Sorm 990-PF

EXTENDED TO NOVEMBER 15, 2018
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.

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

For ca	alend	lar year 2017 or tax year beginning		, and ending_		
Name of foundation					A Employer identification	on number
CI	JOL	GH FAMILY FOUNDATION			26-409826	7
Numb	oer an	d street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_P	0.	BOX 646	· <u></u>		970-618-5	348/
		wn, state or province, country, and ZIP or foreign pe	ostal code		C If exemption application is	pending, check here
_R	[FI	E, CO 81650-0646				
G C	ieck :	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organization	ns, check here
		Final return	Amended return		2. Foreign organizations n	neeting the 85% test
		Address change	Name change		2. Foreign organizations n check here and attach of	computation
H CI	1	type of organization: X Section 501(c)(3) ex			E If private foundation s	
<u> </u>			Other taxable private founda		under section 507(b)(• • •
		rket value of all assets at end of year J Accountil	-	Accrual		a 60-month termination
(III		art II, col. (c), line 16) Ot 5682455 • (Part I, colun	her (specify) nn (d) must be on cash basi	91	under section 507(b)(1)(B), check here
	rt I				(a) Advicted not	(d) Disbursements
Га		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
\neg	1	Contributions, gifts, grants, etc., received			N/A	(Sas. Sasio Giry)
		Check X If the foundation is not required to attach Sch. B			1	
	3	Interest on savings and temporary cash investments	44853.	44853.	†	STATEMENT 1
1	_	Dividends and interest from securities	122477.	104533.		STATEMENT 2
İ	5a	Gross rents				
Ì	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	114037.			
ž	b	Gross sales price for all assets on line 6a 1049869.				
Revenue	7 £	Sepital gain net income (from Part IV, line 2)		114037.		
~	8/	Net short-term-capital gain				
	p:	pcome modifications		<u> </u>		
	熘	Gross sales less roughs And allowances				
	Ы	Less-Cost one offs AM 10			<u> </u>	
4	_ c	GOSE DIPORTO (1033) 10			 	
	11	OHETINGETH, UT	201265	060400	 	
-	12	Total Add lines Lthrough 11	281367.	263423.		
1	13	Compensation of officers, directors, trustees, etc	0.	0.	-	0.
		Other employee salaries and wages				
es		Pension plans, employee benefits				
nse		Legal fees				
Expens		Accounting fees Other professional fees			 	
e E		Other professional fees Interest			 -	
at.	17		1891.	94.	 	0.
stra	18	Taxes STMT 3 Depreciation and depletion	1091.		'	
in	20	Occupancy			 	
ॗॼॗॸॗ॔ॗ	21	Travel, conferences, and meetings				
F	22	Printing and publications			 	
eg Ga	23	Other expenses STMT 4	3.	0.		0.
⋑≨	24	Total operating and administrative				
era –	-'	expenses. Add lines 13 through 23	1894.	94.	,	0.
OCT @ & 2008 Operating and Administrative	25	Contributions, gifts, grants paid	272700.			272700.
	ι	Total expenses and disbursements				
ŢŢ,		Add lines 24 and 25	274594.	94.	,	272700.
\$	27	Subtract line 26 from line 12:				
SCANNED	ı	Excess of revenue over expenses and disbursements	6773.			
	1	Net investment income (if negative, enter -0-)		263329		AC.
₩ <i>U</i>		Adjusted net income (if negative, enter -0-)			N/A	
						

