### **PUBLIC INSPECTION COPY**

Image: Second	No. 1545-0047
Characterization of the 2015 Calendar year, or tax year beginning Oct 1       2015, and ending       Sep 30       2016         B       Check registration       Characterization       Stark Mountain Foundation, Inc.       Demographic endines       Demographic endines       03 - 0369897         Number of registration       Demographic endines       Characterization       Stark Mountain Foundation, Inc.       Demographic endines       03 - 0369897         Number of registration       Demographic endines       Stark Mountain Foundation, Inc.       Demographic endines       03 - 0369897         Number and street (or P.O. box IT and is not delivered to street address)       Roombule       E Teleptone number         Instructions in the organization       Col or town, state or province, country, and 2IP or foreign postil code       W1       O5673         Mane datage       Wait s field       VT       05673       G Gross receipts \$ 692,778         In tark server state of price organization       X [S01(0)(3)       S01(2)       1       M497(a)(1) or S127         J       Website:       www.stark mountain.org       Hait is a group return to suborinater?       W1         For or organization:       X [S01(0)(3)       S01(2)       1       Merce organization:       Y2000       M State of legal domole:         Y       Wear of toramator       X [S01(0)(3)	015
B       Check if applicable:       C       Name organization       Stark       Mountain       Foundation       Inc.       D       Employer identification number         Name or change       Nume or organization       Stark       Mount and steed (of PO. box if mail is not delivered to street address)       Room/suite       0.3 - 0.3 6.9 8.9 7         Initial readmetrinead       P.O. Box 1221       Core town, sate or province, country, and ZIP or foreign postiol code       E       Telephone number       (80.2)       5.83 - 35.3.6         Initial readmetrinead       P.O. Box 1221       Waits field       VT       0.56.7.3       G cross receipts \$ 6.92.7.78         Peneloge Parson P.O. Box 1221       Waits field       VT       0.56.7.3       G cross receipts \$ 6.92.7.78         I Tax-exempt Statis       XS[O(3)       SO(16) (1)       Yein (Statistic)       Yein (Statistic)       Yein (Statistic)         J Website:       www.starkmountain.org       Item (Statistic)       Yein (Statistic)       Yein (Statistic)       Yein (Statistic)         2 Check this box *       If the organization's mission or most significant activities:       Preserve and protect. the environmeer         3 Number of voing members of the governing body (Part VI, line 1a)       3       4	
Image: Construct opprovement of the construction of the constensity of the construction of the construction of the	LG
Name change       Number and streat (or P.O. box If mult is not delivered to street address)       Room/suite       E       Telephone number         Initial return       P.O. Box 1221       (802) 583-3536       (802) 583-3536         Amended return       Aranedad return       Aranedad return       Arane address of principal office:       Ye       (802) 583-3536         Perior Landon address of principal office:       Perior Landon address of principal office:       Ye       (802) 583-3536         Perior Landon address of principal office:       Perior Landon address of principal office:       Ye       (802) 783         Ye       Perior Landon address of principal office:       Ye       (802) 783       (802) 783         Ye       Perior Landon address of principal office:       Ye       (902) 783       (902) 783         Ye       Perior Landon address of principal office:       Ye       (902) 783       (902) 783         Ye       Perior Landon address of principal office:       Ye       (902) 783       (902) 783         Ye       Perior Landon address of principal office:       Ye       (902) 783       (902) 783         Ye       Perior Canadia office:       Ye       (902) 783       (902) 783       (902) 783         Ye       Ye       Staturn office:       Ye       (902) 783       (90	number
Interview       P.O. Box 1221       (802) 583-3536         Image: service return       Province, country, and ZIP or foreign postal code       (802) 583-3536         Maneade return       Anended return       Province, country, and ZIP or foreign postal code       (802) 583-3536         Maneade return       Anended return       Province, country, and ZIP or foreign postal code       (802) 583-3536         I       Tax-exempt status       X [501(c)]       S01(c)       * (Insect no.)       [4947(a)(1) or S27         I       Tax-exempt status       X [501(c)]       S01(c)       * (Insect no.)       [4947(a)(1) or S27         I       Tax-exempt status       X [501(c)]       S01(c)       * (Insect no.)       [4947(a)(1) or S27         I       Tax-exempt status       X [S01(c)]       S01(c)       * (Insect no.)       [4947(a)(1) or S27         K       Form of organization:       X [Corporation       Trut       Association       Other *       L Year of tormation:       2000       M State of legal domicle:       V         I       Birlefity describe the organization's mission or most significant activities:       Preserve and protect the environmeents       Intervironmeents         I       Birlefity describe the organization's mission or most significant activities:       Preserve and protect the environmeents       Intervironmeents	
Pair refurctionsharded       City or town, state or province, county, and ZIP or foreign postal code       Witt Sfield       VT       05673       C Gross receipts \$ 692,78         Amended return       Penelope Parson P.O. Box 1221 Waitsfield       VT       05673       Ho) Is this a group return for subordinates?       Iv         I       Tax-exempt status       X 501(c)(3)       501(c)       Image: Comparison of the group return for subordinates includer?       Ho) Is this a group return for subordinates includer?       Ho) Rest aubordinates includeres includer       Ho) Rest aubord	
Amended return Application pending       Waitsfield       VT       05673       G Gross receipts \$ 692,78         Tax-exempt status       X Sol(0(3)       501(0) (3)       501(0) (3)       9"         J       Tax-exempt status       X Sol(0(3)       501(0) (3)       9"         J       Website: -       www.starktoutntain.org       He) Are all subordinates include? I'Ns, status has (see instruction)         J       Website: -       www.starktoutntain.org       He) Group exemption number         K       Form of organization:       X Corporation       Trust       Association       Other *         L       Summary       Summary       Stark Mountain       3       Anmode y (Part V), line 1a)       3         A       Number of voting members of the governing body (Part V), line 1a)       3       4       4         4       Stark Mountain       5       6       6       6         7a       Total number of voting members of the governing body (Part V), line 1a)       7a       5       6         7a       Total number of voting members of the governing body (Part V), line 1a)       7a       7a       5         6       Total number of voting members of the governing body (Part V), line 1a)       7a       7a       5         7a       Total number of	536
Application pending       F Name and address of principal officer. Penel Ope Parson P. O. Box 1221 Waitsfield VT 05673       H(a) is this a group return for subordinates? (No Are all subordinates included?)         I Tax-exempt Istalus       X [S01(c)(3)       S01(c) ( ) ● (insert no)       4947(a)(1) or 05673         Website: ► wrw, starkTorountain.org       H(c) Are all subordinates included?         K Form of organization: X Corporation       Trust       Association       Other ►       L Year of forme and protect the environment         8       Form of organization's mission or most significant activities:       Preserve and protect the environment         3       Number of voting members of the governing body (Part VI, line 1a)       3         4       Number of independent voting members of the governing body (Part VI, line 1a)       4         5       Total number of undividuals employed in calendar year 2015 (Part V, line 2a)       6         6       Total number of undividuals employed in calendar year 2015 (Part V, line 2a)       7a         7a       Total number of undividuals employed in calendar year 2015 (Part V, line 2a)       6         6       Total number of undividuals employed in calendar year 2015 (Part V, line 2a)       7a         7b       Total number of undividuals employed in calendar year 2015 (Part V, line 2a)       6         10       Investment income (Part VIII, column (C), line 12       7a <td></td>	
Penelope Parson P.O. Box 1221 Waitsfield VT 05673       Http://waitachaitstesincluded?         1       Tax-exempt status       X 501(c) (3)       501(c) (1)       (insert no.)       4947(a)(1) or       527         J       Website: +       www.startmountain.org       Http://waitachaitstesincluded?       Http://waitachaitstesincluded?         J       Website: +       www.startmountain.org       Http://waitachaitstesincluded?       Http://waitachaitstesincluded?         J       Briefly describe the organization's mission or most significant activities:       Preserve and protect the environmet         2       Check this box +       if the organization discontinued its operations or disposed of more than 25% of its net assets.         3       Number of voing members of the governing body (Part VI, line 1a)       3         4       Number of individuals employed in calendar year 2015 (Part V, line 2a)       5         6       Total number of individuals employed in calendar year 2015 (Part V, line 2a)       7a         b       Net unrelated business revenue from Part VIII, column (C), line 12       7a         b       Net unrelated business revenue from Form 990-T, line 34       -27	
I       Tax-exempt status       X [501(c)(3)       501(c)       > (inset no.)       [4947(a)(1) or       527         J       Website: ►       www.starkmountain.org       H(c)       Group exemption number ►         Form or organization:       X [Corporation]       Trust       Association       Other ►       L Year of formation:       2000       M State of legal donicle:       V         Part I       Summary       If the organization's mission or most significant activities:       Preserve and protect the environme         2       Check this box ►       If the organization discontinued its operations or disposed of more than 25% of its net assets.         3       Number of individuals employed in calendar year 2015 (Part VI, line 1a)       4         4       Number of individuals employed in calendar year 2015 (Part V, line 2a)       5         6       Total number of volunteers (estimate if necessary)       7a         7a       Total number of norm Part VIII, column (C), line 12       7a         7a       Total number of Part VIII, line 1h)       130, 861.       61.         9       Porgram service revenue (Part VIII, line 2g)       130, 861.       61.         10       Investment income (Part VIII, column (A), lines 3, 4, and 7d)       -27.       -7.         11       Other sevenue (Part VIII, column (A), lines 4.	? Yes X No
I       Tax-exempt status       X [501(c) (x) ] (x)	Yes No
K       Form of organization:       X [Corporation]       Trust       Association       Other       L Year of formation:       2000       M State of legal domicile:       V         Part I       Summary       Infelly describe the organization's mission or most significant activities:       Preserve and protect the environme         Stark       Mountain       Infelly describe the organization discontinued its operations or disposed of more than 25% of its net assets.         3       Number of volume members of the governing body (Part VI, line 1a)       4         4       Number of volume or individuals employed in calendar year 2015 (Part V, line 2a)       4         5       Total number of individuals employed in calendar year 2015 (Part V, line 2a)       5         6       Total number of individuals employed in calendar year 2015 (Part V, line 2a)       6         7a       Total number of volunteers (estimate if necessary)       7       7         6       Total number of individuals employed in calendar year 2015 (Part V, line 2a)       7a       7a         6       Total number of volunteers (estimate if necessary)       7a       7a       7a         7a       Total unrelated business revenue from Form 990-T, line 34       7b       7a         9       Priogram service revenue (Part VIII, line 2g)       7a       7a       7a         10 <th></th>	
Part I       Summary         1       Briefly describe the organization's mission or most significant activities:       Preserve and protect the environme Stark Mountain         2       Check this box ►	
1       Briefly describe the organization's mission or most significant activities:       Preserve and protect the environmed Stark Mountain         2       Check this box ▶       if the organization discontinued its operations or disposed of more than 25% of its net assets.         3       Number of voting members of the governing body (Part VI, line 1a)       3         4       Number of individuals employed in calendar year 2015 (Part V, line 2a)       5         6       Total number of individuals employed in calendar year 2015 (Part V, line 2a)       6         7a       Total number of volunteers (estimate if necessary)       6         7a       Total number of volunteers (estimate if necessary)       7a         6       Total number of volunteers (estimate if necessary)       7a         7a       Total numelated business revenue from Part VIII, column (C), line 12       7a         7a       Total numelated business taxable income from Form 990-T, line 34       7b         8       Contributions and grants (Part VIII, line 2n)       130, 861.       6112         9       Program service revenue (Part VIII, column (A), lines 3, 4, and 7d)       -27.       -71         10       Investment income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)       844.       612         12       Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), lines 1-3)       110	icile: VT
Stark Mountain         2       Check this box ▶         3       Number of voting members of the governing body (Part VI, line 1a)         4       Number of voting members of the governing body (Part VI, line 1a)         5       Total number of individuals employed in calendar year 2015 (Part V, line 2a)         6       Total number of volunteers (estimate if necessary)         7a       Total number of volunteers (estimate if necessary)         6       Total number of volunteers (estimate if necessary)         7a       Total number of volunteers (estimate if necessary)         6       Total number of volunteers (estimate if necessary)         7a       Total number of volunteers (Part VIII, column (A), lines 34, and 7d)         7a       Total number of volunteers (Part VIII, column (A), lines 1-3	
14       Benefits paid to or for members (Part IX, column (A), line 4)	6 6 0 18 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.
15       Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	309,940.
16 a Professional fundraising fees (Part IX, column (A), line 11e)       16 a Professional fundraising fees (Part IX, column (A), line 11e)         b Total fundraising expenses (Part IX, column (D), line 25) ►       6, 246.         17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)       14, 139.         18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)       125, 120.         19 Revenue less expenses. Subtract line 18 from line 12       6, 558.	
b       Total fundraising expenses (Part IX, column (D), line 25) ►       6, 246.         17       Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)       14, 139.         18       Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)       125, 120.         19       Revenue less expenses. Subtract line 18 from line 12       6, 558.	
17       Other expenses (Part IX, column (A), lines Tia-Tia, Tii-24e)       14, 139.       14         18       Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)       125, 120.       320         19       Revenue less expenses. Subtract line 18 from line 12       6, 558.       290	
17       Other expenses (Part IX, column (A), lines Tia-Tia, Tii-24e)       14, 139.       14         18       Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)       125, 120.       320         19       Revenue less expenses. Subtract line 18 from line 12       6, 558.       290	10 556
<b>19</b> Revenue less expenses. Subtract line 18 from line 12         6,558.         290	10,756.
	320,696.
Reginning of Current Vear Hod of V	<u>290,487.</u>
<b>20</b> Total assets (Part X, line 16)	End of Year
20         Total assets (Part X, line 16)         58,986.         36'           21         Total liabilities (Part X, line 26)         0.         0.	<u>367,118.</u> 0.
ŽŽ       22       Net assets or fund balances. Subtract line 21 from line 20       58,986.       36'         Part II       Signature Block	367,118.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		D	ate	
Here	Penelope Parson		Trea	surer	
	Type or print name and title.				
	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN
Paid	William S. Huckabay, CPA			self-employed	P00154308
Preparer	Firm's name <b>Tapia</b> & Huck	abay, P.C.			
Use Only	Firm's address P.O. Box 38			Firm's EIN ► 47	-1371818
	Vergennes	VT 0549	1	Phone no. (80	2) 870-7086
May the IRS of	discuss this return with the preparer sh	nown above? (see instructions)			. X Yes No
BAA For Pa	perwork Reduction Act Notice, see	the separate instructions.	TEEA0101 10/	12/15	Form <b>990</b> (2015)

