

🏡 990-PF

Department of the Treasury

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

DEC 31 2018

OMB No 1545-0052

2017

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

Open to Public Inspection

Inte	rnal Rever	hue Service ► Go to www.irs.gov/Form990PF fo	or instructions	and th	e lates	t information	on. I (Open	to Public Ins	pection
		dar year 2017 or tax year beginning		2017,	and e		r identification r	umbo	, 20	
	ame of fo					A Employe			31	
		dation for Research and Education		D/-		D. Talaahaa	45-5464			
Ni	ımber an	d'street (or P O box number if mail is not delivered to street address)		Room/s	suite	B Telephon	e number (see ın		·	
		dlers Green Cir, 14th Fl					303-495			
	•	n, state or province, country, and ZIP or foreign postal code				C If exempt	ion application is	pendi	ing, check he	ere ▶ ∐
_		d Village, CO 80111-5024		(1					
G	Check	all that apply. ☐ Initial return ☐ Initial return ☐ Amended		ublic c	narity	D 1. Foreign	n organizations, o	check I	here	▶∐
							organizations m			
	Ohaal	<u> </u>		tion//			here and attach of foundation status			
п		type of organization:			1		07(b)(1)(A), check			▶ 🗌
무					arual					
•		narket value of all assets at J Accounting method f year (from Part II, col (c), Other (specify)	ı. 🗀 Casıı 🖰	∠ ACC	Juai		ndation is in a 60 ction 507(b)(1)(B),			` ▶□
	line 16		on cach bacie	``		ander sec	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	011001		۔ ں
•	art I	*******							(d) Disburs	ements
	arti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue a expenses pe			nvestment	(c) Adjusted r	net	for chard	table
		the amounts in column (a) (see instructions))	books		inc	come	income		purpos (cash bass	
_	1	Contributions, gifts, grants, etc., received (attach schedule)	225	3 664 5	(衛体)外	\$77 .6 78			5.28 (A) SE	<u> </u>
	2	Check ► ☐ If the foundation is not required to attach Sch. B	**************************************	,004 :			nanomanininininininininininininini			1000mmon
	3	Interest on savings and temporary cash investments		*		O K NOW CHAPTON	F13. 10.14 F1 17F	<i>i</i>		3003
<u> </u>	4	Dividends and interest from securities .				-				N
5	5a	Gross rents							444	34.83
9	b	Net rental income or (loss)	Sale of the sale	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		STANCE.		NO.	Ya Yan	2444
_	6a	Net gain or (loss) from sale of assets not on line 10		ê		12.28.2.V	TO THE STATE OF	100 m		SOF IN
ה ה ה	Ь	Gross sales price for all assets on line 6a	X35 N. 134.5	100 5 10		04723754	STEELEN TH	為政	金を変われ	
™AN ⊈ Revenue	7	Capital gain net income (from Part IV, line 2)	(3) 福州(3)				经现代对数据		が発送	<i>4</i> 48
~ ~	8	Net short-term capital gain	THE WAY	% <u>;</u> ,,	SAME.	で発売さ			於認識的	EXE
	9	Income modifications	The major at the		S. C.	学院200 次			的最初	200
	10a	Gross sales less returns and allowances	35,000	:	ale a les				AND THE	<u> </u>
	b	Less. Cost of goods sold	34.360 W.A	The state of	\$ Y 17 17 18		The state of the s	A.B.		
	C	Gross profit or (loss) (attach schedule)		- 18		2. A. S.			3 3 2 7 7 7	<u> </u>
	11	Other income (attach schedule)							**************************************	- 100 Per 10
	12	Total. Add lines 1 through 11	338	3,664						後別等的
S	13	Compensation of officers, directors, trustees, etc.		- -		ECEI	/ED			
Expenses	14	Other employee salaries and wages		-+	<u></u>	EVEL		-	_	
be	15	Pension plans, employee benefits		-	0	-	M18 9	\vdash		
ŭ	16a	Legal fees (attach schedule)		18	3 1	10V 2	2018 B	\vdash		
ě	b	Other professional fees (attach schedule)				12	<u>\</u>	1		
ati	17	Interest		- 1		GDE	J. UT	1		
str	18	Taxes (attach schedule) (see instructions)		t		/(//-	***			
Ξ.	19	Depreciation (attach schedule) and depletion .								
톴	20	Occupancy								VALUE RE SEIGN
Ă	21	Travel, conferences, and meetings	46	5,648	•					46,648
Ē	22	Printing and publications								
9	23	Other expenses (attach schedule)	307	7,909					2	273,673
ţį	24	Total operating and administrative expenses.								
e T		Add lines 13 through 23	354	1,557					3	320,321
Operating and Administrativ	25	Contributions, gifts, grants paid	126	5,512		53 ST (\$100)		3%	1	<u> 26,512</u>
_	26	Total expenses and disbursements. Add lines 24 and 25		,069		0000 Beering / John Barry 1			4	46,833
	27	Subtract line 26 from line 12								
	а	Excess of revenue over expenses and disbursements	(142	,404)				**************************************	400	
	b	Net investment income (if negative, enter -0-)	200		None a Autom	aking ang pan		SING.	9 10 10 10 10 10 10 10 10 10 10 10 10 10	562
	l c	Adjusted net income (if negative, enter -0-)								