Form 9	90-PF (2017) CLOUGH FAMILY FOUNDATION	Beginning of year		4098267 Page 2
Part	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
T-1	Cash - non-interest-bearing	(a) DOOK Value	(b) DOOK Value	(C) I all Warket Value
	Savings and temporary cash investments	96253.	77087.	77087.
	Accounts receivable	70233.	77007.	77007.
"	Less: allowance for doubtful accounts			
4	Pledges receivable ►			
'	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			
)	Less: allowance for doubtful accounts ▶			
<u>ه</u> ا	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges		1680.	1680.
ا ¥	a Investments - U.S. and state government obligations STMT 6	182269.	182075.	
	b Investments - corporate stock STMT 7	709531.	648045.	
	c Investments - corporate bonds STMT 8	574238.	573651.	613792.
11	Investments - land, buildings and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other STMT 9	3367685.	3456150.	3959541.
14	Land, buildings, and equipment; basis			
	Less accumulated depreciation			
15	Other assets (describe ►			
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item I)	4929976.	4938688.	5682455.
17	Accounts payable and accrued expenses			
18	Grants payable			
ဖ္တ 19	Deferred revenue			
Liabilities 51 51 51	Loans from officers, directors, trustees, and other disqualified persons			
를 21	Mortgages and other notes payable			
□ ₂₂	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26, and lines 30 and 31			
<u>ဗို</u> 24	Unrestricted			
<u>E</u> 25	Temporarily restricted			
<u>m</u> 26	F			
5	Foundations that do not follow SFAS 117, check here			
Ē	and complete lines 27 through 31			
g 27		4929976.	<u>4938688.</u>	
Net Assets or Fund Balances		0.	<u>0.</u>	
₹ 29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
S 30	Total net assets or fund balances	4929976.	4938688.	
	Tablifishilities and ant constributed belongs	4929976.	4938688.	
31		.	4330000.	<u> </u>
Par	 			
	al net assets or fund balances at beginning of year - Part II, column (a), line	30		10000
•	ust agree with end-of-year figure reported on prior year's return)		1	4929976.
	er amount from Part I, line 27a		2	6773.
-	ner increases not included in line 2 (itemize)	SEE STA	TEMENT 5 3	2476.
	d lines 1, 2, and 3		4	4939225.
	creases not included in line 2 (itemize) EDW JONES - OT			537.
6 To	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	4938688 • Form 990-PF (2017)

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	990-PF (2017) CLOUGH FAMILY FOUNDATION		<u>409826</u>			age 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948 -	see inst	ruc	ction	is)
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: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	1			<u> 26</u>	33.
	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 under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3			<u> 26</u>	33.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			_	<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			26	33.
	Credits/Payments					
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1680					
b	Exempt foreign organizations - tax withheld at source 6b 0					
C	Tax paid with application for extension of time to file (Form 8868) 6c 0					
d	Backup withholding erroneously withheld 6d 0	<u>.</u>				
	Total credits and payments. Add lines 6a through 6d	7			16	80.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8				<u>3.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			9	56.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in		[`	Yes	
	any political campaign?		1:	<u>a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defi	nition	1	b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			1		
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?		1	c		_X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			ł		
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0	<u>.</u>			į	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ O .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		_ 2			_X_
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3			_X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4	a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A 4	b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			,		<u> </u>
	If "Yes," attach the statement required by General Instruction T			İ		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1		
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the sta	te law		H		
	remain in the governing instrument?		_6	<u>:</u>	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 XV		L i	<u>'</u>	X	
			Ì			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.					
	CO			1		
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		8	ь	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar				
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		9			_X_
10	Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their names and addresses		1	0		X
			Form S	an	-DE	(2017)

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Pa	rt VII-A	Statements Regarding Activities (continued)			
				Yes	No
11	At any time	e during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512	2(b)(13)? If "Yes," attach schedule. See instructions	11	L	X
12	Did the fou	indation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," atta	ach statement. See instructions	12		X
13		indation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
		ldress ► N/A			
14		are in care of ► THE FOUNDATION Telephone no. ► 970 – 6			
		▶ P.O. BOX 646, RIFLE, CO ZIP+4 ▶	31650	<u> -06</u>	46
15		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	_	_ , ▶	•
		the amount of tax-exempt interest received or accrued during the year		I/A	- NI -
16		e during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
		or other financial account in a foreign country?	16	L	X
		structions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Pa	foreign cou	Statements Regarding Activities for Which Form 4720 May Be Required			
		n 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
12		year, did the foundation (either directly or indirectly):		1.00	1.10
		ge in the sale or exchange, or leasing of property with a disqualified person?	İ		İ
		w money from, lend money to, or otherwise extend credit to (or accept it from)			
		ualified person? Yes X No			
	(3) Furnis	sh goods, services, or facilities to (or accept them from) a disqualified person?	-		
	(4) Pay co	ompensation to, or pay or reimburse the expenses of, a disqualified person?	}		
	(5) Trans	fer any income or assets to a disqualified person (or make any of either available			
	for the	e benefit or use of a disqualified person)?			
	(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			
	termır	nation of government service, if terminating within 90 days.)			
b		wer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
		1.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	, <u>l 1b</u>	-	
		ons relying on a current notice regarding disaster assistance, check here	!		
C		undation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
		first day of the tax year beginning in 2017?	1c	 	X
2		failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation section 4942(j)(3) or 4942(j)(5)):			
а	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 201	17? Yes X No			
	If "Yes," lıs	st the years \blacktriangleright	İ		
b	Are there a	any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
		of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
		- see instructions.)	2b	 	
C	: If the prov	risions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	D d th - f -	undation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38					
	during the				
		d it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after 969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
		is acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	-	o, to determine if the foundation had excess business holdings in 2017.) N/A	3ь		
A		undation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	+	X
		undation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		1	
•		een removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
			Form 99	0-PF	