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			03-0369897 Page 2
ı aı		•	Г
1			
Preserve and protect the environment of Stark Mountain          2       Did the organization undertake any significant program services during the year which were not listed on the prior         Form 990 or 990-EZ?       If Yes, 'describe these new services on Schedule O.         3       Did the organization cases conducting, or make significant changes in how it conducts, any program services, as measured by expenses.         Section 501(c)(3) and 601(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.         4a (Code:	ntain		
2	Did the organization undertake any s	anificant program services during the year which	h were not listed on the prior
2	с ,	5 I 5 5	
3	Did the organization cease conductin	g, or make significant changes in how it conduc	ts, any program services? Yes 🔀 No
4	Section 501(c)(3) and 501(c)(4) organ	nizations are required to report the amount of gr	rgest program services, as measured by expenses. ants and allocations to others, the total expenses,
4.0	(Codo: ) (Expoposo ¢	41 OF C including grants of C	$(1, 0, \zeta)$ (Poverus $\dot{\zeta}$
4 d	·		
	zones.		
	Grant was made to The C	reen Mountain Club to steward	d maintenance of the Long Trail on the
	Stark Mountain ridgeli	ne	
4 h	(Code: ) (Expenses \$	269 094 including grants of S	
	·		
4 0	(Code: ) (Expenses \$	including grants of S	
70			) (Revenue - \$)
	990 (2015) Stark Mountain Foundation, Inc.         0.3 - 0.369897         Page           "Ill Statement of Program Service Accompletiments		
Form B00 (2015) Stark Wountain Foundation, Inc.       0.3-0.369897       P         PertIII Starement of Program Service Accomplishments       Check it Schedule O contains a response or note to any line in this Part III       Check it Schedule O contains a response or note to any line in this Part III         1 Birdly describe the organization undertake any significant program services during the year which were not listed on the prior Form 800 or 990-E27       Yes S         2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 800 or 990-E27       Yes S         11 Yes, 'describe these energies on Schedule O.       3       Did the organization cases conducting, or make significant changes in how it conducts, any program services?       Yes S         11 Yes, 'describe these changes on Schedule O.       0       Beachibe the organization cases conducting, or make significant changes in how it conducts, any program services?       Yes S         12 Yes, 'describe these changes on Schedule O.       0       Beachibe the organization cases conducting, or make significant changes in how it conducts, any program services?       Yes S         14 Yes, 'describe these changes on Schedule O.       0       Beachibe the organization cases conducting, or make significant changes in how it conducts, any program services?       Yes S         4a (Code:			
Form 990 (2015)       Stark Mountain Foundation, Inc.       03-0369897       Pr         Part III       Statement of Program Service Accomplishments       Check if Schedule O contains a response or note to any line in this Part III			
4 d	Other program services (Describe in	Schedule Q.)	
			) (Revenue \$
4 e			
BAA			Form <b>990</b> (2015

