

**FINDELL & COMPANY PC  
6605 UPTOWN BLVD NE # 320  
ALBUQUERQUE, NM 87110  
(505) 889-9104**

ENCHANTED LIFE FOUNDATION (ELF)  
12520 CANYON DE ORO  
LAS CRUCES, NM 88011

Dear Client:

Your 2014 Federal Return of Private Foundation will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization. There is a balance due of \$355 payable by January 15, 2016.

The tax payment must be electronically deposited through the Electronic Federal Tax Payment System (EFTPS).

The organization has undistributed income of \$22,572 on Form 990-PF for the tax year 2014. The organization must distribute this amount by the end of its 2015 tax year so that it will not be liable for the tax on undistributed income.

Your estimated tax schedule for 2015 is listed below:

| Due Date |    | 990-PF |
|----------|----|--------|
| 1/15/16  | \$ | 450    |
| 2/16/16  |    | 450    |
| 5/16/16  |    | 450    |
| 8/15/16  |    | 450    |
|          |    | -----  |
|          | \$ | 1,800  |

All federal estimated tax payments must be electronically deposited through the Electronic Federal Tax Payment System (EFTPS).

Please be sure to call us if you have any questions.

Sincerely,

GARY M. POTVIN

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

2014

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2014, or tax year beginning 9/01, 2014, and ending 8/31, 2015

ENCHANTED LIFE FOUNDATION (ELF)  
12520 CANYON DE ORO  
LAS CRUCES, NM 88011

A Employer identification number

26-1092395

B Telephone number (see instructions)

(575) 521-9123

C If exemption application is pending, check here. ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity  
☐ Final return ☐ Amended return  
☐ Address change ☐ Name change

D 1 Foreign organizations, check here. ☐2 Foreign organizations meeting the 85% test, check here and attach computation. ☐

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here. ☐

I Fair market value of all assets at end of year (from Part II, column (c), line 16) ☐ Accounting method: ☒ Cash ☐ Accrual  
☐ Other (specify) \_\_\_\_\_

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. ☐

▶ \$ 1,661,711.

(Part I, column (d) must be on cash basis.)

## Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

REVENUE

1 Contributions, gifts, grants, etc., received (attach schedule) . . .

4,500.

2 Check ☒ if the foundation is not required to attach Sch B

3 Interest on savings and temporary cash investments . . . . .

N/A

4 Dividends and interest from securities . . . . .

91,465.

91,465.

5a Gross rents . . . . .

b Net rental income or (loss) . . . . .

6a Net gain or (loss) from sale of assets not on line 10 . . . . .

19,520.

b Gross sales price for all assets on line 6a . . . . .

155,209.

7 Capital gain net income (from Part IV, line 2) . . . . .

19,520.

8 Net short-term capital gain . . . . .

9 Income modifications . . . . .

10a Gross sales less returns and allowances . . . . .

b Less: Cost of goods sold . . . . .

c Gross profit or (loss) (attach schedule) . . . . .

11 Other income (attach schedule) . . . . .

SEE STATEMENT 1

2,008.

12 Total. Add lines 1 through 11 . . . . .

117,493.

110,985.

ADMINISTRATIVE EXPENSES AND

13 Compensation of officers, directors, trustees, etc. . . . .

33,680.

6,736.

26,944.

14 Other employee salaries and wages . . . . .

15 Pension plans, employee benefits . . . . .

16a Legal fees (attach schedule) . . . . .

b Accounting fees (attach sch.) . . . . .

SEE ST 2

4,601.

1,872.

819.

c Other prof. fees (attach sch.) . . . . .

SEE ST 3

12,431.

12,153.

17 Interest . . . . .

18 Taxes (attach schedule) (see instrs) . . . . .

SEE STM 4

3,998.

460.

1,838.

19 Depreciation (attach sch) and depletion . . . . .

20 Occupancy . . . . .

21 Travel, conferences, and meetings . . . . .

10,350.

22 Printing and publications . . . . .

314.

23 Other expenses (attach schedule) . . . . .

SEE STATEMENT 5

6,131.

24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .

71,505.

21,221.

29,601.

25 Contributions, gifts, grants paid . . . . .

PART XV

30,500.

30,500.

26 Total expenses and disbursements. Add lines 24 and 25 . . . . .

102,005.

21,221.

60,101.

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements . . . . .

15,488.

b Net investment income (if negative, enter -0-) . . . . .

89,764.

c Adjusted net income (if negative, enter -0-) . . . . .