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2017)

91,25

		Attached schedules and amounts in the description column	Beginning of year	End o	of year
5	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	543,078	434,910	434,910
	2	Savings and temporary cash investments	\		
	3	Accounts receivable ►			1.5
		Less allowance for doubtful accounts ► Pledges receivable ►			
	4				
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	l	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶		CALCO FROM	建建定长级。如
		Less. allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments – corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment, basis ▶	100 A		
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments-mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment. basis ▶		的。为其他的人的	
	(Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ► Training Equipment)	40,024		
	16	Total assets (to be completed by all filers-see the			,
		instructions. Also, see page 1, item l)	583,102	434,910	434,910
	17	Accounts payable and accrued expenses	5,788		
S	18	Grants payable			
Liabilities	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
ia	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶)			Mark Land
	23	Total liabilities (add lines 17 through 22)	5,788		
·/^		Foundations that follow SFAS 117, check here ▶ ☑			
ë	}	and complete lines 24 through 26, and lines 30 and 31.			
ă	24	Unrestricted	101,147	0	
nd Balances	25	Temporarily restricted	476,167	434,910	
9	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here ▶ □	,		
r Fu		and complete lines 27 through 31.			
or,	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
t A	30	Total net assets or fund balances (see instructions)	577,314	434,910	
Ne	31	Total liabilities and net assets/fund balances (see			
		instructions)	583,102	434,910	
	rt III	Analysis of Changes in Net Assets or Fund Balances		,	
1		net assets or fund balances at beginning of year-Part II, colu		-	
		of-year figure reported on prior year's return)		1	577,314
2		r amount from Part I, line 27a			(142,404)
3		r increases not included in line 2 (itemize) ▶			
4		lines 1, 2, and 3		4	434,910
5	Decr	eases not included in line 2 (itemize) ► net assets or fund balances at end of year (line 4 minus line 5)—l	Double ashire /5)	5	
6	ıotal	net assets or fund balances at end of year (line 4 minus line 5)—I	-art II, column (b), lii	ne 30 6	434,910

