Form **990-PF** 

## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. OMB No. 1545-0052

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		nent of the Treasury Revenue Service ► Do not enter s ► Information about For		•		-	•		Open to Public Inspection
_		llendar year 2014 or tax year beginning				, and end	-		, 20
-		e of foundation			, _ • · · ·	,	_	A Employer iden	tification number
	SKE	ES FAMILY FOUNDATION						83-04116	07
_		per and street (or P.O. box number if mail is not deliver	ed to street	t address)		Room/sui	e		nber (see instructions)
								( 8	300) 839-1754
	849	ALMAR AVENUE				C-252			
_		r town, state or province, country, and ZIP or foreign p	ostal code			0 202			
								C If exemption app pending, check h	lication is
	SAN	TA CRUZ, CA 95062						pending, check h	ere • • • • • • • • •
G		eck all that apply: I Initial return		Initial return	of a former r	oublic cha	ritv		
Ŭ	one	Final return		Amended re				<ul> <li>D 1. Foreign organ</li> <li>2 Foreign organ</li> </ul>	izations, check here
		X Address change		Name chang				85% test, cheo	ck here and attach
н	Che	eck type of organization: X Section 50	(c)(3) e				_	computation	••••••
ſ		Section 4947(a)(1) nonexempt charitable trust	· · · · · · ·	ther taxable pr		tion		•	tion status was terminated
				method: X C		crual			7(b)(1)(A), check here 🔒 🕨 🛄
•				pecify)					is in a 60-month termination $7(b)(1)(B)$ , check here
		▶ \$ 2,544,202. (Part I,	column (	d) must be on cas	sh basis )				
	,	Analysis of Revenue and Expenses (Th		,					(d) Disbursements
	enu	total of amounts in columns (b), (c), and (d)	(4)	Revenue and penses per	(b) Net inv		(C	Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions).)		books	incon	ne		income	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)		19,500.					
	2	Check if the foundation is <b>not</b> required to							
		attach Sch. B		350.		350.			
	3	Interest on savings and temporary cash investments		59,026.		9,026.			
	4	Dividends and interest from securities		07,0201		,0201			
	5a	Gross rents							
a	b	Net rental income or (loss)		100,106.					
ň	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 601,741		100,100.					
Revenue	_	assets on line 6a			10	0,106.			
Re	7	Capital gain net income (from Part IV, line 2)				0,100.			
	8	Net short-term capital gain							
	9 10a	Income modifications							
		and allowances							
		Less: Cost of goods sold							
		Gross profit or (loss) (attach schedule)		500.		500.			
	11 12	Other income (attach schedule) ATCH 1 Total. Add lines 1 through 11		179,482.	15	9,982.			
_	13			0		- ,			
ŝ		Compensation of officers, directors, trustees, etc.		-					
USE	14 15	Other employee salaries and wages							
Administrative Expenses	15	Pension plans, employee benefits							
ы	16а ь								
)e	a	Accounting fees (attach schedule) Other professional fees (attach schedule) [2]		46,833.		8,930.			37,903
ativ	с 47			10,055.		07230.			5,7700
str	17	Interest		2,627.					
ij	18 10	Taxes (attach schedule) (see instructions)[3]		_,,.					
Ē	19 20	Depreciation (attach schedule) and depletion.							
Ă	20			2,904.					2,904
and	21	Travel, conferences, and meetings		2,701.					2,501
a	22	Printing and publications		18,300.					18,300
ting	23 24 25	Other expenses (attach schedule) ATCH 4		10,500.					10,500
irat	24	Total operating and administrative expenses		70,664.		8,930.			59,107
be	07	Add lines 13 through 23.		150,680.		5,250.			150,680
0		Contributions, gifts, grants paid		221,344.		8,930.			209,787
_	26	Total expenses and disbursements. Add lines 24 and 25		221,311.		5,250.			200,101
	27	Subtract line 26 from line 12:		-41,862.					
	a b	Excess of revenue over expenses and disbursements		-11,002.	1 5	1,052.			
	b	Net investment income (if negative, enter -0-)			1.	-,052.			
	C	Adjusted net income (if negative, enter -0-).							