| Part II Balance Sheets      |  | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)          |   |            |            |
|-----------------------------|--|---|---|------------|------------|
|                             |  | Beginning of year<br>(a) Book Value   | End of year<br>(b) Book Value (c) Fair Market Value       |            |            |
| ASSETS                      | 1  | Cash — non-interest-bearing .....   | 6,384.  | 14,379.    | 14,379.    |
|                             | 2  | Savings and temporary cash investments .....  | 31,014.   | 39,324.    | 39,324.    |
|                             | 3  | Accounts receivable .....   |   |            |            |
|                             |  | Less: allowance for doubtful accounts .....   |   |            |            |
|                             | 4  | Pledges receivable .....  |   |            |            |
|                             |  | Less: allowance for doubtful accounts .....   |   |            |            |
|                             | 5  | Grants receivable .....   |   |            |            |
|                             | 6  | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) ..... |   |            |            |
|                             | 7  | Other notes and loans receivable (attach sch.) .....  |   |            |            |
|                             |  | Less: allowance for doubtful accounts .....   |   |            |            |
|                             | 8  | Inventories for sale or use .....   |   |            |            |
|                             | 9  | Prepaid expenses and deferred charges .....   |   |            |            |
|                             | 10a  | Investments — U.S. and state government obligations (attach schedule) .....   | 122,580.  | 96,330.    | 98,255.    |
|                             | b  | Investments — corporate stock (attach schedule) .....   |   |            |            |
|                             | c  | Investments — corporate bonds (attach schedule) .....   | 443,012.  | 442,702.   | 452,398.   |
|                             | LIABILITIES  | 11  | Investments — land, buildings, and equipment: basis ..... |            |            |
|                             |  | Less: accumulated depreciation (attach schedule) .....  |   |            |            |
| 12                          |  | Investments — mortgage loans .....  |   |            |            |
| 13                          |  | Investments — other (attach schedule) .....   | 874,370.  | 903,165.   | 1,057,355. |
| 14                          |  | Land, buildings, and equipment: basis .....   |   |            |            |
|                             |  | Less: accumulated depreciation (attach schedule) .....  |   |            |            |
| 15                          |  | Other assets (describe .....  |   |            |            |
| 16                          |  | <b>Total assets</b> (to be completed by all filers — see the instructions. Also, see page 1, item I) .....                    | 1,477,360.  | 1,495,900. | 1,661,711. |
| 17                          |  | Accounts payable and accrued expenses .....   | 3,180.  | 6,232.     |            |
| 18                          |  | Grants payable .....  |   |            |            |
| 19                          | Deferred revenue .....   |   |   |            |            |
| 20                          | Loans from officers, directors, trustees, & other disqualified persons ..... |   |   |            |            |
| 21                          | Mortgages and other notes payable (attach schedule) .....                    |   |   |            |            |
| 22                          | Other liabilities (describe .....  |   |   |            |            |
| 23                          | <b>Total liabilities</b> (add lines 17 through 22) .....                     | 3,180.  | 6,232.  |            |            |
| NET FUND ASSETS OR BALANCES | Foundations that follow SFAS 117, check here .....                           |   |   |            |            |
|                             | 24   | Unrestricted .....  |   |            |            |
|                             | 25   | Temporarily restricted .....  |   |            |            |
|                             | 26   | Permanently restricted .....  |   |            |            |
|                             | Foundations that do not follow SFAS 117, check here .....                    |   |   |            |            |
|                             | 27   | Capital stock, trust principal, or current funds .....  |   |            |            |
|                             | 28   | Paid-in or capital surplus, or land, bldg., and equipment fund .....  |   |            |            |
|                             | 29   | Retained earnings, accumulated income, endowment, or other funds .....  | 1,474,180.  | 1,489,668. |            |
|                             | 30   | <b>Total net assets or fund balances</b> (see instructions) .....   | 1,474,180.  | 1,489,668. |            |
|                             | 31   | <b>Total liabilities and net assets/fund balances</b> (see instructions) .....  | 1,477,360.  | 1,495,900. |            |

## Part III Analysis of Changes in Net Assets or Fund Balances

|   |  |   |            |
|---|--|---|------------|
| 1 | Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) ..... | 1 | 1,474,180. |
| 2 | Enter amount from Part I, line 27a .....   | 2 | 15,488.    |
| 3 | Other increases not included in line 2 (itemize) .....   | 3 |            |
| 4 | Add lines 1, 2, and 3 .....  | 4 | 1,489,668. |
| 5 | Decreases not included in line 2 (itemize) .....   | 5 |            |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 .....  | 6 | 1,489,668. |

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)

(b) How acquired  
P — Purchase  
D — Donation(c) Date acquired  
(month, day, year)(d) Date sold  
(month, day, year)

1 a SEE STATEMENT 6

b

c

d

e

(e) Gross sales price

(f) Depreciation allowed  
(or allowable)(g) Cost or other basis  
plus expense of sale(h) Gain or (loss)  
(e) plus (f) minus (g)

a

b

c

d

e

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) Fair Market Value  
as of 12/31/69(j) Adjusted basis  
as of 12/31/69(k) Excess of column (i)  
over column (j), if any(l) Gains (Column (h)  
gain minus column (k), but not less  
than -0-) or Losses (from column (h))

a

b

c

d

e

2 Capital gain net income or (net capital loss).....

If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7

2

19,520.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0-  
in Part I, line 8

3

0.

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

N/A

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ..... ☐ Yes ☐ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

| (a)<br>Base period years<br>Calendar year (or tax year<br>beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of<br>noncharitable-use assets | (d)<br>Distribution ratio<br>(column (b) divided by column (c)) |
|---|--|---|---|
| 2013  |  |   |   |
| 2012  |  |   |   |
| 2011  |  |   |   |
| 2010  |  |   |   |
| 2009  |  |   |   |

2 Total of line 1, column (d).....

2

3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the  
number of years the foundation has been in existence if less than 5 years.....

3

4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.....