Part	V Capital Gains and	Losses for Tax on Investm	ent Income				
·	(a) List and describe the kin	nd(s) of property sold (for example, real esse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date ad (mo , da		(d) Date sold (mo , day, yr)
1a							
b			<u>.</u>				
С							
<u>d</u>							
ее		(D Danis and an all and a	(a) Cast as	ather bear	<u> </u>	(h) Co	n or (loss)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			(f) minus (g))
a							
<u>b</u>				·			
<u>C</u>							
<u>d</u>					_	· · ·	
e	Complete only for assets sho	wing gain in column (h) and owned l	ov the foundation	on 12/31/69		Gaine (Co	I (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any		t less than -0-) or from col (h))	
а							
b	····································						
С							
d							
е							
2	Capital gain net income or		also enter in Pa enter -0- in Pai		2		
3		n or (loss) as defined in sections I, line 8, column (c). See instru			3		
Part		er Section 4940(e) for Redu	ced Tax on N	let Investment			
		vate foundations subject to the				me)	
Was t	s," the foundation doesn't q	section 4942 tax on the distributualify under section 4940(e) Do	not complete t	his part.			∐ Yes ☑ No
1		ount in each column for each yea	ır; see the instru	uctions before m	akıng any	entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) f noncharitable-use a	ssets		(d) tribution ratio divided by col (c))
	2016	48	9,959	71	0,971		0.6891
	2015	33	0,879	65	0,445		0.5087
	2014		9,141		5,711		0.3847
	2013		9,044		2,118		0.5233
	2012	9	2,845	18	18,324		0 4930
2 3		for the 5-year base period—divoudation has been in existence					2.5988
	•				4		0.5198
4		charitable-use assets for 2017 fr	om Part X, line	5			515,606
5	Multiply line 4 by line 3 .				. 5		268,012
6	Enter 1% of net investmer	nt income (1% of Part I, line 27b))		. 6_		
7	Add lines 5 and 6				. 7		268,012
8	Enter qualifying distribution If line 8 is equal to or great Part VI instructions.	ns from Part XII, line 4	 Part VI, line 1b	, and complete	. 8 that part u	sing a 1	446,833 % tax rate. See the

Part		-see i	nstructi	ons)
`1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.	Hooke Hooke		
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	1		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	10 0	the a Section	ant donner d
	here ► ✓ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of J Part I, line 12, col. (b).		7-0-2-32	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	J		
3	Add lines 1 and 2			+
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	-	1 27 20 36 36	N 308 A
6	Credits/Payments.			
a	2017 estimated tax payments and 2016 overpayment credited to 2017			
b	Tax paid with application for extension of time to file (Form 8868) . 6c			
c d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d	Z Zierii		,
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	1		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . > 10			<u> </u>
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11			
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or oparticipate or intervene in any political campaign?		Ye 1a	s No ✓
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See instructions for the definition	the .	1b	✓
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	erials	5.3	
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?		1c	✓ •ו 2 0000 9 5 4 7 . V
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposon foundation managers. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		2	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	es of	3	✓
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	5	√ 88 88-558 1
_	If "Yes," attach the statement required by General Instruction T			8.4
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. • By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions conflict with the state law remain in the governing instrument?		6 🗸	23.23
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 Col. (c), and Part II, col. (c), and Pa	rt XV	7 🗸	70 Y 18, 600 Y 1
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
b	Delaware, Colorado If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger	neral		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	.	8b ✓	50\scs24
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(4942(j)(5)) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Y complete Part XIV	(১) or Yes,"	9 🗸	2
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	their		
	names and addresses	•	10 ✓	
		Fo	rm 990-P	F (2017)