JSA For Paperwork Reduction Act Notice, see instructions. 4E1410 1.000

Form 9	90-PF (2014) SKEES FAMILY FOUNDAT	ION	83	-0411607 Page <b>2</b>
Part	Attached schedules and amounts in the Balance Sheets description column should be for end-of-year	Beginning of year	End of	<u>·</u>
T al t	amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	· · · · · · · · · · · · · · · · · · ·	47,739.	71,069.	71,069
3				
	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 (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)			
	Less: allowance for doubtful accounts ►			
8 <sup>t</sup> s				
ssets 6 8	Prepaid expenses and deferred charges			
	a Investments - U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments - corporate stock (attach schedule) ATCH 5	2,360,398.	2,345,206.	2,473,133
	c Investments - corporate bonds (attach schedule)			
11	Investments - land, buildings, and equipment: basis			
	Less: accumulated depreciation  (attach schedule)			
12	X /			
13	Investments other (attach achedule)			
14	Land, buildings, and			
	equipment: basis Less: accumulated depreciation			
15	Other assets (describe	50,000.		
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item I)	2,458,137.	2,416,275.	2,544,202
17	Accounts payable and accrued expenses			
18	Grants payable			
x 19	Deferred revenue			
10 11 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 51 50 50 50 50 50 50 50 50 50 50 50 50 50	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe ►)			
	/			
23	Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow SFAS 117, check here			
s	and complete lines 24 through 26 and lines 30 and 31.			
9 24	Unrestricted			
	Temporarily restricted			
8 26	Permanently restricted			
Assets or Fund Balances 6 8 2 2 92 57 6 82 10 7 10 8 10 8 10 8 10 8 10 8 10 8 10 8 10 8	Foundations that do not follow SFAS 117, $\mathbf{F}$			
ц Г	check here and complete lines 27 through 31.			
ວ ທ 27	Capital stock, trust principal, or current funds			
28 get	Paid-in or capital surplus, or land, bldg., and equipment fund			
VSA 29	Retained earnings, accumulated income, endowment, or other funds	2,458,137.	2,416,275.	
Net 30	Total net assets or fund balances (see instructions)	2,458,137.	2,416,275.	
<b>Z</b> 31	Total liabilities and net assets/fund balances (see			
	instructions)	2,458,137.	2,416,275.	
Part	Analysis of Changes in Net Assets or Fund Balar	nces		
<b>1</b> To	otal net assets or fund balances at beginning of year - Part I	I, column (a), line 30 (m	ust agree with	
	nd-of-year figure reported on prior year's return)		-	2,458,137
<b>2</b> Ei	nter amount from Part I, line 27a		2	-41,862
<b>3</b> O	ther increases not included in line 2 (itemize) ▶		3	
<b>4</b> A	dd lines 1, 2, and 3		4	2,416,275
5 D	ecreases not included in line 2 (itemize) ►		5	
	otal net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b)	, line 30 6	2,416,275
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Ра	rt IV Capital Gains	s and Losses for Tax on Inve	estment Income			
		d describe the kind(s) of property sold ( prick warehouse; or common stock, 200		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	SEE PART IV SCHE	DULE				
b						
С						
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a						
b						
C						
d						
е						
	Complete only for assets	showing gain in column (h) and owner	d by the foundation on 12/31/69		Gains (Col. (h) g	
(	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	col.	(k), but not less t Losses (from co	
а						
b						
С						
d						
е						
2	Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		100,106.
3	Net short-term capital ga	ain or (loss) as defined in sections '	1222(5) and (6):			
	If gain, also enter in Pa	art I, line 8, column (c) (see inst	ructions). If (loss), enter -0- in 🕽			
	Part I, line 8		J	3		0
Ра	rt V Qualification	Under Section 4940(e) for Red	duced Tax on Net Investment I	ncome		
(Fo	r optional use by domesti	c private foundations subject to the	e section 4940(a) tax on net invest	ment inco	me.)	
lf se	ection 4940(d)(2) applies,	leave this part blank.				
		the section 4942 tax on the distrib	,,	ase perio	d?	Yes 🗴 No
lf "Y		not qualify under section 4940(e).				
1		nount in each column for each yea	r; see the instructions before makin	ng any ent		
Cal	<b>(a)</b> Base period years endar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col. (b) divided by	
	2013	123,992.	2,439,602.			0.050825
	2012	223,048.	2,373,681.			0.093967
	2011	160,921.	2,536,865.			0.063433
	2010	138,908.	2,504,338.			0.055467
	2009	193,873.	2,249,539.			0.086183
2	Total of line 1, column (c	μ)		2		0.349875
		o for the 5-year base period - divid				
		ndation has been in existence if les		3		0.069975
4	Enter the net value of no	oncharitable-use assets for 2014 fro	om Part X, line 5	4	2,	528,294.
5	Multiply line 4 by line 3			5		176,917.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		1,511.

178,428.

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		( - /	

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Part VI	Exc

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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ction	s)	
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		1,5	511.	
	here  X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of $\int$ Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
3	Add lines 1 and 2		1,5	511.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	1,5			
5					
6	Credits/Payments:				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 2,000.				
b	Exempt foreign organizations - tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d		2,0	000.	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			100	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4	189.	
11 Par	Enter the amount of line 10 to be: Credited to 2015 estimated tax ►       489. Refunded ►       11         t VII-A       Statements Regarding Activities				
			Yes	No	
Ta	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	res	No X	
h	participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	14			
U	Instructions for the definition)?	1b		x	
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
с	c Did the foundation file Form 1120-POL for this year?				
d					
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				
	foundation managers. ► \$				
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?	4a		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		37	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X	
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	• By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	6	Х		
7	conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	7	X		
7 82	Enter the states to which the foundation reports or with which it is registered (see instructions)				
ua	CA,				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see 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	10		Х	

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Ра	rt VII-A Statements Regarding Activities (continued)			
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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address  M/A			
14	The books are in care of ► SKEES FAMILY FOUNDATION Telephone no. ► 800-839	-175	4	
	Located at ▶849 ALMAR AVENUE, SUITE C-252 SANTA CRUZ, CA ZIP+4 ▶ 95062			
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 <b>15</b>		Vee	Na
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No X
	over a bank, securities, or other financial account in a foreign country?	16		A
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country $\blacktriangleright$			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1:	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)			
I	b If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	4 6		Х
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		A
	Organizations relying on a current notice regarding disaster assistance check here			
	were not corrected before the first day of the tax year beginning in 2014?	1c		Х
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)):			
i	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years			
I	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.)	2b		
(	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	•			
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
I	b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or discussified persons after May 26, 1060; (2) the large of the Every period (or larger period approved by the			
	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 ait or bequest or (3) the lapse of			
	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 2014.)	3b		
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		Х