Part VII-B Statements Regarding Activities for Which I		Domition of /	<u> 26-40982</u>	67	Page 6
	rom 4/20 May be i	required (continu	ued)	Vac	TAL
5a During the year, did the foundation pay or incur any amount to:	a 4045(a)\C	<u> </u>	₩	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	-	
(2) Influence the outcome of any specific public election (see section 4955), o	or to carry on, directly or indir		s X No	İ	
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes	2		s X No	1	Ì
(4) Provide a grant to an individual for travel, study, or other similar purposes		16	ואו בבו אי	İ	
4945(d)(4)(A)? See instructions	ii described iii section		s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses or	•	ו אונבבו:	1	1
the prevention of cruelty to children or animals?	or caucational purposes, or		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	· · · · · · · · · · · · · · · · · · ·	3 [22] 110		
section 53.4945 or in a current notice regarding disaster assistance? See instr	•	iii riogulationo	N/A	5b	l
Organizations relying on a current notice regarding disaster assistance, check					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		uned			
expenditure responsibility for the grant?		√A	s No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d)	_				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		1		1
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		i	6ь	Х
If "Yes" to 6b, file Form 8870					T
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y6	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highly	1		
Paid Employees, and Contractors					
List all officers, directors, trustees, and foundation managers and t	, 	14.20	(4) (
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense t, other
	to position	(If not paid, enter -0-)	compensation	allow	ances
	1				•
SEE STATEMENT 10	 	0.	0.		_0.
	-				
	-				
	-				
	1				
Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."	·		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Ex	pense t, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accoun	t, other ances
NONE					
	<u> </u>				
		<u> </u>			
		<u> </u>			
	L		<u> </u>	L	
Total number of other employees paid over \$50,000				000 DE	0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
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		
	4	
	 	
	4	
	-	
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 statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the ced, etc	Expenses
1 N/A		
2		
3		
*		
4		
Part IV-B Cumment of Dragram Deleted Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on file.	nes 1 and 2	Amount
1 N/A	Turid 2.	Amount
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3		0.
		Form 990-PF (2017)

P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	$\Box \Box \Box$	
	Average monthly fair market value of securities	1a	5466255.
	Average of monthly cash balances	1b	38807.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	5505062.
e	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	5505062.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	82576.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5422486.
6	Minimum investment return. Enter 5% of line 5	6	271124.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at foreign organizations, check here ▶ ☐ and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	271124.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	2633.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	268491.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	268491.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	268491.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		1a	272700.
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:		
а		3a	
þ	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	272700.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		0.00
	income. Enter 1% of Part I, line 27b	5	<u>2633.</u>
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	270067.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	ne section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				
line 7				268491.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			10987.	
b Total for prior years:	I			
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014				
d From 2015		Ti.		
e From 2016	•			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 272700.			10007	
a Applied to 2016, but not more than line 2a			10987.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2017 distributable amount				261713.
e Remaining amount distributed out of corpus	0.			201713.
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a)				•
6 Enter the net total of each column as indicated below				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	l		
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		1		
undistributed income for which a notice of deficiency has been issued, or on which			į	
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 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				6880
be distributed in 2018			 	6778.
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 2012	0.			
not applied on line 5 or line 7			 	
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	0.	į		
10 Analysis of line 9:		 -	 	
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				

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Form **990-PF** (2017)

