 FORM 990-PF, PART VI, PENBALANCE DUE  TAX DUE LATE PAYMENT PENALTY LATE INTEREST	IALTY AND INTERE	ST	\$ 447. 4. 2. TOTAL \$ 453.
STATEMENT 9 FORM 990-PF, PART XV, LIN FOUNDATION MANAGERS  F. WESLEY CLELLAND III JULIE H. CLELLAND	· 2% OR MORE CON	TRIBUTORS	
STATEMENT 10 FORM 990-PF, PART XV, LIN RECIPIENT PAID DURING T			
NAME AND ADDRESS	DONI RELATIO		OSE OF ANT AMOUNT

501(C)(3) GENERAL CONTRIBUTION

501(C)(3) GENERAL CONTRIBUTION

8,022.

5,000.

BROPHY COMMUNITY FOUNDATION NONE 4701 N. CENTRAL AVENUE PHOENIX AZ 85012

NONE

NEIGHBORHOOD MINISTRIES 201 EAST WASHINGTON STREET, #1760

PHOENIX AZ 85004

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ZU		1

## **FEDERAL STATEMENTS**

PAGE 4

**CLELLAND FAMILY FOUNDATION** 

26-3910224

### STATEMENT 10 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT		AMOUNT
HARP FOUNDATION 400 W. CAMELBACK RD., SUITE 304 PHOENIX AZ 85013	NONE	501 (C) (3)	GENERAL CONTRIBUTION	\$	1,000.
STANFORD UNIVERSITY 655 KNIGHT WAY STANFORD CA 94305	NONE	501 (C) (3)	GENERAL CONTRIBUTION		5,000.
CHURCH OF THE BEATITUDES 555 W GLENDALE AVE PHOENIX AZ 85021	NONE	501 (C) (3)	GENERAL CONTRIBUTION		10,000.
MANTOR KIDS USA 15300 N. 90TH ST. # 200 SCOTTSDALE AZ 85260	NONE				2,000.
PANDA (UAF/PANDA) 4455 E. CAMELBACK RD. PHOENIX AZ 85018	NONE				5,000.
ST. MARY'S FOOD BANK ALLIANCE 2831 N. 31ST AVE PHOENIX AZ 85009	NONE				1,000.
			TO	OTAL \$	42,022.

#### 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. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

waine of the organization		Employer identification number
CLELLAND FAMILY FOUNDATION		26-3910224
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not to	reated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate	ad ac a private foundation
	=	ed 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) orga	anization can check boxes for both the General F	Rule and a Special Rule See instructions
General Rule		
X For an organization filing Form 990, 990-EZ property) from any one contributor. Comple	r, or 990-PF that received, during the year, contribeted Parts I and II. See instructions for determining	ibutions totaling \$5,000 or more (in money or g a contributor's total contributions
Special Rules		
For an organization described in section 50 under sections 509(a)(1) and 170(b)(1)(A)(vi), received from any one contributor, during the Form 990, Part VIII, line 1h, or (ii) Form 990.	1(c)(3) filing Form 990 or 990-EZ that met the 33 that checked Schedule A (Form 990 or 990-EZ), Par ne year, total contributions of the greater of (1) \$0-EZ, line 1. Complete Parts I and II	3-1/3% support test of the regulations ttl, line 13, 16a, or 16b, and that 55,000 or (2) 2% of the amount on (i)
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that than \$1,000 <i>exclusively</i> for religious, charitable, ochildren or animals. Complete Parts I, II, and III	at received from any one contributor, scientific, literary, or educational I
during the year, contributions exclusively fo \$1,000 If this box is checked, enter here the charitable, etc., purpose Don't complete ar	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that religious, charitable, etc., purposes, but no sucle total contributions that were received during the received during the set of the parts unless the <b>General Rule</b> applies to the received during the set of the parts unless the <b>General Rule</b> applies to the received or more during the received and received the received and received the rece	th contributions totaled more than ne year for an <i>exclusively</i> religious, o this organization because
990-PF), but it must answer 'No' on Part IV. In	he General Rule and/or the Special Rules doesn e 2, of its Form 990, or check the box on line H filing requirements of Schedule B (Form 990, 99 lettors for Form 990, 990-F7, or 990-PF	of its Form 990-EZ or on its Form 990-PF.

	B (Form 990, 990-EZ, or 990-PF) (2017)	Page	1 of 1 of Part I
Name of org	AND FAMILY FOUNDATION	1	r identification number 910224
	Contributors (see instructions). Use duplicate copies of Part I if additional space		910224
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	F. WESLEY CLELLAND III		Person X Payroll
	2398 E CAMELBACK RD, ST 200	\$150,000.	Noncash
	PHOENIX, AZ 85004-2428		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JULIE H. CLELLAND		Person X Payroll
	2398 E CAMELBACK RD, ST 200	\$150,000.	Noncash
	PHOENIX, AZ 85004-2428		(Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for
RΔΔ	TEE A07021 09/00/17	Schedule R (Form 99	noncash contributions )

Employer identification number

1 of Part II

CLELLAND FAMILY FOUNDATION

26-3910224

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A	\$	
(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
		\$	
ВАА	Scho	 edule B (Form 990, 990-E	Z, or 990-PF) (2017

Name of organization
CLELLAND FAMILY FOUNDATION
Part III Exclusively religious, charitable, etc.

Employer identification number 26-3910224

Part III			ations described in section 501(c)(7), (8),	
	or (10) that total more than \$1,000 for t	he year from any one contribute	or. Complete columns (a) through (e) and	
	the following line entry For organizations c contributions of \$1,000 or less for the year	ompleting Part III, enter the total of (Enter this information once, See ii	religious, charitable, etc , nstructions) \$\bigs\\$N/A	
	Use duplicate copies of Part III if additional	space is needed	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	N/A			
	<u> </u>			
		(e) Transfer of gift		
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee	
(-)				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I				
		(e) Transfer of gift		
-	Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee			
	Transferee 3 name, address	S, and En 14	Treatments in transfer to transfer to	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I				
	<u> </u>			
	<u> </u>			
		(e) Transfer of gift		
	Townstown to warm and disco	Polationship of transferor to transferor		
	Transferee's name, addres	is, and ZIP + 4	Relationship of transferor to transferee	
	<u> </u>			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I	Purpose of gift	Use of gift	Description of now gift is neig	
~				
		(a)		
		(e) Transfer of gift		
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee	
	<u> </u>			
BAA			Schedule B (Form 990, 990-EZ, or 990-PF) (2017)	

2017 ·	FEDERAL STATEMENTS	PAGE 1
·	CLELLAND FAMILY FOUNDATION	26-3910224
STATEMENT 1 FORM 990-PF, PART I, LINE 16A LEGAL FEES	(A) (D) NET (C)	(D)
LEGAL FEE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 19. \$ 10. TOTAL \$ 19. \$ 10.	(D) CHARITABLE PURPOSES \$ 9. \$ 9.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCOUNTING FEE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME \$ 3,333. \$ 3,333. TOTAL \$ 3,333. \$ 3,333. \$ 3,333.	(D) CHARITABLE PURPOSES \$ 1,666. \$ 1,666.
STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
BROKERAGE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 2,935. \$ 2,935. TOTAL \$ 2,935. \$ 2,935.	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES		
FEDERAL TAXES FOREIGN TAXES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 578. \$ 578. 160. 160. TOTAL \$ 738. \$ 738.	(D) CHARITABLE PURPOSES \$ 0.