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Par	t VII-B	<b>Statements Regarding Activities</b>	for Which Form	4720 May Be Req	uired (cont	inued)		
5a	During the	year did the foundation pay or incur any amo	unt to:					
	(1) Carry of	on propaganda, or otherwise attempt to influe	ence legislation (section	n 4945(e))?	Yes	X No		
	(2) Influen	ce the outcome of any specific public ele	ection (see section 4	4955); or to carry or	۱,			
	directly	or indirectly, any voter registration drive?			Yes	X No		
	(3) Provide	e a grant to an individual for travel, study, or o	ther similar purposes?	?	Yes	X No		
	(4) Provide	a grant to an organization other than a	charitable, etc., or	anization described i	n			
		4945(d)(4)(A)? (see instructions)				X No		
		e for any purpose other than religious, ch						
		es, or for the prevention of cruelty to children				X No		
b		wer is "Yes" to 5a(1)-(5), did any of the				cribed in		
		s section 53.4945 or in a current notice regar					5b	
	-	ons relying on a current notice regarding disa	-	,				
с	-	wer is "Yes" to question 5a(4), does the						
C		maintained expenditure responsibility for the		•		No		
			-					
<u> </u>	-	tach the statement required by Regulations set	• • •	actly to now promise				
6a		undation, during the year, receive any fur			Yes	X No		
ь		nal benefit contract?			•		6b	x
b		ndation, during the year, pay premiums, dire	cuy or indirectly, on a	i personal benefit contra			00	
_		6b, file Form 8870.				X No		
7a		e during the tax year, was the foundation a particular terms of the foundation a particular terms of the foundation of t					71	
b	-	d the foundation receive any proceeds or have nformation About Officers, Director					7b	
		and Contractors		-			yees,	
1	List all off	icers, directors, trustees, foundation n						
		(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributi employee bene	fit plans	e) Expense other allow	
			devoted to position	enter -0-)	and deferred con	npensation		
				0		0		0
ATC:	н 6			0		0		0
2	Compensa "NONE."	tion of five highest-paid employees	(other than those	se included on line	e 1 - see i	nstructions	). If noi	ne, enter
	NONL.		(b) Title, and average		(d) Contribut	ions to		
(a)	Name and ad	dress of each employee paid more than \$50,000	hours per week	(c) Compensation	employee b plans and de	enefit (	e) Expense other allow	account, wances
			devoted to position		compensa	ation		
	NONE							
Total	number of	other employees paid over \$50,000.						
							orm <b>990-</b>	• <b>PF</b> (2014)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emp	Page
	and Contractors (continued)	, ,
3 Five	highest-paid independent contractors for professional services (see instructions). If none, enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
otal num	per of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the fo	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	of
	ons and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A		
		-
		-
2		
		_
3		_
		_
4		_
		_
	Commonly of Discourses Deleted Investments (and interations)	
Part IX-B	Summary of Program-Related Investments (see instructions) he two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE		
	·	-
		-
2		
		-
		-
All other p	rogram-related investments. See instructions.	
3 NONE		
		-
		-
otal. Add	lines 1 through 3	►

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Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	gn founda	ations,
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	2,485,076.
b	Average of monthly cash balances	1b	81,720.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	2,566,796.
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	2,566,796.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	38,502.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,528,294.
6	Minimum investment return. Enter 5% of line 5	6	126,415.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ► and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	126,415.
2a	Tax on investment income for 2014 from Part VI, line 5 2a 1,511.		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	1,511.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	124,904.
4	Recoveries of amounts treated as qualifying distributions	4	50,000.
5	Add lines 3 and 4	5	174,904.
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	174,904.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	209,787.
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	209,787.
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	1,511.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	208,276.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years.	alculating	whether the foundation

Pag	е	9

	rt XIII Undistributed Income (see instru	ctions)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	<b>(b)</b> Years prior to 2013	<b>(c)</b> 2013	(d) 2014
	line 7				174,904.
2	Undistributed income, if any, as of the end of 2014:				
а	Enter amount for 2013 only				
	Total for prior years: 20 12 ,20 11 ,20 10				
3	Excess distributions carryover, if any, to 2014:				
	From 2009				
	From 2010				
	From 2011         35,976.           From 2012         106,650.				
	From 2013 3,999. Total of lines 3a through e	244,114.			
	Qualifying distributions for 2014 from Part XII,	211/111			
	line 4: ▶ \$ 209,787.				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
c	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2014 distributable amount				174,904.
е	Remaining amount distributed out of corpus	34,883.			
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same				
6	amount must be shown in column (a).) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	278,997.			
	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	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				
e	amount - see instructions Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				
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 2009 not applied on line 5 or line 7 (see instructions)	82,698.			
9	Excess distributions carryover to 2015.				
3	Subtract lines 7 and 8 from line 6a	196,299.			
10	Analysis of line 9:				
	Excess from 2010				
b	Excess from 2011 35,976.				
С	Excess from 2012 106,650.				
	Excess from 2013				
e	Excess from 2014 34,883.				Eorm 990-PE (2014)

Form	n 990-PF (2014)	SKEES FAM	ILY FOUNDATION			83-0	041160'	7 Page <b>10</b>
Ра	rt XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questio	on 9)		NOT A	PPLICABLE
1 a	If the foundation has foundation, and the ruling	•		• •	ating ►			
b	Check box to indicate v	whether the foundation	is a private operating f	foundation described in	section	4942(j)	(3) or	4942(j)(5)
2.	Enter the lesser of the ad-	Tax year		Prior 3 years			10	
2 a	justed net income from Part	<b>(a)</b> 2014	<b>(b)</b> 2013	(c) 2012	<b>(d)</b> 201	1	(e	e) Total
	I or the minimum investment return from Part X for each year listed							
b	85% of line 2a							
с	Qualifying distributions from Part XII, line 4 for each year listed							
d	Amounts included in line 2c not used directly for active conduct of exempt activities							
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the alternative test relied upon:							
а	"Assets" alternative test - enter:							
	<ol> <li>Value of all assets</li> <li>Value of assets qualifying under section 4942(j)(3)(B)(i)</li> </ol>							
b	"Endowment" alternative test-							
	enter 2/3 of minimum invest- ment return shown in Part X,							
	line 6 for each year listed							
С	"Support" alternative test - enter:							
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)							
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942 (j)(3)(B)(iii)							
	(3) Largest amount of sup- port from an exempt organization							
	(A) Caree in material in care	1		1				

# Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

#### SUZANNE SKEES

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

#### NONE

## 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here  $\blacktriangleright$  [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

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

Page	1	1
Fage		

Grants and Contributions Paid Duri	ng the Year or App	oved for Fu	ture Payment	
Grants and Contributions Paid Duri Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
Paid during the year				
ГСН 7				
Total		<u></u>	▶ 3a	150,68
Approved for future payment				
	1			