	FAMILY FOUNI			26-40	98267 Page 1
Part XIV Private Operating Fo	undations (see inst	tructions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that i	it is a private operating			_
foundation, and the ruling is effective for 2	2017, enter the date of th	ne ruling	▶ <u> </u>		
b Check box to indicate whether the found <u>a</u>	tion is a private operating	g foundation described	in section	4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	····	Prior 3 years]
income from Part I or the minimum	(2) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
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	1				
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	İ			/	
e Qualifying distributions made directly				-	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
` '					
(2) Value of assets qualifying			1		
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter		<i></i>	<u> </u>		<u> </u>
2/3 of minimum investment return					
shown in Part X, line 6 for each year					i
listed			- 		ļ
c "Support" alternative test - enter				,,,	
(1) Total support other than gross					Į.
investment income (interest, dividends, rents, payments on					
securities loaps (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					L
(4) Gross investment income					
Part XV Supplementary Infor	mation (Complet	te this part only	if the foundatio	n had \$5,000 or m	ore in assets
at any time during th	ne year-see instr	uctions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	-	han 2% of the total co	ntributions received by th	ne foundation before the clo	se of any tax
year (but only if they have contributed me			,		,
NONE					
b List any managers of the foundation who	own 10% or more of the	stock of a corporation	n (or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation has			(
NONE					
2 Information Regarding Contribution	on Grant Gift Loan	Scholarship etc. I	Programs:		
Check here ▶ ☐ If the foundation on				not accept unsolicited requ	iests for funds. If
the foundation makes gifts, grants, etc., t					addition for fairfall fi
a The name, address, and telephone numb	er or email address of th	e nerson to whom ann	lications should be addre	esed.	
a The hame, address, and telephone hamb	ci di cinali addicese ci ai	o porson to unioni app	ilications should be addit		
SEE STATEMENT 11					
b The form in which applications should be	a cultimitted and informat	ion and materials they	chould include:		
I The form in which applications should be	; Suprimited and informat	ion and materials they	Siloulu iliciuue.		
					
c Any submission deadlines:					
		1			
d Any restrictions or limitations on awards,	, such as by geographica	ıl areas, charıtable field	s, kinds of institutions, o	r other factors:	
723601 01-03-18					Form 990-PF (2017

NONE			
NONE			
NONE			
NONE			
NONE			
NONE			
NONE			
NONE			
NONE	1		
NONE			
I I			
b Approved for future payment			
Total SEE CONTINUATIO	N SHEET(S)	► 3a	272700.
RIFLE CO 81650)	CENTER.	30000.
569 CR 265		FUNDING: ANIMAL CARE	
FRIENDS OF RIFLE ANIMAL SHELTER	₽C	CAPITAL IMPROVEMENTS	
PENSACOLA, FL 32502			30000.
40 SOUTH ALCANIZ ST		INDIVIDUALS.	
IHMC: FLORIDA INSTITUTE FOR HUMAN & MACHINE COGNITION	₽C	SUPPORT FOR RESEARCH: MOBILITY IMPAIRED	
TUMO. PLODIDA INCRIMINE POD HIMAN C	DC.	CIIDDODE EOD DECENDOS	
		GRANT REQUEST.	10000.
GRAND JUNCTION, CO 81502		PRESERVATION PROGRAM:	
PO BOX 2771		WILD MUSTANG	
FRIENDS OF THE MUSTANGS	₽C	SUPPORT OPERATIONS OF	
KIFHE, CO 01030			15000.
1100 EAST 16TH STREET RIFLE_CO 81650		SUPPLEMENTAL FUNDING.	15000.
HUMANITIES		PROGRAM EXPENSES:	
BOOKCLIFFS COUNCIL ON THE ARTS &	₽C	SUPPORT GENERAL	
		RENDEZVOUS.	5000.
RIFLE, CO 81650		ANNUAL COMMUNITY	5000
PO BOX 1876		PROGRAM EXPENSES:	
RIFLE RENDEZVOUS FESTIVAL	₽C	SUPPORT GENERAL	
a Paid during the year	75110100101		
Name and address (home or business) any foundation or substantial	n manager status of	contribution	Amount
Recipient If recipient is an show any rela	ı ındıvıdual, ıonship to Foundatior	n Purpose of grant or	
3 Grants and Contributions Paid During the Year or Approved			

	Analysia of Income Producing Activities
Part XVI-A	Analysis of Income-Producing Activities

	Maralated I	hucinoss incoms	I =		
Enter gross amounts unless otherwise indicated.	(a) Business code	business income (b) Amount	(C) Exclu- sion code	ed by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code		
a	-		 		
b	1 1				
c	1 1		-		
d	1		 		
e	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					44853.
Dividends and interest from securities					122477.
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			1		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					114037.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b					
c	1 1				
d					
e	_				
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	
13 Total Add line 12, columns (b), (d), and (e)				13	<u>281367.</u>
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accon	nplishment of Ex	cempt	Purposes	
Line No Explain below how each activity for which in the foundation's exempt purposes (other than the foundation).			contribi	uted importantly to the accor	nplishment of
THE FOUNDATION IS A P	RIVATE FO	UNDATION DE	SCR	IBED IN IRC S	EC 509(A)
THAT MAKES GRANTS TO					
BASIS. ONE OF ITS PR	IMARY PUR	POSES IS GR	LANT	MAKING.	
					