"Part	VII-A Statements Regarding Activities (continued)			
•		34,5	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		1
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	d 12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	? 13	1	
	Website address ► N/A	.,		
14	The books are in care of ► Karl Metcalf Telephone no. ►	303-495		
45	Located at ► 6363 S Fiddlers Green Cir, 14th FI, Greenwood Village CO ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	80111-	5024	<u> </u>
15	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authorit	y	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name	of		
Dow	the foreign country ► VII-B Statements Regarding Activities for Which Form 4720 May Be Required			255-34
Pair	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.	17.000	Yes	No
1a	During the year, did the foundation (either directly):	1.7.4		2004
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes N	o 🔯		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	100	1984	2.7
	disqualified person?	200		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . ☐ Yes ✓ N (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . ☐ Yes ✓ N	. 150		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . ☐ Yes✓ N(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)?	o 🖓		3%
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1500		
	foundation agreed to make a grant to or to employ the official for a period after	# J. J.		3.5
	termination of government service, if terminating within 90 days)	CON 1885		
n	section 53,4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Constitution of
	Organizations relying on a current notice regarding disaster assistance, check here	1 1000	W. Carry	17.53
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the			
2	were not corrected before the first day of the tax year beginning in 2017?	e Ic	332	V
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		100	
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 2017?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			1000
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	2) [7445] 2) [3]		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) t	o 🔯		
	all years listed, answer "No" and attach statement—see instructions)	2b	6 42300 as 20	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 , 20 , 20 , 20			1
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	o 🤼		34.11
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation of			25
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	e 🚞		
	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 determine if the			
	foundation had excess business holdings in 2017)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes			/
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it	s 🚉		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017	? 4b	<u> </u>	✓

_	-
Page	: 0

Part	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	lequir	ed (contir	nued)			
` 5a		the year, did the foundation pay or incur									Yes	No
	(2) Influ	y on propaganda, or otherwise attempt the concept the outcome of any specific publication or indirectly, any voter registration dr	c electi		ion 495		arry on	☐ Yes	☑ No			
	(3) Prov (4) Prov	ride a grant to an individual for travel, sturide a grant to an organization other that ion 4945(d)(4)(A)? See instructions	idy, or	other sımilar ırıtable, etc.,	purpos	es?		Yes	✓ No			
	(5) Prov	vide for any purpose other than religious poses, or for the prevention of cruelty to o	, charit	able, scientif		ary, or edu	cationa		✓ No			8 25 AH 7 7 7
b	Regulati	nswer is "Yes" to 5a(1)–(5), did any of the ons section 53.4945 or in a current notice	regardı	ing disaster a	ssistano	ce? See inst			ibed in	5b	. \~C <u>f`\rightar</u>	<u>F31</u>
С	If the ar	ations relying on a current notice regardinswer is "Yes" to question 5a(4), does to it maintained expenditure responsibility	he fou	ndation claim	ı exem	ption from	the tax		► □ □ No			
6a	If "Yes," Did the	attach the statement required by Regulifoundation, during the year, receive any	ations s funds,	section 53.49	45–5(d) directly). , to pay pre	emiums	_	✓ No			
b	Did the	foundation, during the year, pay premiun to 6b, file Form 8870					benefi	_	_	6b	1 .	<u> </u>
	At any to	me during the tax year, was the foundation of the foundation of the foundation receive any proceeds						☐ Yes ransaction	☑ No 1? .	7b		
Part	VIII	Information About Officers, Direct and Contractors									es,	
1	List all	officers, directors, trustees, and found		**************************************	,		~					,
		(a) Name and address	hou	e, and average irs per week ed to position	(If r	mpensation not paid, nter -0-)	emple	Contributions byee benefit j erred compe	olans	(e) Exper other a		
Ted Va	n Horne											
<u>6363 S</u>	Fiddlers	Green Cir, 14th FI GRWND Village CO	Preside	ent					_			
Susan												
6363 S Sean T		Green Cir, 14th Fl GRWND Village CO	Treasu	rer				***************************************	··· ··	••••		
6363 S	Fiddlers	Green Cir, 14th FI GRWND Village CO	Secreta	ary								
	Compe	nsation of five highest-paid employee	es (oth	er than tho	se incl	uded on li	ne 1-	see instru	uction	s). If no	ne, e	enter
(a) Name ar	nd address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contribu employee i plans and d compens	benefit eferred	(e) Exper other a		
N/A					***************************************							
							_					
								-				
										- ·		
Total r	number c	of other employees paid over \$50,000	•		• •		•		. ▶	- 000) DE	

.

Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	on Managers, Highly Paid Em	ipioyees,
3 Five highest-paid independent contractors for professional services. See	instructions. If none, enter "NONI	<u> </u>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Trunzo Whitmore Consulting Inc	Consulting	
885 Singing Heights Dr		93,960
El Cajon, CA 92109		
Total number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	
Part IX-A Summary of Direct Charitable Activities		
	· - · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant state organizations and other beneficiaries served, conferences convened, research papers produced, etc.	tistical information such as the number of	Expenses
1 National Association fo EMS Physicians		
		51,000
2 Yale New Haven Hospital		
		18,000
3 Montana State University Billings	· · · · · · · · · · · · · · · · · · ·	18,000
montain state officially similar		
		15,000
4 Center for Critical Care Collaboration	\\	
		10,704
Part IX-B Summary of Program-Related Investments (see instruction		Amount
Describe the two largest program-related investments made by the foundation during the tax year on	lines I and 2	Amount
1		
2	-	
All other program-related investments See instructions		
3		
Total Add In as 1 thus sale 2		
Total. Add lines 1 through 3		
`		1 01111 0 0 0 1 1 (2017)

١

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	gn found	dations,
•	see instructions.)	, , ,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	523,458
С	Fair market value of all other assets (see instructions)	1c	
ď	Total (add lines 1a, b, and c)	1d	523,458
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	5 <u>23,458</u>
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	7,852
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	515,606
6	Minimum investment return. Enter 5% of line 5	6	25,780
Part	and certain foreign organizations, check here ► X and do not complete this part.)	oundatio	ons
1	Minimum investment return from Part X, line 6	1	
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.) . 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	446,833
b	Program-related investments—total from Part IX-B	1b	
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	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	446,833
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
-	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	446,833
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whethe	r the foundation
	qualifies for the section 4940(e) reduction of tax in those years		
		Fo	rm 990-PF (2017)

, , , ;

Part	XIII Undistributed Income (see instruction				
1	Distributable amount for 2017 from Part XI, line 7	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2 a	Undistributed income, if any, as of the end of 2017. Enter amount for 2016 only	-			
b	Total for prior years: 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2017:	_			
а	From 2012				
b	From 2013				
c	From 2014				
ď	From 2015				
e	From 2016				
f	Total of lines 3a through e				
4	Qualifying distributions for 2017 from Part XII, line 4. ▶ \$				
а	Applied to 2016, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2017 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2017				
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b				
	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				,
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2016 Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:	-			
а	Excess from 2013				
b	Excess from 2014				
C	Excess from 2015				
d	Excess from 2016			1	
	Excess from 2017		1	1	ı

Part	XV Supplementary Information (conti	nued)			
<u> </u>	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture Payment	T
	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		
а	Paid during the year				
Stater	nent 3				
					}
	.•				
	Total			▶ 3a	126,512
b	Approved for future payment		-		
			1		
			}	Ì	
	Takal			► 0L	

-nte	rt XVI-A	amounts unless otherwise indicated	Unrelated by	isiness income	Excluded by sect	ion 512, 513, or 514	
	er gross a	amounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	_	n service revenue [.]		ļ <u> </u>			
	a						<u> </u>
	b						-
	ິ						
	d						-
	e						
	' _				··		
_	-	s and contracts from government agencies					
_		rship dues and assessments					
3		on savings and temporary cash investments				-	 -
4		ds and interest from securities			De Constitute Production		・1 マをと確認さいま。
5		tal income or (loss) from real estate	· , ***********	- 1.2.2.8.5 / 1. 1.1.1.38.2	10 (0) 40 Ex		\$ 1 37 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		ot-financed property					
		debt-financed property			****		
_		tal income or (loss) from personal property					
7		nvestment income					
8		(loss) from sales of assets other than inventory					
9		ome or (loss) from special events					·
	-	profit or (loss) from sales of inventory .					
11		evenue: a					
	b					· · · · · · · · · · · · · · · · · · ·	
	ິ —						
	d						
12	e Subtot	al Add columns (b), (d), and (e)					
		Add line 12, columns (b), (d), and (e)	S SOUTH THE STATE OF THE STATE		Co. And Market 12	13	
		eet in line 13 instructions to verify calculation	 .e.l			13	
	rt XVI-E			ent of Exempt	Purnoses		
	e No.					-A contributed in	nortantly to the
	▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	poses (other than	n by providing fund	ds for such purp	oses) (See instruc	tions)
	N/	'A					
					<u></u>		
							· · · · · · · · · · · · · · · · · · ·
	- 						