Total ..... > 3b

-		~
Page	1	2

Form 990-PF						Page <b>12</b>
Part XV	-A Analysis of Income-Produ	icing Activ	vities			
Enter gross	amounts unless otherwise indicated.	Unrela	ated business income	Excluded b	y section 512, 513, or 514	<b>(e)</b> Related or exempt
1 Progran	1 Program service revenue: a		<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
d						
е f						
	and contracts from government agencies					
-	rship dues and assessments					
	on savings and temporary cash investments			14	350.	
<ul> <li>4 Dividends and interest from securities</li> <li>5 Net rental income or (loss) from real estate:</li> <li>a Debt-financed property</li> </ul>				14	59,026.	
	debt-financed property					
	al income or (loss) from personal property					
	nvestment income			18	100,106.	
	(loss) from sales of assets other than inventory ome or (loss) from special events			10	100,100.	
	profit or (loss) from sales of inventory					
	evenue: <b>a</b>			_		
	ATCH 8				500.	
e						
12 Subtota	I. Add columns (b), (d), and (e)				159,982.	
	dd line 12, columns (b), (d), and (e)					159,982.
Part XVI	heet in line 13 instructions to verify calc B Relationship of Activities		complichment of Ex	Kompt Durr	00000	
Line No.	Explain below how each activit accomplishment of the foundation	-				

Part 2	XVII	Information R Exempt Organ		insfers To and T	ransactio	ons and	Relation	ships V	Vith Non	chari	table	÷
		organization direct	ly or indirectly of	engage in any of the section 501(c)(3) or	-	-	•				Yes	No
	0	ations?										
		-	-	a noncharitable exe								
												X
										1a(2)		X
		ransactions:										v
				npt organization								X
				ble exempt organizati								X
				assets								X
												X
				ip or fundraising solic								X
				is, other assets, or pa						10(0) 1c		X
				s," complete the fol							fair m	
				ces given by the rep	0		• • •					
				ement, show in col								
(a) Line		(b) Amount involved		oncharitable exempt orgar			ption of transf					
		N/A				N/A	•	,	,			
d	escrib	ed in section 501(c)	of the Code (ot	iliated with, or relat her than section 501			•	organiz	ations	Y	es 🛛 X	] No
<b>b</b> IT	ryes,	complete the follow (a) Name of organization		(b) Type of or	anization				ion of relations	hin		
					ganization			c) Descript		ыпр		
				ed this return, including acc				o the best of	of my knowledg	e and b	oelief, it	is true,
<b>C</b> :	correct	, and complete. Declaration of	f preparer (other than ta	expayer) is based on all information	ation of which pr	eparer has any	knowledge.					
Sign Here	Sign	ELECTRO	NICALLY	Date		Fitle			May the IRS with the pro-			return below <b>No</b>
									L	·		
		Print/Type preparer's na	me	Preparer's signature			Date	Ch	eck if F	PTIN		
Paid		JEFFREY D HASI	KELL	JEFFREY D H	ASKELL		04/2F/2			P013	4577	0
Prepa	arer	Firm's name 🕨 FO	UNDATION SC	DURCE				Firm's ÒIN	▶ 51039	9834	7	
Use C	Dnly	Firm's address ► ON	E HOLLOW LI	N, STE 212								
		LA	KE SUCCESS	, NY	11042 Phone no. 80083917			9175	4			

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

OMB No. 1545-0047

Attach to Form 990, Form 990-EZ, or Form 990-PF.
· Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2014

Name of the organization

SKEES FAMILY FOUNDATION

83-0411607

Employer identification number

## Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

## General Rule

Solution For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

## **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % 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.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number 83-0411607

Page 2

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	SKEES, SUZANNE		Person X Payroll
	501 SILVERSIDE RD, STE 123 WILMINGTON, DE 19809	\$ <u>19,500.</u>	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of o	(Form 990, 990-EZ, or 990-PF) (2014) rganization SKEES FAMILY FOUNDATION	Employer i	dentificat 83-0
Part II	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Da
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Da
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Da
		- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Da
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Da
		- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Da

\_ \_

\$\_

33-0411607

(d) Date received

\_\_\_\_\_

(d) Date received

\_\_\_\_\_

(d) Date received

\_\_\_\_\_

(d) Date received

\_ \_ \_ \_ \_

(d) Date received

\_\_\_\_\_

(d) Date received

Page 3

ntification number

	(Form 990, 990-EZ, or 990-PF) (2014)			Page <b>4</b>			
Name of or	rganization SKEES FAMILY FOUNDATIC	N		Employer identification number			
Part III	<b>Exclusively</b> religious, charitable, etc. that total more than \$1,000 for the y following line entry. For organizations contributions of \$1,000 or less for th Use duplicate copies of Part III if addit	<b>/ear from any one o</b> s completing Part III, e year. (Enter this in	contributor. Comp enter the total of formation once. S	blete columns (a) through (e) and the exclusively religious, charitable, etc.,			
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held			
		(e) Transf	er of gift				
	Transferee's name, address, a			nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
	1						

Form	2	2	2	0		
Department of the Treasury Internal Revenue Service						

# **Underpayment of Estimated Tax by Corporations**

OMB No. 1545-0123

Δ

20

Attach to the corporation's tax return.

▶ Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

Name

Name	Employer Identification number
SKEES FAMILY FOUNDATION	83-0411607
Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, ent	0,1,1
38 on the estimated tax penalty line of the corporation's income tax return, but <b>do not</b> attach Form 2220.	10

Part	Required Annual Payment				
1	Total tax (see instructions)			1	1,511.
2a b	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2a 2b		-	
c	Credit for federal tax paid on fuels (see instructions)			2d	
d 3	Total. Add lines 2a through 2c Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete does not owe the penalty	or file	e this form. The corporation		1,511.
4	Enter the tax shown on the corporation's 2013 income tax return (see instruction the tax year was for less than 12 months, skip this line and enter the amount	ons).	Caution: If the tax is zero or	4	1,987.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation the amount from line 3			5	1,511.
Part					

Form 2220 even if it does not owe a penalty (s	see instructions).