			_		
				·	

	Exempt Organ	izations						_	
	organization directly or indir				on described in secti	on 501(c)		Yes	No
,	han section 501(c)(3) organ								
	rs from the reporting founda	ition to a noncharitat	ole exempt org	janization of:			4-44		v
(1) Ca	sn ner assets						1a(1)	-	X
٠,,	ansactions:						1a(2)	_	
	les of assets to a noncharital	hle exempt organizat	ion				1b(1)		x
٠,	rchases of assets from a noi	· -					1b(2)		X
٠,	ntal of facilities, equipment,	•	•				1b(3)		X X X
(4) Re	imbursement arrangements						1b(4)		X
(5) Lo	ans or loan guarantees						1b(5)		X
(6) Pe	rformance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		X
	g of facilities, equipment, ma						1c		X
	nswer to any of the above is							sets,	
	ices given by the reporting for (d) the value of the goods,			ed less than fair market valu	ie in any transaction	or sharing arrangement, s	how in		
a) Line no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and	eharing at	ranceme	
2,2	(b) / intodire into into	(o) name of	N/A	gamzation	(G) Sessinguisti	or tailoids, trailoctions, and		rangeme	
				<u>-</u>					
_									
_				 					
_									
_	<u> </u>	 							
									
									
_							<u> </u>		
2a Is the	oundation directly or indirec	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
	ion 501(c) (other than section						Yes	X] No
	complete the following sch								
	(a) Name of org	janization		(b) Type of organization		(c) Description of relations	hip		
	<u> N/A</u>								
			 -						
		_			 				
- Lui	nder penalties of perjury, I declare	that I have examined thi	s return, includin	a accompanying schedules and	statements, and to the	best of my knowledge			
	d belief, it is true, correct, and co					has any knowledge retu	y the IRS irn with th	ne prepar	rer
Here	X. Sterry	Sander		7/74/18	K hear		wn below X Yes		No
	Signature of officer or trustee	2		Date	Title				_ 110
	Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check If PTIN			
	ROGER D. M	ROGER D. MAGGARD,			_5	self- employed			
Paid	CPA								<u>' </u>
Prepare	1 5	GARD & HC	OD, PC			Firm's EIN ► 84-0			
Use On	· ————					ļ			
	Firm's address ▶ 27								_
	I GI	LENWOOD SP	RINGS,	CO 81601		Phone no. (970)			
						Fo	orm 99 0	U-PF	(2017)

CLOUGH FAMILY FOUNDATION 26-4098267 PAGE Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold Purchase 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) D - Donation INVESCO INVESTMT GR 01/03/1412/28/18 PRIN 06/15/1112/28/18 b INVESCO INVESTMT GR P PRIN c VAN KAMPEN BLD AMER BD- PRIN P 08/19/0912/28/18 d VAN KAMPEN BLD AMER BD - PRIN P 0<u>8/19/09</u>12/28/<u>1</u>8 e INVESCO EAFE SELECT Ρ 10/20/1501/01/17 05/23/1605/18/17 f APPLE INC 0<u>7/22/</u>1607/10/17 g APPLE INC h APPLE INC VARIOUS 07/10/17 GILEAD SCIENCES INC 06/13/1605/18/17 | KIMCO REALTY CORP <u>02/15/1708/</u>16/<u>1</u>7 k QUALCOMM INC 04/06/1708/16/17 I FRANKLIN TEMPLETON GLOBAL BAL FD <u>VARIOUS 08/16/17</u> m FRANKLIN TEMPLETON GLOBAL BAL FD 04/21/1505/24/17 n FRANKLIN TEMPLETON GLOBAL BAL FD VARIOUS 08/16/17 o INVESCO GLOBAL REAL ESTATE 07/08/1305/24/17 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 0. 7. 5 . 0. 5. 555. 555. 0. 862. 0. 862. -6599. 61391. 67990. 50142. 17704. 32438. 35823. 24994. 10829. 32946 22691 10255. 18474 24988. -6514. 12060. 15577. -3517. -2970. 36579. 39549. k 1511. 1573. -62. 28210. 29465. -1255.m 162651. 169335. -6684. n 41790. 43407. -1617. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col (j), if any 0. 0. b 0. 0. -6599. 17704. 10829. 10255. h -6514. -3517. -2970. -62. 1 -1255. m -6684. n -1617. If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 2 Capital gain net income or (net capital loss) 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