	<b>990</b> (2015) Stark Mountain Foundation, Inc. 03-036989	7	F	age 3
Par	t IV Checklist of Required Schedules			
		+	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
â	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a		Х
ł	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
C	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	Х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	12a		Х
ł	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ł	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х

#### **PUBLIC INSPECTIO** 03-0369897 Inc Page 4

	990 (2015) Stark Mountain Foundation, Inc. 03-036989	7	F	Page 4
Par	t IV Checklist of Required Schedules (continued)		-	
		r	Yes	No
	Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		x
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a</i>	24a		x
k	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
k	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes', complete Schedule L, Part II</i>	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i>	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
k	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
k	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (2	2015)

Form 990 (2015)

Form 990 (2015) Stark Mountain Foundation, Inc. 03-036989	7	Р	age 5
Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response or note to any line in this Part V			
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 0			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
ments, filed for the calendar year ending with or within the year covered by this return 2a 0			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	0		v
<b>3 a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
<b>4 a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b If 'Yes,' enter the name of the foreign country: ►			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).	0.5		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
services provided to the payor?	7 a		Х
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		х
d If Yes,' indicate the number of Forms 8282 filed during the year	10		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
organization have excess business holdings at any time during the year?	8		L
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		Х
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		

### **PUBLIC INSPECTION** Page 6

Form <b>990</b> (2015)	Stark	Mountain	Foundation,	Inc.
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03-0369897

Pa	rt VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes		d for	
	Schedule O. See instructions.			V
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	aion A. Governing Body and Management		Yes	No
1 ;	a Enter the number of voting members of the governing body at the end of the tax year 1a 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		100	
I	b Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			37
F	since the prior Form 990 was filed?	4 5		X
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 6		X
-	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	0		
	members of the governing body?	7 a		Х
I	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		х
•		7.0		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
		8a	Х	v
9	b Each committee with authority to act on behalf of the governing body?	8 b		X
_	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	,	)
40	Did the energiantics have lead charters branches as affiliates?	40 -	Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		X
	operations are consistent with the organization's exempt purposes?	10 b		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	<ul> <li>a Did the organization have a written conflict of interest policy? If 'No,' go to line 13</li></ul>	12a 12b	x x	
(	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in			
40	Schedule O how this was done	12 c 13	Х	v
13 14	Did the organization have a written document retention and destruction policy?	13		X X
15	Did the process for determining compensation of the following persons include a review and approval by independent	14		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15 a		X
I	<b>b</b> Other officers or key employees of the organization	15 b		X
40	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
168	taxable entity during the year?	16 a		Х
	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Sec	organization's exempt status with respect to such arrangements?	100		L
17				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le –	
	for public inspection. Indicate how you made these available. Check all that apply.         X       Own website         X       Upon request         Other (explain in Schedule O)			
19		e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	Hall & Holden PC 705 Mill Brook Road Waitsfield VT 05673 (80	12) 4	96-	3140

PI	UBLIC INSPECTION C	COPY
Form 990 (2015) Stark Mountain Foundation, Inc	03-0369897	Page 7
Part VII Compensation of Officers, Directors, Truste Independent Contractors	es, Key Employees, Highest Compensated Emplo	oyees, and
Check if Schedule O contains a response or note to any lin	ne in this Part VII .........................	🗋
Section A. Officers, Directors, Trustees, Key Employ	ees, and Highest Compensated Employees	
1 a Complete this table for all persons required to be listed. Report com organization's tax year.	pensation for the calendar year ending with or within the	
• List all of the organization's <b>current</b> officers, directors, trustees (w compensation. Enter -0- in columns (D), (E), and (F) if no compensation		
• List all of the organization's current key employees, if any. See ir	structions for definition of 'key employee.'	
• List the organization's five <b>current</b> highest compensated employe who received reportable compensation (Box 5 of Form W-2 and/or Box organization and any related organizations.		

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Х Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(C)	)					
(A) Name and Title	(B) Average hours per	thar	n one Ì s both	box, ι an of	unless	ck more person and a e)	e n	(D) Reportable compensation from	(E) Reportable compensation from	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	organization from the organization and related organizations
(1) Kenneth Frey President	<u>1.00</u>	x		Х						
(2) Penelope Parson Treasurer	_5.00	X		Х						
(3) George Gonnella Secretary	_1.00	Х		Х						
(4) <u>Sandra Strempel</u> Vice President	<u>1.00</u>	Х		Х						
	<u>1.00</u>	Х								
_(6)_Andrew_Snow Director	<u>1.00</u>	x								
(8)										
(10)										
(11)										
(12)										
(13)										
(14)										
ВАА	TEEA0	107	10/12/	15						Form <b>990</b> (2015)

	<b>990</b> (2015) Stark Mountain Foundati									03-03698			ge <b>8</b>
Part	VII Section A. Officers, Directors, Tru	istees,	Key	Em	plo	bye	es, a	ano	d Highest Con	pensated Em	ployees	S (conti	nued)
	(A) Name and title	(B) Average hours per week (list any hours for related organiza - tions below dotted line)	box	not ch , unles cer an	s per	ition more rson i lirecto	than the both the both the both the both the both the soft the the both the soft the the both	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	amou com fr orga and	(F) timated nt of otho- bensation om the anization related anizations	n
(15)_		, 					cd						
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
c d	Sub-total						<u> </u>						
	Total number of individuals (including but not limited from the organization ► 0	to those	listed	abov	ve)	who	recei	iveo	d more than \$100,0	000 of reportable o	compensat	ion	1
	Did the organization list any <b>former</b> officer, director, on line 1a? If 'Yes,' complete Schedule J for such in										3	Yes	No X
	For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the such individual	han \$150,	,000?	If 'Ye	es' d	com	plete	Sch	nedule J for		4		X
5	Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' c	ompensat	tion fr	om a	ny ι	unre	lated	org	anization or individ				X
Sect	ion B. Independent Contractors												
	Complete this table for your five highest compensat compensation from the organization. Report compe										vear.		
	(A) Name and business addre				100				(B) Description o			<b>C)</b> nsatior	n
	Total number of independent contractors (including	but not lir	nited	to the	ose	liste	ed abc	ove)	) who received mo	re than			
	\$100,000 of compensation from the organization	► 0											

#### **PUBLIC INSPECTION COPY** Page 9 03-0369897

Form 990 (2015) Stark Mountain Foundation, Inc.