			1 2 (	/			
6		The corporation is using the adjusted seasonal installment method.					
7	Х	$\underline{\zeta}$ The corporation is using the annualized income installment method.					
8		The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.					
Part	Part III Figuring the Underpayment						
			(a)	(b)	(c)	(d)	

			(a)	(D)	(C)	(a)
9	<b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	05/15/2014	06/15/2014	09/15/2014	12/15/2014
10	Required installments. If the box on line 6	-	00/10/2011	00/10/2011	00/10/1011	10/10/1011
10	-					
	and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on					
	line 8 (but not 6 or 7) is checked, see instructions					
	for the amounts to enter. If none of these boxes					
	are checked, enter 25% of line 5 above in each	10		312.	305.	358.
	column	10		514.	505.	
11	Estimated tax paid or credited for each period					
	(see instructions). For column (a) only, enter the					
	amount from line 11 on line 15	11	300.	400.	600.	700.
	Complete lines 12 through 18 of one column					
	before going to the next column.					
12	Enter amount, if any, from line 18 of the preceding column	12		300.	388.	683.
13	Add lines 11 and 12	13		700.	988.	1,383.
14	Add amounts on lines 16 and 17 of the preceding column	14				
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	300.	700.	988.	1,383.
16	If the amount on line 15 is zero, subtract line 13					
	from line 14. Otherwise, enter -0-	16				
17	Underpayment. If line 15 is less than or equal to					
	line 10, subtract line 15 from line 10. Then go to					
	line 12 of the next column. Otherwise, go to	17				
18	line 18 Overpayment. If line 10 is less than line 15,	17				
10	subtract line 10 from line 15. Then go to line					
	12 of the next column		300.	388.	683.	
A- 4-	Dout IV an mana 2 to figure the manalty D		t we to Dout IV if theme	awa wa awinina aw Kwa i	7 no nonalty in avera	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

#### Form 2220 (2014)

		(a)	(b)	(c)	(d)
Enter the date of payment or the 15th day of the 3rd month after					
the close of the tax year, whichever is earlier (see instructions).					
(Form 990-PF and Form 990-T filers: Use 5th month instead of					
3rd month.)	19				
Number of days from due date of installment on line 9 to the					
date shown on line 19	20				
Number of days on line 20 after 4/15/2014 and before 7/1/2014	21				
Underpayment on line 17 x Number of days on line 21 x 3%	22	\$	\$	\$	\$
365					
Number of days on line 20 after 6/30/2014 and before 10/1/2014	23				
Underpayment on line 17 x Number of days on line 23 x 3%	24	\$	\$	\$	\$
365 Number of days on line 20 after 9/30/2014 and before 1/1/2015	25				
Underpayment on line 17 x <u>Number of days on line 25</u> x 3% 365	26	\$	\$	\$	\$
Number of days on line 20 after 12/31/2014 and before 4/1/2015	27				
Underpayment on line 17 x Number of days on line 27 $\times$ 3%	28	\$	\$	\$	\$
365		•			Ť
Number of days on line 20 after 3/31/2015 and before 7/1/2015	29				
Underpayment on line 17 x Number of days on line 29 x*%	30	¢	\$	\$	\$
365	30	Ψ	Ψ	Ψ	Ψ
Number of days on line 20 after 6/30/2015 and before 10/1/2015	31				
Underpayment on line 17 x Number of days on line 31 x*% 365	32	\$	\$	\$	\$
Number of days on line 20 after 9/30/2015 and before 1/1/2016	33				
Underpayment on line 17 x Number of days on line 33 x*%	34	¢	\$	\$	\$
365	34	φ	φ	φ	φ
Number of days on line 20 after 12/31/2015 and before 2/16/2016	35				
Underpayment on line 17 x Number of days on line 35 x*%	36	\$	\$	\$	\$
366		•			
Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37		\$	\$	\$
Penalty. Add columns (a) through (d) of line 37. Enter the to	otal h	nere and on For	m 1120, line 33;	or the comparab	le

\*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov.** You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2014)

		nt Me		(1-)	(-)	(-P
			(a)	(b)	(c)	(d)
			First <u>2</u> months	First <u>3</u>	First <u>6</u>	First <u>9</u> months
20 21	Annualization periods (see instructions) Enter taxable income for each annualization period	20	monuns	months	months	montris
••	(see instructions for the treatment of extraordinary	24		E EED	12 070	10 140
	items)	21	2,254.	6,660.	13,079.	19,148
	Annualization amounts (see instructions)	22	6.00000	4.00000	2.00000	1 2222
22	, , <u> </u>	22	6.00000	4.00000	2.00000	1.3333
23 a	Annualized taxable income. Multiply line 21 by line 22	23a	13,524.	26,640.	26,158.	25,531
	by inte 22	254	,,	20,040.	20,130.	
ŀ	Extraordinary items (see instructions)	23h	30,036.	35,629.	55,994.	71,930
~						/1,000
с	Add lines 23a and 23b	23c	43,560.	62,269.	82,152.	97,461
4	Figure the tax on the amount on line 23c using the		10,000.	0272031	02/1021	<u> </u>
	instructions for Form 1120, Schedule J, line 2 (or comparable line of corporation's return)	24	436.	623.	822.	975
5	Enter any alternative minimum tax for each		2001			
	payment period (see instructions)	25				
26	Enter any other taxes for each payment					
	period (see instructions)	26				
27	Total tax. Add lines 24 through 26	27	436.	623.	822.	975
8	For each period, enter the same type of credits as					
	allowed on Form 2220, lines 1 and 2c (see instructions)	28				
29	Total tax after credits. Subtract line 28 from					
	line 27. If zero or less, enter -0-	29	436.	623.	822.	975
30	Applicable percentage	30	25%	50%	75%	100%
	Multiply line 29 by line 30	31		312.	617.	975
Pa	rt III Required Installments					
	Note: Complete lines 32 through 38 of one		1st	2nd	3rd	4th
	column before completing the next column.		installment	installment	installment	installment
2	If only Part I or Part II is completed, enter the					
-	amount in each column from line 19 or line 31. If					
	both parts are completed, enter the $\ensuremath{\textit{smaller}}$ of the			21.0		0
	amounts in each column from line 19 or line 31	32		312.	617.	975
	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns			312.		
	amounts in each column from line 19 or line 31	32 33		312.	617. 312.	
3	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income			312.		
3	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32.	33			312.	617
3	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-			312.		617
3	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% of line 5 on page 1 of Form 2220	33			312.	617
3	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the	33 34	270	312.	312. 305.	617 358
3	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter	33	378.		312.	617 358
3	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter Subtract line 38 of the preceding column	33 34 35	378.	312. 378.	312. 305. 378.	617 358 377
33 34 35	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter	33 34	378.	312.	312. 305.	617 358 377
3 4 5 6	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter Subtract line 38 of the preceding column from line 37 of the preceding column	33 34 35 36		312. 378. 378.	312. 305. 378. 444.	617 358 377 517
33 34 35 36	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter Subtract line 38 of the preceding column from line 37 of the preceding column Add lines 35 and 36	33 34 35	378.	312. 378.	312. 305. 378.	975 617 358 377 517 894
	amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38 (see instructions) Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter Subtract line 38 of the preceding column from line 37 of the preceding column	33 34 35 36		312. 378. 378.	312. 305. 378. 444.	617 358 377 517