4

5 Multiply line 4 by line 3.....

5

6 Enter 1% of net investment income (1% of Part I, line 27b).....

6

7 Add lines 5 and 6.....

7

8 Enter qualifying distributions from Part XII, line 4.....

8

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the  
Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

|   |           |        |        |
|---|-----------|--------|--------|
| 1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instrs) |           |        |        |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here.. <input type="checkbox"/> and enter 1% of Part I, line 27b. ....   |           | 1      | 1,795. |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b). ....   |           |        |        |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).  |           | 2      | 0.     |
| 3 Add lines 1 and 2.  |           | 3      | 1,795. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).  |           | 4      | 0.     |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.  |           | 5      | 1,795. |
| 6 Credits/Payments:   |           |        |        |
| a 2014 estimated tax pmts and 2013 overpayment credited to 2014   | 6a        | 1,440. |        |
| b Exempt foreign organizations – tax withheld at source   | 6b        |        |        |
| c Tax paid with application for extension of time to file (Form 8868).  | 6c        |        |        |
| d Backup withholding erroneously withheld   | 6d        |        |        |
| 7 Total credits and payments. Add lines 6a through 6d   | 7         | 1,440. |        |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached   | 8         |        |        |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   | 9         | 355.   |        |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | 10        |        |        |
| 11 Enter the amount of line 10 to be: Credited to 2015 estimated tax  | 11        |        |        |
|   | Refunded. |        |        |

**Part VII-A Statements Regarding Activities**

|  | Yes | No |
|--|-----|----|
| 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?   |     | X  |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?<br><i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i> |     | X  |
| c Did the foundation file Form 1120-POL for this year?   |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation..... > \$ 0. (2) On foundation managers..... > \$ 0.   |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers..... > \$ 0.  |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br><i>If 'Yes,' attach a detailed description of the activities.</i>   |     | X  |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>  |     | X  |
| 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |     | X  |
| b If 'Yes,' has it filed a tax return on Form 990-T for this year?   | N/A |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br><i>If 'Yes,' attach the statement required by General Instruction T.</i>   |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?                 | X   |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV.</i>  | X   |    |
| 8 a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>NM</u>   |     |    |
| b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If 'No,' attach explanation</i>   | X   |    |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV.</i>   |     | X  |
| 10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses.</i>  |     | X  |

BAA

Form 990-PF (2014)

**Part VII-A Statements Regarding Activities (continued)**

|   |   |    |     |    |
|---|---|----|-----|----|
| 11  | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions).                              | 11 |     | X  |
| 12  | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions).                             | 12 |     | X  |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13 | X   |    |
| Website address: <u>WWW.ENCHANTEDLIFEFOUNDATION.ORG</u> |   |    |     |    |
| 14  | The books are in care of <u>M.E. NELSON</u> Telephone no. <u>(419) 262-0983</u>   |    |     |    |
|   | Located at <u>8418 LINWOOD RD BOWLING GREEN OH</u> ZIP + 4 <u>43402</u>   |    |     |    |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here. <u>N/A</u> and enter the amount of tax-exempt interest received or accrued during the year. <u>15</u> <u>N/A</u> |    |     |    |
| 16  | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?                             | 16 | Yes | No |
|   | See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If 'Yes,' enter the name of the foreign country   |    |     | X  |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

|  | Yes                                     | No                                     |
|--|---|--|
| <b>1 a</b> During the year did the foundation (either directly or indirectly):   |   |  |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person?   | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?   | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>b</b> If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  | 1 b                                     | X                                      |
| Organizations relying on a current notice regarding disaster assistance check here   |   |  |
| <b>c</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?   | 1 c                                     | X                                      |
| <b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  |   |  |
| <b>a</b> At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?   | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| If 'Yes,' list the years <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>   |   |  |
| <b>b</b> Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see instructions.)   | 2 b                                     | N/A                                    |
| <b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.<br>► <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>   |   |  |
| <b>3 a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>b</b> If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.) | 3 b                                     | N/A                                    |
| <b>4 a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4 a                                     | X                                      |
| <b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?   | 4 b                                     | X                                      |

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here. ☐c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X

If 'Yes' to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 7      |   | 33,680.                                   | 0.  | 0.                                    |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |

2 Compensation of five highest-paid employees (other than those included on line 1 — see instructions). If none, enter 'NONE.'

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| NONE  |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |

Total number of other employees paid over \$50,000. 0





**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|          |   |           |            |
|----------|---|-----------|------------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |           |            |
| <b>a</b> | Average monthly fair market value of securities   | <b>1a</b> | 1,707,615. |
| <b>b</b> | Average of monthly cash balances  | <b>1b</b> | 37,138.    |
| <b>c</b> | Fair market value of all other assets (see instructions)  | <b>1c</b> |            |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c)   | <b>1d</b> | 1,744,753. |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | <b>1e</b> | 0.         |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets  | <b>2</b>  | 0.         |
| <b>3</b> | Subtract line 2 from line 1d  | <b>3</b>  | 1,744,753. |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)   | <b>4</b>  | 26,171.    |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | <b>5</b>  | 1,718,582. |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5  | <b>6</b>  | 85,929.    |

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

|           |   |           |         |
|-----------|---|-----------|---------|
| <b>1</b>  | Minimum investment return from Part X, line 6   | <b>1</b>  | 85,929. |
| <b>2a</b> | Tax on investment income for 2014 from Part VI, line 5  | <b>2a</b> | 1,795.  |
| <b>b</b>  | Income tax for 2014. (This does not include the tax from Part VI.)  | <b>2b</b> |         |
| <b>c</b>  | Add lines 2a and 2b   | <b>2c</b> | 1,795.  |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | <b>3</b>  | 84,134. |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions   | <b>4</b>  | 2,008.  |
| <b>5</b>  | Add lines 3 and 4   | <b>5</b>  | 86,142. |
| <b>6</b>  | Deduction from distributable amount (see instructions)  | <b>6</b>  |         |
| <b>7</b>  | <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | <b>7</b>  | 86,142. |

**Part XII** Qualifying Distributions (see instructions)

|          |  |           |         |
|----------|--|-----------|---------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:   |           |         |
| <b>a</b> | Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26  | <b>1a</b> | 60,101. |
| <b>b</b> | Program-related investments — total from Part IX-B   | <b>1b</b> |         |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes  | <b>2</b>  |         |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the:   |           |         |
| <b>a</b> | Suitability test (prior IRS approval required)   | <b>3a</b> |         |
| <b>b</b> | Cash distribution test (attach the required schedule)  | <b>3b</b> |         |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                    | <b>4</b>  | 60,101. |
| <b>5</b> | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) | <b>5</b>  |         |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4  | <b>6</b>  | 60,101. |