150	Capital Gains and Los	ses for lax on investment income		
		describe the kind(s) of property sol ck warehouse; or common stock, 2		(b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr.) (mo., day, yr.)
1a_	ABBVIE INCORPOR	RATED		02/25/1610/11/17
	CONOCO PHILLIPS			08/20/1508/16/17
_c	INVESCO GLOBAL	45 DIV STRATEGY	01/06/1604/06/17	
	INVESCO NEW WOR	RLD LEADERS	06/13/1609/07/17	
	US BANCORP			10/20/1502/14/17
	INVESCO LTD			
	INVESCO INTL D			11/12/1511/03/17
<u>h</u>	CAPITAL GAINS I	DIVIDENDS		
				
_ <u>k</u>				
<u>m</u>				
<u>n</u>				
_0	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
_	22006	(or anowabic)		<u></u>
<u>a</u>	22096. 27042.		13969. 30450.	8127.
<u>b</u> _	74486.		67390.	-3408. 7096.
<u>c</u> d	102170.		88372.	13798.
	31603.		24977.	6626.
e f	54083.		60586.	-6503.
<u>'</u>	188010.		11358.	
h h	67373.		176652.	67373.
ī				
]				
k				
<u>_</u>				
m				
n				
0				
	Complete only for assets showin	g gain in column (h) and owned by		(I) Losses (from col. (h))
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
_		as 01 12/3 1/03	over col. (j), ii arry	0107
<u>a</u>				8127.
<u>b</u>				-3408. 7096.
<u>c</u>			 	13798.
e e				6626.
f				-6503.
g				11358.
h				67373.
<u> </u>				
1				
k				
1				
m		<u> </u>		
n			 	
0				
2	Capital gain net income or (net ca	ortal loss) { If gain, also ente	r in Part I, line 7 0-" in Part I, line 7	2 114037.
_	•		, I	11403/
3	Net short-term capital gain or (los If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) a column (c).	iiu (o)	
	If (loss), enter "-0-" in Part I, line 8		J	3 N/A

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	show any relationship to Foundation Purpose of grant or status of contribution		Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
GULF COAST KID'S HOUSE		PC	SUPPORT GENERAL	
3401 N. 12TH AVENUE			PROGRAM EXPENSES:	
PENSACOLA, FL 32503			ABUSED CHILDREN.	2000.
HARMONY ACRES EQUESTRIAN CENTER		PC	SUPPORT FOR PROGRAM	
PO BOX 38		FC	EXPANSION PROJECT.	
FRUITA, CO 81521			DATIMOTOR TROODET.	2000.
				_
TRUTH IN THE WORD		₽C	SUPPORT FOR EDUCATION	
3607 FRONT ST PALISADE_CO_81526			PROGRAMS IN COSTA RICA	5200.
FAUISADE, CO 01320		 	& TURTLE PROJECT.	<u></u>
FRIENDS OF THE MUSTANGS		PC PC	SUPPORT OPERATIONS OF	
PO BOX 2771			WILD MUSTANG	
GRAND JUNCTION, CO 81502			PRESERVATION PROGRAM:	
		 	FENCES/WATERING POND,	10000.
GARFIELD COUNTY SCHOOL DISTRICT RE-2		PC	SUPPORT: 2016-2017	
839 WHITERIVER AVE			TEACH OF THE YEAR	
RIFLE, CO 81650	 		AWARDS.	5000.
ASPEN COMMUNITY FOUNDATION		PC	SUPPORT FOR PRESCHOOL	
110 E HALLAM ST #126			ON WHEELS PROGRAM:	
ASPEN, CO 81611	 		GARFIELD RE-2.	5000.
		1		
THE LEANING POST RANCH		PC	SUPPORT FOR EQUINE	
4150 CEDAR SPRINGS ROAD			PROGRAMS: PERSONS WITH	
MOLINO, FL 32577		-	DISABILITIES.	3000.
REACH OUT COLORADO INC		PC	SUPPORT: EMERGENCY	
111 E 3RD STREET			ASSISTANCE PROGRAMS.	
RIFLE, CO 81650	 	<u> </u>		5000,
LITERACY OUTREACH		₽C	SUPPORT OPERATIONS:	
1127 SCHOOL STREET			ADULT LITERACY	
GLENWOOD SPRINGS, CO 81601	 	<u> </u>	PROGRAMS.	5000.
TIPLE DI ONIONI INCOMPANIONI DODININA				
IHMC: FLORIDA INSTITUTE FOR HUMAN & MACHINE COGNITION		PC	SUPPORT FOR	
MACHINE COGNITION 40 SOUTH ALCANIZ ST			MULTI-MEDIA LAB: MOBILITY IMPAIRED	
PENSACOLA, FL 32502			INDIVIDUALS.	25000.
Total from continuation sheets				182700.