#### Part VIII Statement of Revenue

		(A)	(B)	(C)	(D)
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from ta under sections 512-514
1 a Federated campaigns 1	a				
	b				
5	с				
	d				
e Government grants (contributions)	e				
f All other contributions, gifts, grants, and similar amounts not included above 1	f 612,588.				
<b>g</b> Noncash contributions included in lines 1a-1f:	01/11/				
h Total. Add lines 1a-1f	· · · · · · · · · · · · •	612,588.			
	Business Code				
2a 	-				
b					
с 	-				
u	-				
f All other program service revenue	-				
g Total. Add lines 2a-2f					
3 Investment income (including dividence					
other similar amounts)					
4 Income from investment of tax-exemp	t bond proceeds				
<b>5</b> Royalties					
(i) Real	(ii) Personal				
6 a Gross rents					
b Less: rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7 a Gross amount from sales of					
b Less: cost or other basis and sales expenses 81,60	15				
<b>c</b> Gain or (loss)1,96					
<b>d</b> Net gain or (loss)		-1,965.	0.	0.	-1,96
8 a Gross income from fundraising events (not including \$		1,203.			
of contributions reported on line 1c).	-				
See Part IV, line 18	<b>a</b> 560.				
<b>b</b> Less: direct expenses	b				
c Net income or (loss) from fundraising	events ►	560.		0.	56
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	а				
<b>b</b> Less: direct expenses	b				
c Net income or (loss) from gaming activ	/ities ►				
<b>10 a</b> Gross sales of inventory, less returns and allowances					
<b>b</b> Less: cost of goods sold	b				
c Net income or (loss) from sales of inve					
Miscellaneous Revenue	Business Code				
11a 	-				
b	-				
<b>d</b> All other revenue					
	· · · · · · · · · · · •				

### PUBLIC INSPECTION COPY Inc. 03-0369897 Page 10

Form 990 (2015) Stark Mountain Foundation, Inc.

500	tion 501(c)(3) and 501(c)(4) organizations must cor				
	Check if Schedule O contains a res				
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	309,940.	309,940.	5	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16 .				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10					
11	Fees for services (non-employees):				
-	a Management				
		2,065.	0.	2,065.	0
	Accounting	7,894.	0.	2,015.	5,879
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
-	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	797.	0.	430.	367
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a t					
c					
c					
	All other expenses				
ء 25	Total functional expenses. Add lines 1 through 24e.	320,696.	309,940.	4,510.	6,246
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following	520,090.	505,540.	4,510.	0,240

### PUBLIC INSPECTION COPY Inc. 03-0369897 Page 11

Form 990 (2015) Stark Mountain Foundation, Inc.

Part	X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1 (	Cash – non-interest-bearing	48,986.	1	104,47
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		-	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		5	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
1	0 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation		10 c	
1	1	Investments – publicly traded securities		11	
1	2	Investments – other securities. See Part IV, line 11		12	
1	3	Investments – program-related. See Part IV, line 11		13	
1	4	Intangible assets		14	
1	5	Other assets. See Part IV, line 11	10,000.	15	262,64
1	6 <sup>.</sup>	Total assets. Add lines 1 through 15 (must equal line 34)	58,986.	16	367,11
1	7	Accounts payable and accrued expenses	0.	17	007711
1		Grants payable		18	
1	-	Deferred revenue		19	
2	0	Tax-exempt bond liabilities		20	
3 2	1	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
2	2	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
		Secured mortgages and notes payable to unrelated third parties		23	
		Unsecured notes and loans payable to unrelated third parties		24	
	5	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
2	6	Total liabilities. Add lines 17 through 25	0.	26	
1		Organizations that follow SFAS 117 (ASC 958), check here ►and complete lines 27 through 29, and lines 33 and 34.			
1		Unrestricted net assets		27	
2		Temporarily restricted net assets		27	
2		Permanently restricted net assets		20	
		Organizations that do not follow SFAS 117 (ASC 958), check here ► X and complete lines 30 through 34.		23	
		Capital stock or trust principal, or current funds		20	
3	-	Paid-in or capital surplus, or land, building, or equipment fund		30	
3		Retained earnings, endowment, accumulated income, or other funds	F0 007	31	260 11
3		Total net assets or fund balances	58,986.	32	367,11
	•		58,986.	33	367,11
3   3	4	Total liabilities and net assets/fund balances	58,986.	34	367,113 Form <b>990</b> (207

Pl	JBI	IC	INS	PE	CT]	0	Ν	C	<b>)</b> P	Y
									_	

Forn	n <b>990</b> (2015) Stark Mountain Foundation, Inc. 03-	0369897		Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		11,1	83.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3:	20,6	96.
3	Revenue less expenses. Subtract line 2 from line 1	3	2.9	90,4	87.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	ļ	58,9	86.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-	17,6	45.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
_	column (B))	10	31	57,1	18.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a	1			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
ŀ	b Were the organization's financial statements audited by an independent accountant?		2 b		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate				
	basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
(	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the auc review, or compilation of its financial statements and selection of an independent accountant?	lit, •••••	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		Х
I	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		
BAA			Form	<b>990</b> (2	:015)

		Dublic Chari				PECTIO	<b>N COPY</b> OMB No. 1545-0047
SCHEDULE A (Form 990 or 990-EZ)	Com	plete if the organizat	ty Status and P ion is a section 501(c)( )(1) nonexempt charita	(3) organ	ization		2015
Department of the Treasury	► Info	► Atta ormation about Sche	ch to Form 990 or Forr dule A (Form 990 or 99	n 990-EZ 00-EZ) ar		structions is	Open to Public Inspection
Department of the Treasury Internal Revenue Service			at www.irs.gov/form99	0.		Environmental and the	
Name of the organization Stark Mountain	Foundatio	n Inc				Employer identific	
		,	ganizations must c	omplete	e this p		
The organization is not a			0				
1 A church, con	vention of church	nes, or association of c	churches described in se	ection 17	0(b)(1)(	A)(i).	
2 A school desc	ribed in <b>section</b>	170(b)(1)(A)(ii). (Attao	ch Schedule E (Form 99	0 or 990-	EZ).)		
3 A hospital or a	a cooperative hos	spital service organiza	tion described in <b>section</b>	n 170(b)(	1)(A)(iii)	).	
4 A medical resonance, city, an	0	on operated in conjunc	tion with a hospital desc	ribed in s	section	170(b)(1)(A)(iii). Enter t	he hospital's
5 An organizatio		he benefit of a college art II.)	or university owned or o	perated I	by a gov	ernmental unit describe	d in <b>section</b>
		0	al unit described in section	•		•	
in section 170	<b>)(b)(1)(A)(vi).</b> (0	Complete Part II.)	part of its support from a	a governn	nental ur	nit or from the general p	ublic described
			(vi). (Complete Part II.)	·			
from activities investment inc	related to its exe come and unrelated	empt functions – subje	n 33-1/3% of its support act to certain exceptions, ncome (less section 511 art III.)	, and (2)	no more	than 33-1/3% of its sup	port from gross
- · ·	0		to test for public safety.				
or more public	ly supported org	anizations described i	for the benefit of, to perf n <b>section 509(a)(1)</b> or <b>s</b> porting organization and	ection 5	09(a)(2).	. See section 509(a)(3)	
organization(s	oorting organizat ) the power to re <b>t IV, Sections A</b>	gularly appoint or elec	ed, or controlled by its s a majority of the direct	upported ors or tru	organiz stees of	ation(s), typically by giv the supporting organiza	ing the supported ation. <b>You must</b>
management	porting organiza of the supporting <b>te Part IV, Secti</b>	organization vested in	trolled in connection with n the same persons that	h its supp control c	orted or r manag	ganization(s), by having ge the supported organiz	control or zation(s). <b>You</b>
c Type III funct organization(s	ionally integrate (see instruction	ed. A supporting organ ns). You must comple	nization operated in conr ete Part IV, Sections A,	nection w D, and E	ith, and	functionally integrated v	vith, its supported
functionally int	tearated. The ord	anization generally m	organization operated in ust satisfy a distribution A and D, and Part V.	connecti requirem	on with i ent and	its supported organization an attentiveness require	on(s) that is not ement (see
e Check this box	x if the organizat	ion received a written	determination from the I	RS that it	is a Typ	be I, Type II, Type III fun	ctionally
		ctionally integrated sup ganizations	oporting organization.				
		about the supported or					
(i) Name of organ	supported ization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is organization in your go docum	on listed	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
<u>(</u> A)							
(B)							
<u>(C)</u>							
<u>(D)</u>							
<u>(E)</u>							
Total							