Form **2220** (2014)

JSA 4X8009 2.000

## FORM 990PF, PART I - OTHER INCOME

	REVENUE	
	AND	NET
	EXPENSES	INVESTMENT
DESCRIPTION	PER BOOKS	INCOME
INTEREST INCOME - PRI VITTANA MCE LOAN	500.	500.
TOTALS	500.	500.

## FORM 990PF, PART I - OTHER PROFESSIONAL FEES

DESCRIPTION	REVENUE AND EXPENSES <u>PER BOOKS</u>	NET INVESTMENT <u>INCOME</u>	CHARITABLE <u>PURPOSES</u>
INVESTMENT MANAGEMENT SERVICES PHILANTHROPIC CONSULTING SRVCS	8,930. 37,903.	8,930.	37,903.
TOTALS	46,833.	8,930.	37,903.

## FORM 990PF, PART I - TAXES

	REVENUE AND EXPENSES
DESCRIPTION	PER BOOKS
990-PF ESTIMATED TAX FOR 2014 990-PF EXTENSION FOR 2013	2,000. 627.
TOTALS	2,627.

## FORM 990PF, PART I - OTHER EXPENSES

	REVENUE AND	
	EXPENSES	CHARITABLE
DESCRIPTION	PER BOOKS	PURPOSES
ADMINISTRATIVE FEES	16,319.	16,319.
FOUNDATION DUES & MEMBERSHIPS	725.	725.
OFFICE SUPPLIES	56.	56.
WEBSITE MAINTENACE	1,200.	1,200.
TOTALS	18,300.	18,300.

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
ACTAVIS PLC AETNA INC. AFFILIATED MANAGERS GROUP ALLERGAN INC. ALLIANCEBERN DISCOVERY GROWTH ALLIANCEBERN DISCOVERY VALUE F ALLIANCEBERNSTEIN REIT INSTL F ALLSTATE CORP AMDOCS LIMITED AMER INTERNATIONAL GROUP INC AMERICAN ELECTRIC POWER INC. AMERICAN ELECTRIC POWER INC. AMERICAN TOWER REIT INC AMERICAN TOWER REIT INC AMPHENOL CORPORATION ANSYS INC. ANTHEM INC AON PLC APPLE INC. ASSURANT INC AUTOZONE INC BALL CP BANK OF AMERICA CORP BERNSTEIN EMERGING MARKETS BERNSTEIN INTERMEDIATE DURATIO BERNSTEIN INTERMEDIATE DURATIO	6,275. 9,794. 2,355. 4,318. 15,756. 16,812. 103,481. 6,519. 4,315. 8,382. 4,824. 9,915. 6,484. 5,090. 7,485. 11,759. 7,885. 7,473. 2,522. 4,707. 7,715. 7,118. 385,057. 704,050. 528,113.	7,722. 10,660. 3,608. 8,504. 20,354. 20,448. 129,304. 6,744. 5,179. 10,922. 5,465. 11,537. 8,402. 6,457. 8,200. 12,818. 9,388. 20,972. 2,669. 5,572. 9,476. 11,181. 386,099. 715,646. 437,844.
BIOGEN IDEC INC BOEING CO BOOZ ALLEN HAMILTON HOLDING CO BROCADE COMMUNICATIONS SYST IN	4,317. 3,197. 2,039. 3,439.	8,486. 4,549. 2,388. 4,144.

ATTACHMENT 5 (CONT'D)

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
CAPITAL ONE FINANCIAL CORP	6,507.	9,081.
CHUBB CORP	4,336.	5,174.
COMCAST CORP CL A	5,681.	10,152.
COSTCO WHOLESALE CORPORATION	7,222.	8,505.
CVS CAREMARK CORP.	8,329.	12,039.
DANAHER CORP	5,619.	9,000.
DELTA AIR LINES INC	6,294.	7,821.
DOLLAR GENERAL CORP	5,671.	6,717.
DOW CHEMICAL PV	5,267.	5,017.
DR PEPPER SNAPPLE GROUP, INC	10,030.	11,827.
DTE ENERGY CO	6,024.	7,341.
EBAY INC.	5,987.	6,454.
ELECTRONIC ARTS	5,603.	10,580.
EMC CORP-MASS	5,391.	5,502.
EOG RESOURCES INC	2,312.	1,841.
ESTEE LAUDER COMPANIES INC	6,817.	6,934.
EVEREST RE GROUP LTD	1,910.	2,555.
F5 NETWORKS, INC.	1,738.	2,088.
FACEBOOK INC	4,314.	5,461.
FIDELITY NATIONAL INFORMATION	6,981.	8,708.
FISERV INC	4,523.	4,968.
FORD MOTOR COMPANY	8,557.	10,463.
GAMESTOP CORP	5,290.	5,070.
GILEAD SCIENCES INC	8,909.	12,725.
GOLDMAN SACHS GROUP	4,004.	4,846.
GOOGLE INC CL A	4,357.	6,899.
GOOGLE INC CL C	5,455.	7,896.
HESS CORP	11,701.	10,704.
HEWLETT PACKARD CO	10,341.	15,049.