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	35.11.150.15.1	
FRIENDS OF RIFLE ANIMAL SHELTER		PC	CAPITAL IMPROVEMENTS	
569 CR 265			FUNDING: ANIMAL CARE	
RIFLE, CO 81650	 		CENTER.	20000
AMERICAN VETERINARY MEDICAL		PC	SUPPORT FOR CHAIRABLE	
FOUNDATION			VETERINARY SERVICES:	
1931 N MEACHAM RD			VALLEY VETERINARY	
SCHAUMBURG, IL 60173	<u> </u>	<u> </u>	HOSPITAL RIFLE CO.	5000
		ļ		
CHILDREN IN CRISIS INC		PC	SUPPORT: FOSTER CHILD	
1000 LIKE AVE			CARE FOR AT RISK	
FORT WALTON BEACH, FL 32547	<u> </u>		CHILDREN.	5000
FRIENDS OF THE MUSTANGS		PC	SUPPORT FOR	
PO BOX 2771		FC	OPERATIONS: WILD	
GRAND JUNCTION, CO 81502			MUSTANG PRESERVATION	
			PROGRAM.	10000
GARFIELD COUNTY PUBLIC LIBRARY		PC	SUPPORT: YOUTH	
DISTRICT 207 EAST AVENUE			PROGRAMS.	
RIFLE CO 81650				2500
HEAVENLY BLESSING MINISTRY		PC	SUPPORT OPERATING	
1614 NORTH T STREET			EXPENSES: HOMELESS	
PENSACOLA FL 32505			SHELTER.	10000
IHMC: FLORIDA INSTITUTE FOR HUMAN &		PC	SUPPORT FOR RESEARCH:	
MACHINE COGNITION 40 SOUTH ALCANIZ ST			MOBILITY IMPAIRED	
PENSACOLA FL 32502			INDIVIDUALS.	30000
MAKE A WISH FOUNDATION OF COLORADO		PC	SUPPORT OPERATING	
7951 E MAPLEWOOD AVENUE STE 126			EXPENSES: PROGRAMS FOR	
GREENWOOD VILLAGE, CO 80111			CHILDREN WITH CRITICAL	5000
MIRACLE FLIGHTS		PC	SUPPORT EXPENSES:	5000
5740 S EASTERN AVE STE 240			MEDICAL FLIGHTS FOR	
LAS VEGAS, NV 89119			CHILDREN & FAMILIES TO	
			AND FROM COLORADO	
		 	LOCATIONS.	10000
FRIENDS OF RIFLE ANIMAL SHELTER		PC	CAPITAL IMPROVEMENTS	
569 CR 265			FUNDING: ANIMAL CARE	
RIFLE, CO 81650 Total from continuation sheets		<u> </u>	SHELTER.	10000

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient RIFLE HIGH SCHOOL PC FUNDING FOR RIFLE HIGH 1350 PREFONTAINE AVE SCHOOL GIRLS RIFLE CO 81650 BASKETBALL PROGRAMS. 3000. TRUTH IN THE WORD PC SUPPORT: EDUCATION 3607 FRONT ST PROGRAMS IN COSTA RICA PALISADE, CO 81526 & TURTLE PROJECT. 5000. Total from continuation sheets