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

Schedule A (Form 990 or 990-EZ) 2015

### UBLIC INSPECTION COP Page 2

03-0369897

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support Calendar year (or fiscal year (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total beginning in) Gifts, grants, contributions, and membership fees received. (Do not 1 include any 'unusual grants.') 8,042 23,650. 21,016. 130,861 612,588 796,157. Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf . . . . . . The value of services or 3 facilities furnished by a governmental unit to the organization without charge. . . Total. Add lines 1 through 3 . . 8,042 796,157. 4 23,650 21,016 130,861 612,588 The portion of total 5 contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . 400,079. Public support. Subtract line 5 6 from line 4 396,078. Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2011 (b) 2012 (d) 2014 (c) 2013 (e) 2015 (f) Total Amounts from line 4 . . . . . 7 8,042 23,650 21,016 130,861 612,588 796,157. 8 Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income from 9 0 similar sources . . . . 20 15 15 59. Net income from unrelated 9 business activities, whether or not the business is regularly carried on . . . . . . . Other income. Do not include 10 gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 11 through 10 . . . . . . 796,216 12 12 129 12 . . . First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 . . . . ► . . . . Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 49.75 % 14 Public support percentage from 2014 Schedule A, Part II, line 14 . . . . . . . . . . . 15 74.10 % 15 16 a 33-1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box Х and stop here. The organization qualifies as a publicly supported organization . . . . . b 33-1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . 17 a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2015

# PUBLIC INSPECTION COPY Schedule A (Form 990 or 990-EZ) 2015 Stark Mountain Foundation, Inc. 03-0369897 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails

to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support							
Calen	dar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
1	Gifts, grants, contributions and membership fees							.,
	and membership fees received. (Do not include							
	any 'unusual grants.')							
2	Gross receipts from admis-							
	sions, merchandise sold or							
	services performed, or facilities							
	furnished in any activity that is related to the organization's							
	tax-exempt purpose							
3	Gross receipts from activities							
	that are not an unrelated trade							
	or business under section 513 .							
4	Tax revenues levied for the							
	organization's benefit and either paid to or expended on							
	its behalf							
5	The value of services or							
	facilities furnished by a							
	governmental unit to the organization without charge							
6	е о							
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1.							
<i>i</i> a	2, and 3 received from							
	disqualified persons							
h	Amounts included on lines 2							
N	and 3 received from other than							
	disqualified persons that							
	exceed the greater of \$5,000 or							
	1% of the amount on line 13 for the year							
~	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
Sec	tion B. Total Support				•			
	dar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen	dar year (or fiscal year beginning in) ►	<b>(a)</b> 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	<b>(e)</b> 201	5	<b>(f)</b> Total
Calen 9	Amounts from line 6	<b>(a)</b> 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 201	5	<b>(f)</b> Total
Calen 9	Amounts from line 6 Gross income from interest, dividends,	<b>(a)</b> 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	<b>(f)</b> Total
Calen 9	Amounts from line 6	<b>(a)</b> 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 201	5	<b>(f)</b> Total
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b 11 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b 11 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	5	(f) Total
Calen 9 10 a b 11 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							(f) Total
Calen 9 10 a b 11 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organizati	on's first, second, t	third, fourth, or fifth	tax year as a sec	tion 501(c)(3	)	
Calen 9 10 a b 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization	on's first, second,	third, fourth, or fifth	tax year as a sec	tion 501(c)(3	)	
Calen 9 10 a b 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here blic Support F	on's first, second, t	third, fourth, or fifth	n tax year as a sec	tion 501(c)(3	)	· · · · · · · · · · · · · · · · · · ·
Calen 9 10 a b 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here	on's first, second, i <b>Percentage</b> ) divided by line 13	third, fourth, or fifth	n tax year as a sec	tion 501(c)(3	)	· · · · · · · •
Calen 9 10 a b 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here	on's first, second, i <b>Percentage</b> ) divided by line 13	third, fourth, or fifth	n tax year as a sec	tion 501(c)(3	)	· · · · · · · · · · · · · · · · · · ·
Calen 9 10 a b 0 11 12 13 14 <u>Sec</u> 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here blic Support F 5 (line 8, column (f 114 Schedule A, Pa	on's first, second, f Percentage ) divided by line 13 art III, line 15	third, fourth, or fifth	n tax year as a sec	tion 501(c)(3	)	· · · · · · · •
Calen 9 10 a b 0 11 12 13 14 <u>Sec</u> 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here blic Support F 5 (line 8, column (f 114 Schedule A, Pa estment Incor	on's first, second, f <b>Percentage</b> ) divided by line 13 art III, line 15 <b>me Percentag</b>	third, fourth, or fifth	n tax year as a sec	tion 501(c)(3	)	►
Calen 9 10 a b 10 a b 10 a b c 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here blic Support F 5 (line 8, column (f 114 Schedule A, Pa estment Incon 2015 (line 10c, co	on's first, second, f on's first, second, f <b>Percentage</b> ) divided by line 13 art III, line 15 <b>me Percentag</b> Jumn (f) divided by	third, fourth, or fifth 	n tax year as a sec	tion 501(c)(3	)	
Calen 9 10 a b 10 a b 10 a b 10 a 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here	on's first, second, i Percentage ) divided by line 13 art III, line 15 me Percentage Jumn (f) divided by A, Part III, line 17	third, fourth, or fifth 3, column (f)) •••••••••••••••••••••••••••••••••	n tax year as a sec	tion 501(c)(3	)	
Calen 9 10 a b 10 a b 10 a b 10 a 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here	on's first, second, t <b>Percentage</b> ) divided by line 13 art III, line 15 <b>me Percentag</b> Jumn (f) divided by A, Part III, line 17 id not check the bo	third, fourth, or fifth 	in tax year as a sec           in tax year as a sec	tion 501(c)(3	)  15 16 17 18 und line	· · · · · · ► □
Calen 9 10 a b 0 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here	on's first, second, <b>Percentage</b> ) divided by line 13 art III, line 15 <b>me Percentag</b> Jumn (f) divided by A, Part III, line 17 id not check the bo ere. The organiza	third, fourth, or fifth 	in tax year as a sec	tion 501(c)(3	)  15 16 17 18 und line	► 
Calen 9 10 a b 0 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	s for the organization top here blic Support F 5 (line 8, column (f 114 Schedule A, Pa estment Incor 2015 (line 10c, co m 2014 Schedule the organization d the organization d	on's first, second, on's first, second, <b>Percentage</b> ) divided by line 13 art III, line 15 <b>me Percentag</b> Jumn (f) divided by A, Part III, line 17 id not check the bo <b>ere.</b> The organiza id not check a box	third, fourth, or fifth 	tax year as a sec	tion 501(c)(3	)  15 16 17 18 nnd line  3-1/3%	►

### **BLIC INSPECTION C** Page 4

Schedule A (Form 990 or 990-EZ) 2015 Stark Mountain Foundation, Inc. 03-0369897

...

...

 Part IV
 Supporting Organizations

 (Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

			Yes	NO
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?			
	If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe			
	the designation. If historic and continuing relationship, explain	1		
		-		
2	Did the organization have any supported organization that does not have an IRS determination of status under section			
2	509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was			
	described in section 509(a)(1) or (2)	2		
		~		
2.4	Did the event institute have a comparised event institute discounties $504(z)(4)$ (5) or (5)2 (4)(as i accurately (b)			
32	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
		Ja		
Ľ	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization			
		3b		
		55		
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
, c	purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3c		
		50		
4 a	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and			
	if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
k	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled			
	or supervised by or in connection with its supported organizations	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under			
	sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that			
	all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
_				
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b)			
	and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported			
	organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the			
	organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
		ou		
L	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the			
Ľ	organization's organizing document?	5b		
		0.5		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one			
	or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of			
	the filing organization's supported organizations? If 'Yes,' provide detail in <b>Part VI</b>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(Č)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,'			
	complete Part I of Schedule L (Form 990 or 990-EZ)	8		
٥-	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons			
30	as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?			
	ff 'Yes,' provide detail in <b>Part VI</b>	9a		
k	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the			
	supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b>	9b		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from,			
	assets in which the supporting organization also had an interest? If Yes, provide detail in Part VI	9c		
40-				
108	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,'			
	answer 10b below	10a		
ł	Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine			
	whether the organization had excess business holdings.).	10b		