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII** Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2013 | (c)<br>2013 | (d)<br>2014 |
|--|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2014 from Part XI, line 7.....   |               |                            |             | 86,142.     |
| <b>2</b> Undistributed income, if any, as of the end of 2014:  |               |                            |             |             |
| <b>a</b> Enter amount for 2013 only.....   |               |                            | 0.          |             |
| <b>b</b> Total for prior years: 20____, 20____, 20____   |               | 0.                         |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2014:  |               |                            |             |             |
| <b>a</b> From 2009.....  |               |                            |             |             |
| <b>b</b> From 2010.....  |               |                            |             |             |
| <b>c</b> From 2011.....  |               |                            |             |             |
| <b>d</b> From 2012.....  |               |                            |             |             |
| <b>e</b> From 2013..... 3,469.   |               |                            |             |             |
| <b>f</b> Total of lines 3a through e.....  | 3,469.        |                            |             |             |
| <b>4</b> Qualifying distributions for 2014 from Part XII, line 4: ▶ \$ 60,101.   |               |                            |             |             |
| <b>a</b> Applied to 2013, but not more than line 2a...   |               |                            | 0.          |             |
| <b>b</b> Applied to undistributed income of prior years (Election required — see instructions).....  |               | 0.                         |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required — see instructions).....  | 0.            |                            |             |             |
| <b>d</b> Applied to 2014 distributable amount.....   |               |                            |             | 60,101.     |
| <b>e</b> Remaining amount distributed out of corpus.....   | 0.            |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2014..... (If an amount appears in column (d), the same amount must be shown in column (a).)  | 3,469.        |                            |             | 3,469.      |
| <b>6</b> Enter the net total of each column as indicated below:  |               |                            |             |             |
| <b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5.....  | 0.            |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b.....   |               | 0.                         |             |             |
| <b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed..... |               | 0.                         |             |             |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount — see instructions.....   |               | 0.                         |             |             |
| <b>e</b> Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount — see instructions.....  |               |                            | 0.          |             |
| <b>f</b> Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015.....  |               |                            |             | 22,572.     |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions).....       | 0.            |                            |             |             |
| <b>8</b> Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions).....  | 0.            |                            |             |             |
| <b>9</b> Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a.....  | 0.            |                            |             |             |
| <b>10</b> Analysis of line 9:  |               |                            |             |             |
| <b>a</b> Excess from 2010.....   |               |                            |             |             |
| <b>b</b> Excess from 2011.....   |               |                            |             |             |
| <b>c</b> Excess from 2012.....   |               |                            |             |             |
| <b>d</b> Excess from 2013.....   |               |                            |             |             |
| <b>e</b> Excess from 2014.....   |               |                            |             |             |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

**2 a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.

| Tax year   | Prior 3 years |          |          |           |
|--|---------------|----------|----------|-----------|
| (a) 2014   | (b) 2013      | (c) 2012 | (d) 2011 | (e) Total |
|  |               |          |          |           |
| <b>b</b> 85% of line 2a  |               |          |          |           |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed   |               |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities   |               |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c                                   |               |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon:  |               |          |          |           |
| <b>a</b> 'Assets' alternative test — enter:  |               |          |          |           |
| <b>(1)</b> Value of all assets   |               |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)   |               |          |          |           |
| <b>b</b> 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed                              |               |          |          |           |
| <b>c</b> 'Support' alternative test — enter:   |               |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |               |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |               |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization   |               |          |          |           |
| <b>(4)</b> Gross investment income   |               |          |          |           |

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)**1 Information Regarding Foundation Managers:**

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

NONE

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

NONE

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

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

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

SEE STATEMENT 8

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

SEE STATEMENT FOR LINE 2A

**c** Any submission deadlines:

SEE STATEMENT FOR LINE 2A

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

SEE STATEMENT FOR LINE 2A

|  | 2019      | 2018      |
|--|-----------|-----------|
| 3 Grants and Contributions Paid During the Year or Approved for Future Payment | \$ 67,000 | \$ 67,000 |

BAA TEEA0501L 06/17/14 Form 990-PF (2014)





2014

## FEDERAL SUPPLEMENTAL INFORMATION

PAGE 1

CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

## ALLOCATION OF INVESTMENT EXPENSES TO TAX-EXEMPT INCOME -

## INVESTMENT REVENUE:

|   |           |         |
|---|-----------|---------|
| LONG-TERM CAPITAL GAINS                       | \$ 19,520 | 17.590% |
| DIVIDENDS AND INTEREST ON INVESTMENTS         | 88,981    | 80.170% |
| INTEREST ON TAX-EXEMPT GOVERNMENT OBLIGATIONS | 2,484     | 2.240%  |

## TOTALS

|           |          |
|-----------|----------|
| -----     | -----    |
| \$110,985 | 100.000% |
| =====     | =====    |

## INVESTMENT EXPENSES:

|                                       |           |
|---------------------------------------|-----------|
| INVESTMENT FEES                       | \$ 12,431 |
| AMOUNT ALLOCABLE TO TAX-EXEMPT INCOME | (278)     |
|                                       | -----     |