FORM 990-PF INT	EREST ON	SAVING	S AND TEM	PORARY	CASH I	NVESTMENTS	STA'	TEMENT	1
SOURCE			REVE	(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME			
EDWARD JONES				44853.		44853.			
TOTAL TO PART I,	LINE 3			44853.		44853.			
FORM 990-PF	DIV	IDENDS	AND INTER	EST FR	OM SECU	RITIES	STA	TEMENT	2
SOURCE		OSS OUNT	GAINS	R.	EVENUE	(B) NET INVES MENT INCO	ST-	ADJUSTE	ED ME
EDWARD JONES EDWARD JONES - T EXEMPT DIVIDENDS	'AX	71906. 17944.	6737	3. 0.	104533 17944		33.		
TO PART I, LINE	4 1	89850.	6737	3. ====================================	122477	. 10453	33.		_
FORM 990-PF			TAX	ES			STA	TEMENT	
DESCRIPTION		_	(A) EXPENSES PER BOOKS	NET I	NVEST-	(C) ADJUSTEI NET INCON		CHARITAE	3LE ES
FEDERAL INCOME TAXES EDW JONES - FOREIGN TAXES		1797. 94.	0.					0.	
TO FORM 990-PF, PG 1, LN 18			1891.		94.		0.		

FORM 990-PF	OTHER E	XPENSES			STATEMENT	4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC				TABLE	
OFFICE SUPPLIES	3.		0.			0.	
TO FORM 990-PF, PG 1, LN 23	3.		0.			0.	
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FU	ND BAI	LANCES	STATEMENT	<u></u> 5	
DESCRIPTION					AMOUNT	_	
EDW JONES - INCOME REPORTED IN		R				02. 7 4 .	
TOTAL TO FORM 990-PF, PART II	I, LINE 3				24	76.	
FORM 990-PF U.S. AND S	TATE/CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT		
DESCRIPTION	U.S GOV'		BOOI	K VALUE	FAIR MARKE VALUE	т	
MUNICIPAL BONDS	X			182075.	1899	48.	
TOTAL U.S. GOVERNMENT OBLIGAT	IONS	-		182075.	1899	48.	
TOTAL STATE AND MUNICIPAL GOV	ERNMENT OBL	IGATIONS					
TOTAL TO FORM 990-PF, PART II	, LINE 10A			182075.	1899	48.	
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7	
DESCRIPTION			BOO	K VALUE	FAIR MARKE VALUE	т	
CORPORATE STOCK				648045.	8404	07.	
TOTAL TO FORM 990-PF, PART II	, LINE 10B	•		648045.	8404	07.	

FORM 990-PF	CORPORATE BONDS		STATEMENT (
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
CORPORATE BONDS	-	573651.	613792	
TOTAL TO FORM 990-PF, PART II	, LINE 10C	573651.	613792	
FORM 990-PF	OTHER INVESTMENTS		STATEMENT	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
UNIT TRUSTS	COST	353420.	342932	
MUTUAL FUNDS ETF & CLOSED END FUNDS	COST COST	2437925. 664805.	2919662 6969 4 7	
TOTAL TO FORM 990-PF, PART II	, LINE 13	3456150.	3959541	

	- LIST OF OFFICERS, D S AND FOUNDATION MANA		STATI	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	_
BONNIE MCKENZIE P.O. BOX 1850 RIFLE, CO 81650	PRESIDENT 2.00	0.	0.	0.
S. STORMY ANDERSON P.O. BOX 646 RIFLE, CO 81650	TREASURER 2.00	0.	0.	0.
SHARON BISTLINE 2105 W. 2ND AVE RIFLE, CO 81650	SECRETARY 2.00	0.	0.	0.
DAVID RYAN MCKENZIE 1402 W. 2ND ST RIFLE, CO 81650	DIRECTOR 1.00	0.	0.	0.
THOMAS STUVER P.O. BOX 907 RIFLE, CO 81650	ATTORNEY 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	AGE 6, PART VIII	0.	0.	0.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

CLOUGH FAMILY FOUNDATION % STUVER & LEMOINE, PC P.O. BOX 907 RIFLE, CO 81650

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

970-625-1887 CLOUGH FAMILY FOUNDATION

FORM AND CONTENT OF APPLICATIONS

SUBMIT LETTER OF REQUEST FOR FUNDING; CLOUGH FAMILY FOUNDATION GRANT APPLICATION WILL THEN BE MAILED TO PROPOSALS THAT MEET FOUNDATION OBJECTIVES. COMPLETED APPLICATION MUST INCLUDE: 1) PROJECT BUDGET; 2) OPERATING BUDGET; 3) BOARD OF DIRECTORS LISTING; 4) AUDITED FINANCIAL REPORTS; 5) COPY OF APPROVED 501(C)(3) OR OTHER CHARITABLE STATUS.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

N/A