Schedule A (Form 990 or 990-EZ) 2015

# Schedule A (Form 990 or 990-EZ) 2015 Stark Mountain Foundation, Inc. 03-0369897 Page 5

Part	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	1a		
b	A family member of a person described in (a) above?	1b		
с	A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	1c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No

1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any		
	by elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such benefit carried out the number of the supported organization(c) that operated supervised or controlled the		
		2	

#### Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		

#### Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played			
	in this regard	3		

#### Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):

а		The organization satisfied the Activities Test. Complete line 2 below.	
---	--	--	--

b	The organization is the	parent of each of its supp	orted organizations. C	Complete line 3 below

c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2	Activities	Test. Answer	(a	) and (	(b	) below.
---	------------	--------------	----	---------	----	----------

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted			
substantially all of its activities	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have been engaged in these activities but for the encoded organization (s) would have been encoded in the encoded organization (s) would have been encoded in these activities but for the encoded organization (s) would have been encoded in the encoded organization (s) would have encoded in the encoded organization (s) would have been encoded in the encoded organization (s) would have encoded organiz			
	2b		
Devent of Supported Organizations, Annuar (a) and (b) below			
Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of			
each of the supported organizations? Provide details in <b>Part VI</b>	3a		
h Did the exercise ten everying a substantial degree of direction over the policies, programs, and activities of each of its			
supported organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard	3b		
	<ul> <li>supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities</li></ul>	supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities       2a         b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement       2b         Parent of Supported Organizations. Answer (a) and (b) below.       2b         a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.       3a         b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its       3a	supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities       2a         b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement       2b         Parent of Supported Organizations. Answer (a) and (b) below.       3a         a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.       3a         b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its       3a

Schedule A (Form 990 or 990-EZ) 2015

Yes No

Schedule <b>A</b> (Form 990 or 990-EZ) 2015	Stark	Mountain	Foundation,	Inc.
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03-0369897 Page **6** 

Part	V	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations
1		Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All

other Type III non-functionally integrated supporting organizations must complete Sections A through E.

			0	
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions).	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for			
7	production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1 a		
k	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
c	I Total (add lines 1a, 1b, and 1c)	1 d		
e	Discount claimed for blockage or other     factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
_				

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Schedule **A** (Form 990 or 990-EZ) 2015

Sche	dule A (Form 990 or 990-EZ) 2015 Stark Mountain Found	ation, Inc.	03-036	59897 Page <b>7</b>
Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	ations (continued)	
Sect	tion D – Distributions		· · ·	Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose	es		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	ons,		
3	Administrative expenses paid to accomplish exempt purposes of suppor	ted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organizat in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required – see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
C				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2016. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
2				

BAA

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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

### Schedule of Contributors

 

 or 990-PF)
 > Attach to Form 990, Form 990-EZ, or Form 990-PF.
 2015

 Department of the Treasury Internal Revenue Service
 > Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.
 2015

 Name of the organization
 > Employer identification number

Name of the organization		Employer identification number
Stark Mountain Foundation, In	nc.	03-0369897
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a priv	vate foundation
	527 political organization	
Form 990-PF	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

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**

I 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 for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

**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).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

#### **PUBLIC INSPECT** Page of of Part I 1 2

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization

Employer identification number

Stark Mountain Foundation, Inc.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

03-0369897

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Elizabeth H. Jondro 234 Post Office Road, P.O. Box 351 Waitsfield VT_05673	\$ <u>50,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Fidelity_Charitable P.O. Box_770001 Cincinnati0H_45277-0053_	\$ <u>81,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Brian & Annika Holtan P.O. Box 11 Waitsfield VT 05673	\$26 <u>,000</u> .	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person X
<u>4</u>	Mad River Glen Cooperative 57 Schuss Pass WaitsfieldVT_05673	\$ <u>16,495.</u>	Payroll Noncash (Complete Part II for noncash contributions.)
<u>4</u> (a) Number	57 Schuss Pass		Noncash
(a)	57 Schuss Pass	(c) Total	Noncash (Complete Part II for noncash contributions.)
(a) Number	57 Schuss Pass Waitsfield VT 05673 (b) Name, address, and ZIP + 4 Colleen & Lars Bruns P.O. Box 1451	(c) Total contributions	Noncash

### PUBLIC INSPECTION COPY Page 2 of 2 of Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization age <u>2</u> of <u>5</u> Employer identification number

Stark Mountain Foundation, Inc.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

03-0369897

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Meg Hourihan 175 West 13th Street, #20A	\$ <u>125,000</u> .	Person X Payroll Noncash (Complete Part II for
	<u>New YorkNY_10011</u>		noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>8</u>	GE_Foundation		Person X Payroll
	3135 Easton Turnpike	\$ <u>58,398</u> .	Noncash
	FairfieldCT_06828		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>9</u>	Nelson & Lucia Putnam	\$ <u>15,102</u> .	Person X Payroll Noncash X
	WaitsfieldVT_05673		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>10</u> _	Peter & Judy Hourihan	\$100,000.	Person X Payroll Noncash
	Charlestown MA_02129		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash

### **PUBLIC INSPECTION** Page

<u>1</u> to 1 of Part II Employer identification number

Stark Mountain Foundation, Inc.

BAA

03-0369897

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space	is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	450 shares General Electric	\$ 13,286.	11/05/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>5</u>	200 shares Chevron Corporation \$18,927 200 shares General Electric \$6,072 (Plus \$ 5,000 cash)	\$ 24,999.	03/11/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>6</u>	100 shares Honeywell International \$10,295 300 shares Omega Healthcare Investors \$10,282	\$20 <u>,577.</u>	12/22/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>9</u>	49 shares Biogen	\$15,102.	12/29/15_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
	<b> </b>		

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

			PUBLI	C INS	PEC	ΓΙΟ	N C(	<b>)PY</b>
SCHEDULE D (Form 990)		► Complet	plemental Financial e if the organization answered 5, 7, 8, 9, 10, 11a, 11b, 11c, 11c	d 'Yes' on Form 9	90.		OMB No. 15	
			Attach to Form 990 and its inst	).		m000	Open to	
Intern	al Revenue Service of the organization				w.iis.gov/i0i		Inspection dentification nur	
	Stark Mou	untain Foundation,	Inc.			03-036	9897	
Par	t I Organiza	tions Maintaining Dong	or Advised Funds or Oth	ner Similar Fur	nds or Acc	ounts.		
	Complete	If the organization answ	ered 'Yes' on Form 990, I		(h) [	undo ond o	other account	
1	Total number at e	nd of year			(b) F	unus anu c	Iner account	.5
2		ntributions to (during year)						
3		ants from (during year)						
4	Aggregate value a	t end of year						
5			advisors in writing that the asse ganization's exclusive legal cont			[	Yes	No
6	for charitable purp	oses and not for the benefit of	and donor advisors in writing th the donor or donor advisor, or f	for any other purpo	se conferrina		Yes	No
Part II Conservation Easements.								
		-	ered 'Yes' on Form 990, I					
1		,	he organization (check all that a		f a biotoriaally	important	land area	
		of land for public use (e.g., rec natural habitat		Preservation of Preservation of		•		
	Preservation							
2	Complete lines 2a	through 2d if the organization	held a qualified conservation co	ontribution in the fo	rm of a conse	rvation ea	sement on th	e
	last day of the tax	year.				lold at the	End of the	Tax Voar
	a Total number of co	onservation easements					End of the	
			ents					
	-		d historic structure included in (a					
(	I Number of conser structure listed in t	vation easements included in ( the National Register	c) acquired after 8/17/06, and n	not on a historic	. 2 d			
3	tax year ►		ansferred, released, extinguishe	-	the organiza	tion during	the	
4			servation easement is located		_			
5			rding the periodic monitoring, in			Г	Yes	No
6			inspecting, handling of violation					
7	Amount of expens ►\$	es incurred in monitoring, insp	ecting, handling of violations, a	nd enforcing conse	rvation easen	nents durin	ig the year	
8			ine 2(d) above satisfy the requir				Yes	No
9	In Part XIII, descri include, if applicat conservation ease	ole, the text of the footnote to the	ts conservation easements in its he organization's financial state	s revenue and expe ments that describe	ense statemer es the organiz	nt, and bala ation's acc	ance sheet, a counting for	ınd
Par	t III Organiza Complete	tions Maintaining Colle if the organization answ	ections of Art, Historical ered 'Yes' on Form 990, F	<b>Treasures, or</b> Part IV, line 8.	Other Sin	nilar Ass	sets.	
1 8	art, historical treas	sures, or other similar assets h	FAS 116 (ASC 958), not to repo eld for public exhibition, educati I statements that describes thes	ion, or research in f	atement and l furtherance of	palance sh public ser	eet works of vice, provide	,
I	historical treasure following amounts	s, or other similar assets held relating to these items:	FAS 116 (ASC 958), to report ir for public exhibition, education,	or research in furth	erance of put	olic service		
			ne1					
2	If the organization	received or held works of art.	historical treasures, or other sin	nilar assets for fina			ollowing	
			6 (ASC 958) relating to these ite			►\$		
						· · · ·		
			Instructions for Form 990.				ule <b>D</b> (Form	990) 2015