Form 990-PF Part XVI	· '	n Regarding Trans	fers to and Transa	ctions and F	Relationships \	With Noncha	ritable		age 13
· alt Avi	Organization		ners to and mansa	Julionio ana i	iciationompo (٠ه
ın :	the organization of	lirectly or indirectly e	ngage in any of the foll 501(c)(3) organizations					Yes	No
a Tra	nsfers from the rep	orting foundation to	a noncharitable exemp	t organization	of:				
(1)	Cash						1a(1)		✓
(2)	Other assets .						1a(2)		✓
b Oth	er transactions.								
			npt organization				1b(1)		1
			ole exempt organizatio				1b(2)		1
٠.			assets				1b(3)		1
		_					1b(4)		1
	Loans or loan gua						1b(5)		1
			or fundraising solicita				1b(6)		1
			s, other assets, or paid				1c	fair n	<u> </u>
d If th	ne answer to any o	of the above is "Yes,	" complete the following es given by the report	ng scriedule. ng foundation	olumn (b) snot	in always show	w ine i	lair II fair n	iarkt harkt
vali	ue or trie goods, o lie in anvitransactio	iller assets, or servic	ment, show in column	(d) the value o	of the goods, oth	er assets, or se	rvices	rece	ived
(a) Line no	(b) Amount involved		iritable exempt organization		ription of transfers, tra				
a) Line no	(b) Amount involved	(c) Name of nonene	intable exempt organization	(4) 2000	inputori or authororor ar				
									
			- 						
				-		-		-	
									
	-			-					
		·							
									
				<u> </u>					
					· · · · · · · · · · · · · · · · · · ·				
 									
des	scribed in section 5		iated with, or related tion 501(c)(3)) or in sec			· · · · [Yes		No
· · · · · · · · · · · · · · · · · ·	(a) Name of organ		(b) Type of organi	ation	(c) D	escription of relatio	nship		
			(-,),		,,,				
									
			···						

Sign on Here	rrect, and complete Decl	aration of preparer (other than	this return, including accompa taxpayer) is based on all inform	Treasurer	d statements, and to the parer has any knowledg	May the I with the p	RS discu reparer s	ss this hown t	returr below
Si	gnature of officer or trus		Preparer's signature	Title	Date		PTIN		
Paid Prepare	Print/Type preparer	s name	Preparer's signature		Date	Check if self-employed			
Jse Only					Firn	n's EIN ▶			
	Firm's address ▶				Pho	ne no			

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

Name of	the organization				Employer identification number	
AMR Fo	undation for Research	and Education			745-54645-5WED	
Organiz	zation type (check on	ne):			1,5	
Filers o	f:	Section:			DEC 31 2018	
Form 99	90 or 990-EZ	☐ 501(c)() (enter number) organi	zation	OGDEN, UT	
		☐ 4947(a)(1) nor	nexempt charitable trust	not treated as a private fou		
		527 political organization				
Form 99	90-PF	✓ 501(c)(3) exer	mpt private foundation			
		☐ 4947(a)(1) nor	nexempt charitable trust	treated as a private founda	tion	
		☐ 501(c)(3) taxa	ble private foundation			
instructi Genera	I Rule			for both the General Rule a		
	_	r property) from an		lete Parts I and II. See instr	=	
Special	Rules					
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33½% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II					
	contributor, during th	ne year, total contri	butions of more than \$1,	ng Form 990 or 990-EZ that 000 <i>exclusively</i> for religious to children or animals. Con	, charitable, scientific,	
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributotaling \$5,000 or more during the year			es, but no such utions that were received f the parts unless the uritable, etc., contributions			