## DEDUCTIBLE INVESTMENT FEES

|           |
|-----------|
| \$ 12,153 |
| =====     |

2014

## FEDERAL STATEMENTS

PAGE 1

CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

**STATEMENT 1**  
**FORM 990-PF, PART I, LINE 11**  
**OTHER INCOME**

|                              | (A)<br>REVENUE<br>PER BOOKS | (B) NET<br>INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|------------------------------|-----------------------------|---------------------------------|-------------------------------|
| RECOVERIES OF QUAL DIST..... | \$ 2,008.                   |                                 |                               |
| <b>TOTAL</b>                 | <b>\$ 2,008.</b>            | <b>\$ 0.</b>                    | <b>\$ 0.</b>                  |

**STATEMENT 2**  
**FORM 990-PF, PART I, LINE 16B**  
**ACCOUNTING FEES**

|                      | (A)<br>EXPENSES<br>PER BOOKS | (B) NET<br>INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|----------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| ACCOUNTING FEES..... | \$ 4,601.                    | \$ 1,872.                       |                               | \$ 819.                       |
| <b>TOTAL</b>         | <b>\$ 4,601.</b>             | <b>\$ 1,872.</b>                |                               | <b>\$ 819.</b>                |

**STATEMENT 3**  
**FORM 990-PF, PART I, LINE 16C**  
**OTHER PROFESSIONAL FEES**

|                      | (A)<br>EXPENSES<br>PER BOOKS | (B) NET<br>INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|----------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| INVESTMENT FEES..... | \$ 12,431.                   | \$ 12,153.                      |                               |                               |
| <b>TOTAL</b>         | <b>\$ 12,431.</b>            | <b>\$ 12,153.</b>               |                               | <b>\$ 0.</b>                  |

**STATEMENT 4**  
**FORM 990-PF, PART I, LINE 18**  
**TAXES**

|                                | (A)<br>EXPENSES<br>PER BOOKS | (B) NET<br>INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|--------------------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| OTHER TAXES & LICENSES.....    | \$ 20.                       |                                 |                               |                               |
| PAYROLL TAXES.....             | 2,298.                       | \$ 460.                         |                               | \$ 1,838.                     |
| SECTION 4940 TAX PAYMENTS..... | 1,680.                       |                                 |                               |                               |
| <b>TOTAL</b>                   | <b>\$ 3,998.</b>             | <b>\$ 460.</b>                  |                               | <b>\$ 1,838.</b>              |



CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

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

|                           | (A)<br>EXPENSES<br>PER BOOKS | (B) NET<br>INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|---------------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| DUES & SUBSCRIPTIONS..... | \$ 1,298.                    |                                 |                               |                               |
| INSURANCE.....            | 1,099.                       |                                 |                               |                               |
| OFFICE EXPENSE.....       | 599.                         |                                 |                               |                               |
| STAFF DEVELOPMENT.....    | 3,135.                       |                                 |                               |                               |
| <b>TOTAL</b>              | <b>\$ 6,131.</b>             | <b>\$ 0.</b>                    |                               | <b>\$ 0.</b>                  |

**STATEMENT 6**  
**FORM 990-PF, PART IV, LINE 1**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

| ITEM | (A) DESCRIPTION                                   | (B) HOW<br>ACQUIRED | (C) DATE<br>ACQUIRED | (D) DATE<br>SOLD |
|------|---|---------------------|----------------------|------------------|
| 1    | 1025.431 INVESCO CHARTER FUND INSTITUTIONAL CLASS | PURCHASED           | VARIOUS              | 9/15/2014        |
| 2    | 1671.542 INVESCO CHARTER FUND INSTITUTIONAL CLASS | PURCHASED           | VARIOUS              | 11/05/2014       |
| 3    | EAST BATON ROUGE LA MTG FIN AUTH SINGLE           | PURCHASED           | VARIOUS              | 12/01/2014       |
| 4    | 1242.86 INVESCO CHARTER FUND INSTITUTIONAL CLASS  | PURCHASED           | VARIOUS              | 12/30/2014       |
| 5    | EAST BATON ROUGE LA MTG FIN AUTH SINGLE           | PURCHASED           | VARIOUS              | 4/01/2015        |
| 6    | EAST BATON ROUGE LA MTG FIN AUTH SINGLE           | PURCHASED           | VARIOUS              | 7/01/2015        |
| 7    | 5363.872 PIMCO COMMODITY REAL RETURN STRATEGY     | PURCHASED           | VARIOUS              | 7/24/2015        |
| 8    | 1140.53 PIMCO FUNDS SHORT TERM FUND INSTITUTIONAL | PURCHASED           | VARIOUS              | 7/24/2015        |
| 9    | EAST BATON ROUGE LA MTG FIN AUTH SINGLE           | PURCHASED           | VARIOUS              | 8/03/2015        |

  

| ITEM | (E)<br>GROSS<br>SALES | (F)<br>DEPREC.<br>ALLOWED | (G)<br>COST<br>BASIS | (H)<br>GAIN<br>(LOSS) | (I)<br>FMV<br>12/31/69 | (J)<br>ADJ. BAS.<br>12/31/69 | (K)<br>EXCESS<br>(I) - (J) | (L)<br>GAIN<br>(LOSS) |
|------|-----------------------|---------------------------|----------------------|-----------------------|------------------------|------------------------------|----------------------------|-----------------------|
| 1    | 25,000.               |                           | 18,557.              | 6,443.                |                        |                              |                            | \$ 6,443.             |
| 2    | 40,000.               |                           | 20,369.              | 19,631.               |                        |                              |                            | 19,631.               |
| 3    | 10,000.               |                           | 8,750.               | 1,250.                |                        |                              |                            | 1,250.                |
| 4    | 27,393.               |                           | 19,279.              | 8,114.                |                        |                              |                            | 8,114.                |
| 5    | 10,000.               |                           | 8,750.               | 1,250.                |                        |                              |                            | 1,250.                |
| 6    | 5,000.                |                           | 4,375.               | 625.                  |                        |                              |                            | 625.                  |
| 7    | 21,616.               |                           | 40,000.              | -18,384.              |                        |                              |                            | -18,384.              |
| 8    | 11,200.               |                           | 11,234.              | -34.                  |                        |                              |                            | -34.                  |
| 9    | 5,000.                |                           | 4,375.               | 625.                  |                        |                              |                            | 625.                  |
|      |                       |                           |                      |                       |                        |                              | <b>TOTAL</b>               | <b>\$ 19,520.</b>     |

CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

**STATEMENT 7**  
**FORM 990-PF, PART VIII, LINE 1**  
**LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

| NAME AND ADDRESS  | TITLE AND<br>AVERAGE HOURS<br>PER WEEK DEVOTED | COMPEN-<br>SATION | CONTRI-<br>BUTION TO<br>EBP & DC | EXPENSE<br>ACCOUNT/<br>OTHER |
|---|--|-------------------|----------------------------------|------------------------------|
| PHILIP V SPINA JR<br>4905 N HAMILTON<br>CHICAGO, IL 60625         | PRESIDENT<br>10.00                             | \$ 0.             | \$ 0.                            | \$ 0.                        |
| MARC SPINA<br>9 MOHAWK DRIVE<br>GREENSBURG, PA 15601              | VICE PRESIDENT<br>10.00                        | 0.                | 0.                               | 0.                           |
| ELIZABETH GRINNELL<br>12520 CANYON DE ORO<br>LAS CRUCES, NM 88011 | EXECUTIVE DIR.<br>35.00                        | 33,680.           | 0.                               | 0.                           |
| ME NELSON<br>8418 LYNWOOD ROAD<br>BOWLING GREEN, OH 43402         | DIRECTOR<br>10.00                              | 0.                | 0.                               | 0.                           |
| DAVID W SPINA<br>195 LAFITTE ROAD<br>LITTLE TORCH KEY, FL 33042   | DIRECTOR<br>10.00                              | 0.                | 0.                               | 0.                           |
| JEFF NELSON<br>8418 LINWOOD ROAD<br>BOWLING GREEN, OH 43402       | DIRECTOR<br>5.00                               | 0.                | 0.                               | 0.                           |
|   |  | TOTAL \$ 33,680.  | \$ 0.                            | \$ 0.                        |

**STATEMENT 8**  
**FORM 990-PF, PART XV, LINE 2A-D**  
**APPLICATION SUBMISSION INFORMATION**

NAME OF GRANT PROGRAM: GENERAL GRANTS AND DONATIONS PROGRAM  
NAME: ENCHANTED LIFE FOUNDATION (ELF)  
CARE OF: M.E. NELSON  
STREET ADDRESS: 8418 LINWOOD RD  
CITY, STATE, ZIP CODE: BOWLING GREEN, OH 43402  
TELEPHONE: (419) 262-0983  
E-MAIL ADDRESS:  
FORM AND CONTENT:

ALL APPLICATIONS MUST BE TYPE WRITTEN AND MUST COMPLY WITH ALL PAGE LIMITATIONS. FONT SIZE IS TO BE 12 POINT ARIAL OR LARGER AND THERE SHALL BE NO MORE THAN SIX LINES PER VERTICAL INCH. ALL PROPOSALS ARE TO BE SUBMITTED ON WHITE, 8 1/2 BY 11 PAPER. PROPOSALS WHICH DO NOT COMPLY WITH REQUIREMENTS WILL NOT BE REVIEWED AND WILL BE RETURNED. APPLICATIONS MUST CONTAIN THE FOLLOWING:

YEAR FOUNDED.  
FEDERAL TAX ID NUMBER.  
GEOGRAPHIC AREA SERVED.  
NUMBER OF PEOPLE SERVED ANNUALLY.  
MISSION STATEMENT.  
PURPOSE, METHODOLOGY, AND MOST RECENT ACCOMPLISHMENTS OF

CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

STATEMENT 8 (CONTINUED)  
FORM 990-PF, PART XV, LINE 2A-D  
APPLICATION SUBMISSION INFORMATION

ORGANIZATION.  
SPECIFICALLY STATE WHETHER OR NOT THE ORGANIZATION IS  
EXEMPT UNDER IRC SECTION 501(C)(3) GUIDELINES (OR EARLIER  
VERSIONS). INCLUDE DOCUMENTATION AS REQUIRED ATTACHMENTS.  
SPECIFICALLY STATE WHETHER OR NOT THE ORGANIZATION IS  
EXEMPT UNDER SECTION 509(A) GUIDELINES (PUBLIC CHARITY).  
INCLUDE DOCUMENTATION IN REQUIRED ATTACHMENTS.  
IS ORGANIZATION LEGALLY AFFILIATED WITH ANY OTHER  
ORGANIZATIONS? IF SO, PLEASE LIST.

## FUNDING INFORMATION

## FISCAL YEAR

OPERATING BUDGET FOR THE CURRENT FISCAL YEAR (INCLUDE  
INCOME AND EXPENSES).

IF THE ORGANIZATION WAS THE RECIPIENT OF FUNDING FROM THE  
AGENCIES BELOW, PLEASE LIST TOTAL AMOUNTS RECEIVED IN THE  
MOST RECENTLY COMPLETED FISCAL YEAR:

UNITED WAY  
FEDERAL GOVERNMENT  
STATE GOVERNMENT  
LOCAL GOVERNMENT

SIZE AND SOURCE OF 5 LARGEST GRANTS INCLUDING A  
DESCRIPTIVE TITLE AND PROJECT PERIOD.