BAA	For Paperwork Reduction	n Act Notice,	see the Instructions	for Form 990.
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				PECTIO	_
Part III Organizations Mainta	k Mountain Fou			03-036	
3 Using the organization's acquisitio					, <i>i</i>
items (check all that apply):		. 🗂 .		-	
a Public exhibition			exchange programs		
<b>b</b> Scholarly research	tiona	e Other			
<ul> <li>c Preservation for future general</li> <li>4 Provide a description of the organic</li> </ul>		d explain how they	further the organization	's exempt purpose in	
Part XIII.		d explain now they		s exempt purpose in	
5 During the year, did the organizati to be sold to raise funds rather that	in to be maintained as	part of the organiza	ation's collection?		Yes No
Part IV Escrow and Custodia line 9, or reported an a	imount on Form 99	20, Part X, line	e organization answ 21.	vered 'Yes' on Form	990, Part IV,
<b>1 a</b> Is the organization an agent, truster on Form 990, Part X?					Yes No
<b>b</b> If 'Yes,' explain the arrangement ir	Part XIII and complet	e the following tabl	e:		
					Amount
<b>c</b> Beginning balance					
d Additions during the year					
e Distributions during the year					
f Ending balance					
<b>2 a</b> Did the organization include an an				· ·	
<b>b</b> If 'Yes,' explain the arrangement in	Part XIII. Check here	If the explanation r	has been provided on Pa		•••••
Part V Endowment Funds.	Complete if the org	anization answ	ered 'Yes' on Form	990 Part IV line 1	0
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1 a</b> Beginning of year balance		(4) - Hor Jour		(4) 11800 Joaro 2008	
<b>b</b> Contributions					<u> </u>
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
e Other expenditures for facilities					
and programs					
f Administrative expenses					
<ul><li>g End of year balance</li><li>2 Provide the estimated percentage</li></ul>	of the current year on	l halanco (lino 1a y	l column (a)) hold as:		<u> </u>
a Board designated or guasi-endow		%	column (a)) neiù as.		
b Permanent endowment ►	8				
c Temporarily restricted endowment		00			
The percentages on lines 2a, 2b, a					
3 a Are there endowment funds not in			re held and administere	d for the	Yes No
organization by: (i) unrelated organizations					. 3a(i)
(i) related organizations					. 3a(ii)
<b>b</b> If 'Yes' on line 3a(ii), are the relate					. 3b
4 Describe in Part XIII the intended					
Part VI   Land, Buildings, and					
Complete if the organiz		es' on Form 99	90. Part IV. line 11a	. See Form 990. Pa	art X. line 10.
Description of property		or other basis	(b) Cost or other	(c) Accumulated	(d) Book value
		vestment)	basis (other)	depreciation	
<b>1 a</b> Land					
<b>b</b> Buildings					
c Leasehold improvements					
d Equipment					
<b>e</b> Other	•				
Total. Add lines 1a through 1e. (Column	n (d) must equal Form :	990, Part X, columr	n (B), line 10c.)		

BAA

Schedule **D** (Form 990) 2015

Part VII	Investments – Other Securities. Complete if the organization answered "	f (es' on Form 990.	Part IV, line 11b, See Form 990, F	Part X, line 12.
(a) Desc	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	
	al derivatives	(1)		Joan market value
. ,	-held equity interests			
(3) Other				
(A)				
(B)				
(C)				
<u>(D)</u>				
<u>(E)</u>				
$\frac{(F)}{(O)}$				
$\frac{(G)}{(H)}$				
$\frac{(1)}{(1)} =$				
	— — — — — — — — — — — — — — — — — — —			
Part VIII	Investments – Program Related.			
	Investments – Program Related. Complete if the organization answered "			
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-o	of-year market value
(1)				
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, column (B) line 13.).			
Part IX	Other Assets.	(aa' an Earm 000	Bart IV line 11d See Form 000	Port V line 15
	Complete if the organization answered '` (a) Design (a)	scription	Fait IV, line TTu. See Form 990, F	(b) Book value
(1) Ben	eficial Interest in Assets Held			262,645.
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
(10)				
	lumn (b) must equal Form 990, Part X, column (B) li	ne 15.)	· · · · · · · · · · · · · · · · · · ·	262,645.
Part X	Other Liabilities. Complete if the organization answered 'Yes' on F	orm 000 Dart IV lino 1	110 or 11f Soo Form 000 Part V line 25	
	(a) Description of liability	(b) Book value		
(1) Fede	ral income taxes	(		
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	nn (b) must equal Form 990, Part X, column (B) line 25.)			
	uncertain tax positions. In Part XIII, provide the text of the footr			
iax positions	under FIN 48 (ASC 740). Check here if the text of the footnote h	ias been provided in Part XI	11	· · · · · · · · · · L

Schedule D (Form 990) 2015 Stark Mountain Foundation, Inc.	3-0369897	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	-
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities	-	
c Recoveries of prior year grants	-	
d Other (Describe in Part XIII.)	-	
e Add lines 2a through 2d	. 2 e	
3 Subtract line 2e from line 1	. 3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
<b>c</b> Add lines <b>4a</b> and <b>4b</b>	. 4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	· 1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	· 2 e	
3 Subtract line 2e from line 1	. 3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
<b>c</b> Add lines <b>4a</b> and <b>4b</b>		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	
Part XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE I (Form 990)	Gr	ants and Oth	PUBI ner Assistance i nd Individuals i	to Organization	SPEC	<b>FION</b>	COPPY 00045
		•	on answered 'Yes' on F				2015
Department of the Treasury	•	·	Attach to Form 99	0.			Open to Public
Internal Revenue Service	Information	about Schedule I	(Form 990) and its inst	ructions is at www.irs.	gov/form990.	Employer identific	Inspection
•	-					03-036989	
Stark Mountain Foundation, Part I General Information on G		ance				03-030989	) ]
1 Does the organization maintain records			ar assistance, the grante	os' oligibility for the grap	a or assistance, and		
the selection criteria used to award the	e grants or assistance?						X Yes No
2 Describe in Part IV the organization's p	procedures for monitoring	ng the use of grant i	unds in the United States	5.			
Part II Grants and Other Assista	nce to Domestic	Organizations	and Domestic Gov	ernments. Compl	ete if the organizat	ion answered 'Ye	s' on
Form 990, Part IV, line 21,							
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Mad River Glen Cooperativ					·		
Waitsfield VT 05673	03-0346605		20,000.				Storm damage
(2) Mad_River_Glen_Cooperativ							
<u>57 Schuss Pass</u>							
Waitsfield VT 05673	03-0346605		10,000.				Trail work
(3) Mad River Glen Cooperativ							
<u>57 Schuss Pass</u>							
Waitsfield VT 05673	03-0346605		5,900.				Single chair
(4) Mad_River_Glen_Cooperativ							
<u>57 Schuss Pass</u>							
Waitsfield VT 05673	03-0346605		23,500.				Snowmaking gun
(5) Mad River Glen Cooperativ							
57 <u>Schuss</u> Pass	00 0046605		102 400				
Waitsfield VT 05673	03-0346605		193,400.				FR expenses
(6) Mad_River_Glen_Cooperativ 57 Schuss Pass							
Waitsfield VT 05673	03-0346605		47,500.				Grooming mach.
(7) Mad River Glen Cooperativ			47,500.				
57_Schuss_Pass							
Waitsfield VT 05673	03-0346605		8,640.				Various
(8)							
2 Enter total number of section 501(c)(3)	and government organ	nizations listed in the	e line 1 table				0
3 Enter total number of other organizatio		ble					. 1

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901 11/04/15

Schedule I (Form 990) (2015)



### Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance		
1							
2							
3							
4							
5							
6							
7							
art IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							

Pt I Line 2 The Organization works closely with Mad River Glen Cooperative to ensure that grant funds are expended solely for the purposes for which funds were intended; periodic review of cash expenditures assures compliance with these grants.