ATTACHMENT 5 (CONT'D)

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
HOME DEPOT INC. INTERCONTINETAL EXCHANGE INC INTUITIVE SURGICAL, INC. ITT CORP. JOHNSON & JOHNSON JP MORGAN CHASE & CO KROGER CO L-3 COMMUNICATIONS CORP LOCKHEED MARTIN CORP LYONDELLBASELL INDUSTRIES NV MCKESSON CORP MEAD JOHNSON NUTRITI MEDTRONIC INC MERCK & CO INC. MICROSOFT CORPORATION MONSANTO CO MONSTER BEVERAGE CORP MURPHY OIL CP HLDG NETSUITE INC. NIKE INC-CL B NXP SEMICONDUCTORS OCCIDENTAL PETROLEUM CORP OFFICE DEPOT INC ORACLE CORP PARTNERRE LTD. PEPSICO INC PFIZER INC. POLARIS INDUSTRIES	$\begin{array}{c} 8,074.\\ 2,322.\\ 5,744.\\ 8,434.\\ 7,420.\\ 5,180.\\ 3,229.\\ 6,087.\\ 7,635.\\ 3,115.\\ 1,884.\\ 7,140.\\ 2,171.\\ 2,475.\\ 13,002.\\ 6,180.\\ 6,400.\\ 4,314.\\ 1,468.\\ 8,040.\\ 2,786.\\ 11,815.\\ 2,423.\\ 2,056.\\ 6,515.\\ 7,006.\\ 9,522.\\ 5,231.\\ \end{array}$	13,646. $3,947.$ $7,405.$ $7,606.$ $12,548.$ $6,258.$ $8,989.$ $6,311.$ $8,858.$ $4,763.$ $1,868.$ $8,546.$ $2,094.$ $3,123.$ $16,258.$ $7,168.$ $9,426.$ $3,284.$ $2,183.$ $9,615.$ $3,438.$ $10,479.$ $4,345.$ $2,249.$ $7,875.$ $8,038.$ $13,021.$ $6,050.$
PRECISION CASTPARTS	2,310.	3,372.

ATTACHMENT 5 (CONT'D)

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
PRICELINE.COM INCORPORATED QUINTILES TRANSNATIONAL HOLDIN RAYTHEON CO. SCHLUMBERGER LTD SERVICE NOW SHERWIN-WILLIAMS CO. SLM CORP STARBUCKS CORP COM TIME WARNER INC. UNION PACIFIC UNITEDHEALTH GROUP INC. US BANCORP V F CORP VALERO ENERGY CORP VERIZON COMMUNICATIONS VISA INC WALT DISNEY HOLDINGS CO. WELLS FARGO & CO.	5,829. 4,702. 7,102. 6,986. 2,248. 7,172. 3,357. 9,067. 5,522. 4,374. 3,706. 6,126. 4,213. 8,724. 7,093. 7,032. 8,610. 11,731.	7,981. 5,298. 8,654. 6,833. 3,053. 10,522. 3,821. 11,487. 8,286. 7,743. 3,943. 6,743. 4,194. 9,009. 7,017. 13,110. 11,774. 17,817.
XEROX CP TOTALS	2,345,206.	2,473,133.

## FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of F	Property		Desc	ription		P or	Date acquired	Date sold
Gross sale price less	Depreciation	Cost or other	FMV as of	Adj. basis as of	Excess of FMV over		Gain	
expenses of sale	allowable	basis	12/31/69	12/31/69	adj basis		or (loss)	
		PUBLICLY-TRA	ADED SECURIT	TTES				
601,741.		501,635.		110			100,106.	
TOTAL GAIN(L	DSS)						100,106.	
JSA						Ц		

## FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 6

83-0411607

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION
ELISABETH SKEES DEOGRACIAS 849 ALMAR AVENUE C-252 SANTA CRUZ, CA 95062	DIR/VP OF COMMUN-PTNR RELTNS 2.00
BRIENNE NICOLE SKEES 849 ALMAR AVENUE C-252 SANTA CRUZ, CA 95062	DIR/VP OF RESEARCH & DATA MGMT 2.00
HUGH B SKEES 849 ALMAR AVENUE C-252 SANTA CRUZ, CA 95062	TRUSTEE EMERITUS
JASMINE P SKEES 849 ALMAR AVENUE C-252 SANTA CRUZ, CA 95062	DIR / SR TRUSTEE / VP GIVING 2.00
SHELLY SHEPARD SKEES 849 ALMAR AVENUE C-252 SANTA CRUZ, CA 95062	DIR / CFO 2.00

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### FORM

990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	990PF.	PART	VIII -	LIST	OF	OFFICERS.	DIRECTORS.	AND	TRUSTEES	
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ATTACHMENT 6 (CONT'D)

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

SUZANNE SKEES 849 ALMAR AVENUE C-252 SANTA CRUZ, CA 95062 PRES/CHAIRMAN/DIR/TRUSTEE 40.00

SALLY SKEES-HELLY DIR / SEC 849 ALMAR AVENUE 2.00 C-252 SANTA CRUZ, CA 95062

83-0411607

		ATTACHMENT	7
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ADVANCING GIRLS EDUCATION IN AFRICA INC	N/A	GENERAL & UNRESTRICTED	5,000.
921 PENNSYLVANIA AVE SE STE 312	PC		
WASHINGTON, DC 20003			
AID TANZANIA	N/A	GENERAL & UNRESTRICTED	5,000.
208 RIVER RANCH RD	PC		
EDWARDS, CO 81632			
ASANTE AFRICA FOUNDATION INC	N/A	LEADERSHIP AND ENTREPRENEURSHIP INCUBATOR PROGRAM	1,000.
1334 CARLTON PL	PC		
LIVERMORE, CA 94550			
CASTRO COUNTRY CLUB INC	N/A	CHARITABLE EVENT	1,000.
4058 18TH ST	PC		
SAN FRANCISCO, CA 94114			
CENTSOFRELIEF INC	N/A	DESTINY FOUNDATION	5,000.
109 CHURCH ST UNIT 202	PC		
NEW HAVEN, CT 06510			
CHARLOTTE CAHTOLIC HIGH SCHOOL ATHLETIC ASSOC.	N/A	GENERAL & UNRESTRICTED	1,100.
7702 PINEVILLE MATTHEWS RD	PC		
CHARLOTTE, NC 28226			