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization Employer identification number
AMR Foundation for Research and Education 45-5464550

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (c) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. Person \square University of Washington __1 Payroll Noncash 4333 Brooklyn Ave Ne, 17th Floor Box 359472 (Complete Part II for noncash contributions) Seattle, WA 98195 (d) (a) (b) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person $\overline{\mathbf{Q}}$ 2 PWC Pavroll Noncash 25,000 1900 16th Street (Complete Part II for noncash contributions) Denver, CO 80202 (c) (a) (b) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person $\boxed{}$ 3 Velocity the Greatest Phone Company Ever, Inc. **Payroll** П 25,000 Noncash 7130 Spring Meadows Drive West (Complete Part II for noncash contributions) Holland, Ohio 43528 (b) (c) (d) (a) Νo. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person \checkmark 4 Physio Foundation Payroll Noncash 15,000 (Complete Part II for noncash contributions) Kırkland, WA 98083 (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person \square 5 Bass, Berry & Sims PLC Payroll Noncash 1700 Riverview Tower 900 S Gay Street 12,000 (Complete Part II for noncash contributions) Knoxville, TN 37902 (d) (b) (c) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. \mathbf{V} Person 6 Pendrick Capital Partners LLC **Payroll** 12,000 Noncash 1209 Orange Street (Complete Part II for noncash contributions) Wilmington, DE 19801

Name of organization

Employer identification number

AMR Foundation for Research and Education

45-5464550

raiti	Contributors (see instructions). Ose duplicate copies of	Tart in additional space is	necuca.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Credence Resource Management, LLC 17000 Dallas Parkway #204 Dallas, TX 75248	\$12,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	American Emergency Vehicles 165 American Way Jefferson, NC 28640	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Chubb 202 Halls Mill Rd Whitehouse Station, NJ 08889	\$6,100	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Centura Health 34 Van Gordon Suite 200 Lakewood, CO 80228	\$6,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	Morrison & Foerster LLP 4200 Republic Plaza 370 17th Street Denver, CO 80202-5638	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Centrex Revenue Solutions 318 U.S. HWY 1 #205 Jupiter, FL 33477	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)

AMR Foundation for Research and Education

Employer identification number

45-5464550

Part I	Contributors (see instructions). Use duplicate copies o	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Sedgwick 65 Tejon Street Denver, CO 80223	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	Ricoh 7245 South Havana Street, Suite 300 Centennial, CO 80112	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	Info Cubic, LLC 9250 E Costilla Ave #525 Greenwood Village, CO 80112	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	SHI 290 Davidson Avenue Somerset, NJ 08873	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.17	University of Colorado 1800 Grant Street, Suite 800 Denver, CO 80203	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	Advanced Network Management, Inc 304 Inverness Way South, Suite 400 Englewood, CO 80112	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

AMR Foundation for Research and Education

45-5464550

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
19	KPMG 1225 17th St Denver, CO 80202	\$5,700	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
20	Walmart 702 SW 8th St, Bentonville, AR 72716	\$5,500	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
21	Phillip Hack & Associates APC 703 Palomar Airport Rd Carlsbad, CA 92011	\$5,000	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
22	Pozo-Diaz & Pozo, PA 9260 Sunset Dr Miami, FL 33173	\$5,000	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Halloran & Sage LLP One Goodwin Square, 225 Asylum Street Hartford, CT 06103	\$5,000	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
24	Lowis & Gellen LLP 175 West Jackson Street Suite 950 Chicago, Illinois 60604	\$5,000	Person Payroll Noncash (Complete Part II for noncash contributions)		