SCHEDULE	Μ
(Form 990)	

### Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open To Public Inspection

Employer identification number

03-0369897

2015

Department of the Treasury Internal Revenue Service Name of the organization

#### Stark Mountain Foundation, Inc Part I Types of Property

	· · · · · · · · · · · · · · · · · · ·	<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) od of determ contribution	
1	Art – Works of art						
2	Art – Historical treasures						
3	Art – Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities – Publicly traded	Х	10	81,117.	Fair	market	value
10	Securities – Closely held stock						
11	Securities - Partnership, LLC, or trust interests .						
12	Securities – Miscellaneous						
13	Qualified conservation contribution – Historic structures						
14	Qualified conservation contribution – Other						
15	Real estate – Residential						
16	Real estate – Commercial						
17	Real estate – Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other► () .						
26	Other► ().						
27	Other► ().						
28	Other► ( ).						
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Donee A				29		0.
					•	Yes	No
	During the year, did the organization receive by contait must hold for at least three years from the date of t				at		
	for exempt purposes for the entire holding period? .					30 a	X
	If 'Yes,' describe the arrangement in Part II.						
31	Does the organization have a gift acceptance policy	that requires	the review of any non-st	andard contributions?		31	X
32a	Does the organization hire or use third parties or rela noncash contributions?					32 a	х
b	If 'Yes,' describe in Part II.						
33	If the organization did not report an amount in column describe in Part II.	n (c) for a typ	be of property for which o	column (a) is checked,			
	For Denemyerk Deduction Act Nation and the Inst					M (Farm 00)	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2015)

### PUBLIC INSPECTION COPY dation, Inc. 03-0369897 Page 2

Schedule M (Form 990) (2015) Stark Mountain Foundation, Inc.

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

I	PUBLIC INSPE	· · i	N COPY OMB No. 1545-0047
SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-E Complete to provide information for responses to specific questions of		2015
Department of the Treasury	Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructior	ns is	Open to Public Inspection
Internal Revenue Service Name of the organization	at www.irs.gov/form990.	Employer identifica	•
<u>Stark Mountain Fo</u>	pundation, Inc.	03-036989	
	The organization does not have committees that a	act on beha	alf of the
Pt VI, Line 8b	board.		
	The treasurer reviews the 990 and then sends a co	opy to each	n board member
Pt VI, Line 11b	for input before the return is filed.		
Pt VI, Line 12c	Compliance is discussed informally at meetings.		
	The organization does not have an executive dire	ector or an	ny other
Pt VI, Line 15b	employees.		
Pt XI	Change in Beneficial Interest in Assets Held by	Others.	
	Forms 990 since 2012 are available on the organi	zation's w	website at
Pt VI, Line 18	www.starkmountain.org.		
Pt VI, Line 19	Other governing documents are available upon rec	quest.	

### **PUBLIC INSPECTION COPY** Application for Extension of Time To File an

Exempt Organization Return

OMB No. 1545-1709

X

Department of the Treasury Internal Revenue Service

### File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only . . . . . . . .

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
Гуре or orint		
rint	Stark Mountain Foundation, Inc.	03-0369897
le by the	Number, street, and room or suite number. If a P.O. box, see instructions.	Social security number (SSN)
ue date for ing your	P.O. Box 1221	
eturn. See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
structions.	Waitsfield	VT 05673

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

● The books are in the care of ► <u>Hall &amp; Holden PC</u>		
Telephone No. ► (802) 496-3140       Fax No. ► (802) 496-7894         ● If the organization does not have an office or place of business in the United States, check this box	this is for the whole	e group,
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time		
<ul> <li>until May 15, 20 17 _, to file the exempt organization return for the organization named above. The extension is for the organization's return for:</li> <li>□ calendar year 20 or</li> <li>X tax year beginning Oct 1, 20 15 _, and ending Sep 30, 20 16</li> <li>2 If the tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Fin □ Change in accounting period</li> </ul>	al return	
3 a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3 c Ş	0.
Caution If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-FO	and Form 8879-F(	O for

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form 886	3 (Rev 1-2014) Stark Mountain For	undation.	Inc.	03-0369897	Page 2
• If you a	are filing for an Additional (Not Automatic) 3-Mon	oth Extension.	complete only Part II and check this		
	y complete Part II if you have already been granted				
	are filing for an Automatic 3-Month Extension, co				
	Additional (Not Automatic) 3-Month			(no conjes needed)	
Part II	Additional (Not Automatic) 3-wonth	Extension		identifying number, see	instructions
	in the second se		Eliter mers	Employer identification number (I	
	Name of exempt organization or other filer, see instructions.			Employer identification number (i	
Type or					
print	Stark Mountain Foundation, Inc.			03-0369897 Social security number (SSN)	
	Number, street, and room or suite number. If a P.O. box, see instructions.				
File by the due date for					
filing your return. See	P.O. Box 1221				
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
	Waitsfield VT 05673				
Enter the I	Return code for the return that this application is fo	r (file a separat	e application for each return)		· 01
Applicatio	on .	Return	Application		Return
Is For		Code	ls For		Code
Form 990	or Form 990-EZ	01			
Form 990-	BL	02	Form 1041-A		
Form 4720 (individual)		03	Form 4720 (other than individual)	dividual)	
Form 990-		04	Form 5227		
Form 990-T (section 401(a) or 408(a) trust)		05	Form 6069		
	T (trust other than above)	06	Form 8870	·····	12
Teleph If the c If this i whole grou	books are in the care of ► <u>Hall &amp; Holden</u> none No. ► <u>(802)</u> <u>496–3140</u> organization does not have an office or place of but s for a Group Return, enter the organization's four up, check this box ► If it is for part of the	Fax No. ► siness in the Ur digit Group Exe	emption Number (GEN)		is for the
members	he extension is for.	·····			
	uest an additional 3-month extension of time until		,20 <u>17</u> .		
5 For o	calendar year, or other tax year beginn	ing Oct 1	, 20 <u>15</u> , and ending <u>6</u>	<u>Sep 30,20 1</u>	<u>L6</u> .
6 If the	e tax year entered in line 5 is for less than 12 mont Change in accounting period			Final return	
7 State	e in detail why you need the extension <u>Add</u>	<u>itional t</u>	<u>ime is required in ord</u>	<u>er_to</u>	
cor	npile all of the information n	ecessary_	to prepare a complete .	<u>and</u>	
	curate tax return.				
8 a If this nonr	s application is for Forms 990-BL, 990-PF, 990-T, efundable credits. See instructions		<u> </u>	8a ş	0.
tax n	s application is for Forms 990-PF, 990-T, 4720, or ayments made. Include any prior year overpayme jously with Form 8868	nt allowed as a	credit and any amount paid	<u>8b</u> \$	0.
C Rala	nce due. Subtract line 8b from line 8a. Include you PS (Electronic Federal Tax Payment System). See	ur payment with	this form, if required, by using		0.
	Signature and Veri	fication mu	st be completed for Part II o	nly.	
Under penaltie correct, and co	es of perjury, I declare that I have examined this form, including accomplete, and that I am authorized to prepare this form.	companying schedule	es and statements, and to the best of my knowled	ge and belief, it is true,	
	Title	CPA	-/Agent		3/17
Signature F			1	Date ► 5/. Form 8868 (F	rev 1-2014)
	/				