83-0411607

ATTACHMENT 7 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHARLOTTE SECONDARY SCHOOL PTO	N/A	GENERAL & UNRESTRICTED	1,000.
		GENERAL & UNRESIRICIED	1,000.
8601 MCALPINE PARK DR	PC		
CHARLOTTE, NC 28211			
DRAGONFLY FOUNDATION	N/A	GENERAL & UNRESTRICTED	1,000.
PO BOX 334	PC		
MASON, OH 45040			
EDUCATE LANKA FOUNDATION INC	N/A	GENERAL & UNRESTRICTED	2,500.
12728 MIDDLEVALE LN	PC		
SILVER SPRING, MD 20906			
FIRELIGHT FOUNDATION	N/A	MALAWI PROJECT	3,000.
740 FRONT ST STE 380	PC		
SANTA CRUZ, CA 95060			
FRACTURED ATLAS INC	N/A	WORKING NARRATIVES PROJECT	3,000.
248 W 35TH ST 10TH FLR	PC		
NEW YORK, NY 10001			
FREEDOM FROM HUNGER	N/A	GENERAL & UNRESTRICTED	35,000.
1644 DA VINCI CT	PC		
DAVIS, CA 95618			

83-0411607

ATTACHMENT 7 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GARDENS FOR HEALTH INTERNATIONAL	N/A	VIDEO STORYTELLING PROJECT	5,000.
PO BOX 51935	PC		
BOSTON, MA 02205			
GUILFORD COLLEGE	N/A	PEACE AND CONFLICTS STUDIES DEPARTMENT	1,000.
5800 W FRIENDLY AVE	PC		
GREENSBORO, NC 27410			
HOLY TRINITY MIDDLE SCHOOL	N/A	GENERAL & UNRESTRICTED	1,080.
3100 PARK RD	PC		
CHARLOTTE, NC 28209			
JOLKONA FOUNDATION	N/A	JAAGO FOUNDATION	5,000.
1904 3RD AVE., STE 417	PC		
SEATTLE, WA 98101			
LUMANA	N/A	GENERAL & UNRESTRICTED	5,000.
PO BOX 45753	PC	GEMERAL & UNRESTRICTED	5,000.
SEATTLE, WA 98145			
, >0110			
M&M PANTRY INC CRISIS FOOD CENTER	N/A	GENERAL & UNRESTRICTED	1,000.
PO BOX 1158	PC		
MT STERLING, KY 40353			

83-0411607

ATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MINI MERMAID RUNNING CLUB	N/A	GENERAL & UNRESTRICTED	2,000.
464 HAMPSTEAD WAY	PC		
SANTA CRUZ, CA 95062			
NORTHSTAR CHURCH	N/A	GENERAL & UNRESTRICTED	1,000.
PO BOX 158	PC		
CLIFTON PARK, NY 12065			
PRECIOUS BLOOD MINISTRY OF RECONCILIATION NFP	N/A		5,000.
PO BOX 9379	PC	TRAINING PROGRAM	
CHICAGO, IL 60609			
PRESS INSTITUTE FOR WOMEN IN THEDEVELOPING WORLD	N/A	GENERAL & UNRESTRICTED	10,000.
1012 TORNEY AVE	PC		
SAN FRANCISCO, CA 94129			
PROJECT AKILAH INC	N/A	GENERAL & UNRESTRICTED	20,000.
109 N BRUSH ST STE 300	PC		
TAMPA, FL 33602			
SANTA CRUZ LESBIAN AND GAY COMMUNITY CENTER	N/A	GENERAL & UNRESTRICTED	1,000.
PO BOX 8280	PC		
SANTA CRUZ, CA 95061			

83-0411607

ATTACHMENT 7 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SCHOOL FUND	N/A	JACKSGAP BROTHERS' VIDEO PROJECT	1,000.
455 COLERIDGE AVE	PC		
PALO ALTO, CA 94301			
SCHOOL FUND	N/A	VIDEO STORYTELLING PROJECT	5,000.
455 COLERIDGE AVE	PC	VIDEO STORITELLING PROJECT	5,000.
PALO ALTO, CA 94301	ΥC .		
PALO ALIO, CA 94301			
ST. JOSEPH THE WORKER MISSION	N/A	GENERAL & UNRESTRICTED	1,000.
PO BOX 55	PC		
ELKHORN CITY, KY 41522			
THE BOMA FUND INC	N/A	GENERAL & UNRESTRICTED	5,000.
PO BOX 1865	PC		
MANCHESTR CTR, VT 05255			
UPAYA SOCIAL VENTURES	N/A	GENERAL & UNRESTRICTED	15,000.
1904 3RD AVE STE 100	PC		
SEATTLE, WA 98101			
VOICE OF WITNESS - A NONPROFIT PUBLIC BENEFIT CORP	N/A	GENERAL & UNRESTRICTED	3,000.
849 VALENCIA ST	PC		
SAN FRANCISCO, CA 94110			

TOTAL CONTRIBUTIONS PAID \_\_\_\_\_\_150,680.

## FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

#### 83-0411607

				ATTACHMENT	8
DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
INTEREST INCOME - PRI			14	500.	
TOTALS				500.	

Cumulative e-File History 2014 Federal	
Taxpayer Name:	Skees Family Foundation
Return Type:	990, 990PF
Submitted Date:	05/13/2015 11:22:54
Acknowledgement Date:	05/13/2015 11:58:19
Status:	Accepted
Submission ID:	06391520151335000089