Name of organization

Employer identification number

AMR Foundation for Research and Education 45-5464550

Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	Lombardi, Loper, & Conant LLP 1999 Harrison St Oakland, CA 94612	\$5,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

AMR FOUNDATION FOR	RESEARCH AND EDUCATION	45-5464550
FORM 990-PF	REVENUE	STATEMENT 1
CONTRIBUTIONS, GIFT	S, GRANTS, ETC., RECEIVED	AMOUNT
GRANTS CONTRIBUTIONS	,	32,662 306,002
TOTAL INCLUDED ON F	ORM 990-PF, PART I, LINE 1(a)	338,664

45-5464550

					
FORM 990-PF	OPERATION	AND	ADMINISTRATIVE	EXPENSES	STATEMENT 2
OTHER EXPENSES					AMOUNT
Advertising					27,639
Bank Fees					216
Consulting Fees					114,495
Medical Supplies					21,543
Office Supplies					1,030
Postage					292
Printing					640
Organization Fees					2,779
Public Relations					41,017
Repair and Maintenance					25,877
Contract Labor					31,564
Software Licenses					99
Subscriptions & Periodica	als				521
Telephone					136
Training Equipment					40,061

TOTAL INCLUDED ON FORM 990-PF, PART I, LINE 23

307,909

______ FORM 990-PF STATEMENT 3 REVENUE GRANTS/CONTRIBUTIONS PAID DURING THE YEAR OR APPROVED FOR PAYMENT -----Name and Address of Recipient Relationship Foundation Purpose of AMOUNT to Status of grant of Foundation Recipient contribution Manager or Substantial Contributor -----National Association fo EMS Physicians 4400 College Boulevard, Suite 200 PC Statement 4 51,000 NONE Overland Park, KS 66211 Yale New Haven Hospital 789 Howard Ave. New Haven, CT 06504 NONE PC Statement 4 18,000 Montana State University 3803 Central Ave NONE PC Statement 4 15,000 Billings, MT 59102 Centre for Critical Care Collaboration PO Box 576 NONE PC Statement 4 10,704 Crows Nest NSW 1585 Australia Southwestern Community College 900 Otay Lakes Road 10,284 PC Statement 4 Chula Vista, CA 91910 NONE Pueblo Community College Foundation 900 W. Orman Ave. NONE PC Statement 4 7,400 Pueblo, CO 81004 Denver Health & Hospitals Foundation 655 Broadway Denver, CO 80203 NONE PC Statement 4 6,250 Erie Community College Foundation 121 Ellicott Street Rooms 110-112 3,000 NONE PC Statement 4 Buffalo, NY 14203 John Tyler Community College Foundation 800 Charter Colony Parkway Midlothian, VA 23114 NONE PC Statement 4 3,000 Community College of Aurora Foundation 16000 E Centretech Pkwy 1,873 NONE PC Statement 4 Aurora, CO 80111

TOTAL INCLUDED ON FORM 990-PF, PART XV, LINE 3(a)

126,512 STATEMENT 3 ______

FORM 990-PF SUPPLEMENTARY INFORMATION STATEMENT 4

PURPOSE OF GRANT OR CONTRIBUTION - PART XV, LINE 3(a)

ALL GRANTS WERE DISTRIBUTED FOR THE PURPOSE OF IMPROVING CARDIAC ARREST SURVIVAL IN THESE COMMUNITIES.

FORM 990-PF SUPPLEMENTARY INFORMATION STATEMENT 5

SUBSTANTIAL CONTRIBUTORS - PART VII-A Line 10

PWC 1900 16th Street DENVER, CO 80202

University of Washington 4333 Brooklyn Ave Ne, 17th Floor Box 359472 Seattle, WA 98195