## ORGANIZATION PERSONNEL

## NUMBER OF EMPLOYEES:

FULL-TIME  
PART-TIME  
VOLUNTEER  
INTERNS  
OTHER

## NUMBER OF DIRECTORS ON BOARD

SUBMISSION DEADLINES: 5PM EASTERN TIME JUNE 15TH & FIRST BUSINESS DAY OF DECEMBER  
RESTRICTIONS ON AWARDS: A. AN ORGANIZATION MAY NOT RECEIVE MORE THAN ONE NEW  
GRANT IN ANY TWELVE MONTH PERIOD  
B. GRANTS MAY NOT EXCEED \$50,000 IN ANY ONE YEAR PERIOD  
EXCEPT IN EXTRAORDINARY CIRCUMSTANCES AND APPROVED BY AT  
LEAST TWO THIRDS OF THE BOARD OF DIRECTORS.  
C. GRANTS IN EXCESS OF \$25,000 REQUIRE DOCUMENTATION OF A  
1:1 MATCH BY OTHER DONORS.  
D. GRANTS FOR CONSTRUCTION, RENOVATION, OR REMODELING OF  
FACILITIES IN EXCESS OF \$25,000 REQUIRE DOCUMENTATION OF A  
2:1 MATCH BY OTHER DONORS.  
E. ALL GRANTEEES ARE REQUIRED TO SUBMIT A BRIEF FINAL  
PROGRESS REPORT NO LATER THAN 90 DAYS AFTER THE COMPLETION  
OF THE BUDGET PERIOD.

## NAME OF GRANT PROGRAM:

## NAME:

## CARE OF:

## STREET ADDRESS:

## CITY, STATE, ZIP CODE:

## TELEPHONE:

## E-MAIL ADDRESS:

## FORM AND CONTENT:

## SPONSORSHIP PROGRAM

ENCHANTED LIFE FOUNDATION (ELF)

ELIZABETH GRINNELL

12520 CANYON DE ORO

LAS CRUCES, NM 88011

(575) 521-9123

INTERESTED ORGANIZATIONS MAY SUBMIT A LETTER REQUESTING  
SPONSORSHIP. THE LETTER SHALL INCLUDE: A DESCRIPTION OF  
THE NON-PROFIT ORGANIZATION'S GOALS, A DESCRIPTION OF THE  
EVENT, A DESCRIPTION OF THE COMMUNITY IMPACT AND HOW THE  
EVENT WILL FURTHER COMMUNITY PHILANTHROPY. TAX

CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

**STATEMENT 8 (CONTINUED)**  
**FORM 990-PF, PART XV, LINE 2A-D**  
**APPLICATION SUBMISSION INFORMATION**

SUBMISSION DEADLINES:  
 RESTRICTIONS ON AWARDS:

IDENTIFICATION NUMBERS ARE TO BE INCLUDED IN THE LETTER.  
 A FOLLOW-UP REPORT AFTER THE EVENT DETAILING THE IMPACT IS  
 REQUIRED FROM THE APPLICANT.  
 NO DEADLINES. A REQUEST MAY BE SUBMITTED AT ANY TIME  
 NO SINGLE SPONSORSHIP SHALL EXCEED \$500.

**STATEMENT 9**  
**FORM 990-PF, PART XV, LINE 3A**  
**RECIPIENT PAID DURING THE YEAR**

| NAME AND ADDRESS   | DONEE<br>RELATIONSHIP | FOUND-<br>ATION<br>STATUS | PURPOSE OF<br>GRANT   | AMOUNT     |
|--|-----------------------|---------------------------|---|------------|
| SETON HILL UNIVERSITY<br>1 SETON HILL DRIVE<br>GREENSBURG, PA 15601                      | GRANTOR/GRANTEE       | 501(C) (3)                | A GRANT TO<br>PROVIDE TWO<br>\$5,000<br>SCHOLARSHIPS.   | \$ 10,000. |
| SETON HILL UNIVERSITY<br>1 SETON DRIVE<br>GREENSBURG, PA 15601                           | GRANTOR/GRANTEE       | 501(C) (3)                | A GRANT TO<br>PROVIDE TWO<br>\$1,000<br>SCHOLARSHIPS.   | 2,000.     |
| SAN PATRICIO RETREAT CENTER<br>119 LA MANCHA<br>SAN PATRICIO, NM 88348                   | GRANTOR/GRANTEE       | 501(C) (3)                | MATCHING GRANT<br>TO PROVIDE FOR<br>THE INSTALLATION<br>OF AC AND<br>HEATING UNIT IN<br>RETREAT CENTER. | 5,500.     |
| CARLSBAD COMMUNITY COLLEGE<br>PO BOX 30001<br>LAS CRUCES, NM 88003                       | GRANTOR/GRANTEE       | 501(C) (3)                | SCHOLARSHIP<br>GRANT.   | 1,750.     |
| SISTERS OF ST FRANCIS /<br>NEUMANN COMM<br>2500 GRANT BLVD SUITE 3<br>SYRACUSE, NY 13208 | GRANTOR/GRANTEE       | 501(C) (3)                | A GRANT IN<br>SUPPORT OF THE<br>RELIGIOUS<br>RETIREMENT<br>COMMUNITY'S<br>"SISTER SAFETY"<br>PROGRAM.   | 4,000.     |
| EXPONENT PHILANTHROPY<br>1720 N STREET NW<br>WASHINGTON, DC 20036                        | GRANTOR/GRANTEE       | 501(C) (3)                | SPONSORSHIP<br>PROGRAM GRANT IN<br>SUPPORT OF<br>EDUCATION<br>PROGRAMS.                                 | 500.       |
| SISTERS OF ST JOSEPH<br>1725 BRENTWOOD ROAD<br>BRENTWOOD, NY 11717                       | GRANTOR/GRANTEE       | 501(C) (3)                | A GRANT TO<br>SUPPORT VOCATION<br>EDUCATION.  | 2,500.     |

2014

## FEDERAL STATEMENTS

PAGE 6

CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

STATEMENT 9 (CONTINUED)  
FORM 990-PF, PART XV, LINE 3A  
RECIPIENT PAID DURING THE YEAR

| <u>NAME AND ADDRESS</u>  | <u>DONEE<br/>RELATIONSHIP</u> | <u>FOUND-<br/>ATION<br/>STATUS</u> | <u>PURPOSE OF<br/>GRANT</u>   | <u>AMOUNT</u>  |
|--|-------------------------------|------------------------------------|---|----------------|
| ONEIDA COUNTY SHERIFF<br>DEPARTMENT<br>2000 EAST WINNEBAGO ST<br>RHINELANDER, WI 54502 | GRANTOR/GRANTEE               | 501 (C) (3)                        | SPONSORSHIP<br>GRANT TO SUPPORT<br>COMMUNITY<br>EDUCATION<br>PROGRAM. | \$ 500.        |
| SHERMAN COMMUNITY<br>FOUNDATION<br>210 SOSUTH SILVER AVE<br>DEMING, NM 88030           | GRANTOR/GRANTEE               | 501 (C) (3)                        | A GRANT TO<br>PROVIDE EXPANDED<br>HOME LITERACY<br>PROGRAM.           | 3,750.         |
| TOTAL \$   |                               |                                    |   | <u>30,500.</u> |

CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

**BALANCE SHEET****U.S. AND STATE GOVERNMENT OBLIGATIONS (FORM 990-PF)[O]**

|   |           |                        |
|---|-----------|------------------------|
| TEMPLETON GLOBAL BOND FUND ADVISOR CLASS..... | \$        | 74,455.                |
| EAST BATON ROUGE LA MTG FIN AUTH.....         |           | 48,125.                |
| <b>TOTAL</b>                                  | <b>\$</b> | <b><u>122,580.</u></b> |

**BALANCE SHEET****CORPORATE BONDS (FORM 990-PF)[O]**

|  |           |                        |
|--|-----------|------------------------|
| ORCHARD CULTURAL ED FACS FIN CORP.....         | \$        | 50,000.                |
| FPA NEW INCOME.....                            |           | 65,000.                |
| FIDELITY ADVISOR HIGH INCOME CLASS I.....      |           | 66,428.                |
| PIMCO FUNDS TOTAL RETURN FUND.....             |           | 45,120.                |
| PIONEER BOND FUND CLASS Y.....                 |           | 61,836.                |
| PIONEER HIGH YIELD FUND CLASS Y.....           |           | 33,248.                |
| FIDELITY ADVISOR STRATEGIC INCOME CLASS I..... |           | 38,380.                |
| PIMCO FUNDS SHORT TERM FUND.....               |           | 83,000.                |
| <b>TOTAL</b>                                   | <b>\$</b> | <b><u>443,012.</u></b> |

**BALANCE SHEET****OTHER (FORM 990-PF)[O]**

|                           |           |                        |
|---------------------------|-----------|------------------------|
| VARIOUS MUTUAL FUNDS..... | \$        | 874,370.               |
| <b>TOTAL</b>              | <b>\$</b> | <b><u>874,370.</u></b> |

**BALANCE SHEET****U.S. AND STATE GOVERNMENT OBLIGATIONS (FORM 990-PF)[O]**

|   |           |                       |
|---|-----------|-----------------------|
| TEMPLETON GLOBAL BOND FUND ADVISOR CLASS..... | \$        | 74,455.               |
| EAST BATON ROUGE LA MTG FIN AUTH.....         |           | 21,875.               |
| <b>TOTAL</b>                                  | <b>\$</b> | <b><u>96,330.</u></b> |

**BALANCE SHEET****CORPORATE BONDS (FORM 990-PF)[O]**

|  |           |                        |
|--|-----------|------------------------|
| ORCHARD CULTURAL ED FACS FIN CORP.....         | \$        | 50,000.                |
| FPA NEW INCOME.....                            |           | 71,000.                |
| FIDELITY ADVISOR HIGH INCOME CLASS I.....      |           | 66,428.                |
| PIMCO FUNDS TOTAL RETURN FUND.....             |           | 45,044.                |
| PIONEER BOND FUND CLASS Y.....                 |           | 61,836.                |
| PIONEER HIGH YIELD FUND CLASS Y.....           |           | 33,248.                |
| FIDELITY ADVISOR STRATEGIC INCOME CLASS I..... |           | 38,380.                |
| PIMCO FUNDS SHORT TERM FUND.....               |           | 76,766.                |
| <b>TOTAL</b>                                   | <b>\$</b> | <b><u>442,702.</u></b> |

2014

FEDERAL SUPPORTING DETAIL

PAGE 2

CLIENT ENC002

ENCHANTED LIFE FOUNDATION (ELF)

26-1092395

12/23/15

06:48AM

BALANCE SHEET  
OTHER (FORM 990-PF)[O]

|                           |    |                 |
|---------------------------|----|-----------------|
| VARIOUS MUTUAL FUNDS..... | \$ | 903,165.        |
| TOTAL                     | \$ | <u>903,165.</u> |