Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

OMB No. 1545-0047

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 and its instructions is at www.irs.gov/fo

<u>A</u>	For t	he 2014 ca	lendar year, or tax year beginning			90.		nspection	
В	Check	if applicable:	C Name of organization KATO FOUNDATION, INC.	nd en		Employer	id = -416141		_
	Addres	s change	Doing business as		—— ° '	⊏mpioyer	identification r	umber	
	Name o	change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	te		2715739			
Н		171	56 DANLEY RANCH ROAD			Telephone	number		_
	Initial re	eturn	City or town State ZIP code						
	Final retu	urn/terminated	ALAMOGORDO NM 88310		(575	5) 439-81	199		
\Box			Foreign country name Foreign province/state/county Foreign po	ostal co	ode				
	Amende	ed return			G (Gross recei	pts \$	102,3	35
	Applicat	tion pending	F Name and address of principal officer:		H/a) la this s				
			ED DENTON 56 DANLEY RANCH ROAD, ALAMOGORDO, NM 8831	950999655			r subordinates?	Yes X	
1	Tax-exer	mpt status:	X 504(5)(2)		H(b) Are all su				No
			X 501(c)(3) 501(c) (insert no.) 4947(a)(1) or 52 citynm.com	27	if "No," a	ittach a list.	(see instruction	is)	
				ŀ	H(c) Group ex	emption nu	ımber ▶		
1000		organization:	X Corporation	Year o	of formation:	2005	M State of le	gal domicile: T	~
140	art I		nmary			2000		<u> </u>	X
Φ	1	Briefly d	escribe the organization's mission or most significant activities:	ESC	UF AND P	ROVIDE	ADOPTION	N SERVICES F	-0
ŝ		CATS				I CO VIDE	ADOI HOI	1 OLIVICES F	
Activities & Governance									
Š	2	Check th	is box if the organization discontinued its operations or dispose			050/			
ŏ	3	Number	of voting members of the governing body (Part VI, line 1a)	sea or	r more than	1 25% of		ts.	
oō v)	4	Number	of independent voting members of the governing body (Part VI, line 1b)				3		3
ţį	5	Total nur	mber of individuals employed in calendar year 2014 (Part V, line 2a) .))	30 x 30 x		4		1
₹	6	Total nur	mber of volunteers (estimate if necessary).				5		3
Ä	7a	Total unr	elated business revenue from Part VIII, column (C), line 12				6		
	b	Net unre	lated business taxable income from Form 990-T, line 34				7a		0
			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				7b		0
Φ	8	Contribut	tions and grants (Part VIII, line 1h)	-	Prior			urrent Year	
ĵ.	9	Program	service revenue (Part VIII, line 2g)		40,3		45,03	32	
Revenue	10	Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)	-		37,6		52,57	′3
œ	11	Other rev	/enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-			2		2
	12	Total reve	nue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-			0		0
	13	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1–3)	_		77,9		97,60)7
	14	Benefits	paid to or for members (Part IX, column (A), line 4)	_			0		0
S	15	Salaries, o	other compensation, employee benefits (Part IX, column (A), lines 5–10)	-			0		0
nse	16a	Professio	anal fundraising fees (Part IX, column (A), line 11e)	·		8,8	370	12,42	0
Expenses	b	Total fund	If alsing expenses (Dort IV column /D) it - or)	NAME OF TAXABLE PARTY.	SINCE THE PARTY OF		0		0
ш	17	Other exp	Denses (Part IX, column (A), lines 44s, 44s, 64	0		STATE OF THE	The Ball and		
	18	Total exp	penses (Part IX, column (A), lines 11a–11d, 11f–24e)	_		49,9	56	65,36	1
	19	Revenue	enses. Add lines 13–17 (must equal Part IX, column (A), line 25) .	-		58,8	26	77,78	1
or			less expenses. Subtract line 18 from line 12			19,1		19,82	6
sets	20	Total asse	ets (Part X, line 16)	В	eginning of (nd of Year	
t Ass	21	Total liabi	lities (Part X, line 26) .	-		106,0	62	125,888	8
Net Assets or Fund Balances	22	Net asset	s or fund balances. Subtract line 21 from line 20	_			0		0
Pa	rt II	l Sian	ature Block			106,0		125,888	8
Unde	r penalti	es of perjury,	declare that I have examined this return, including account						
and b	elief, it is	s true, correct	and complete. Declaration of preparer (other than officer) is based on all information of which	its, and	d to the best o	of my knowl	edge		
Sig	n		Ell)	non pre	sparer nas an			· 1	_
Her		S	ignature of officer			Tony Volume 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5-20	6.	_
	·	I E	ED DENTON DDG	EGID	NENT 9 OF	Date			
		T	ype or print name and title	LOID	ENT & CE	:0			_
1201		Print/T	ype preparer's name Preparer's signature		Date		Las		_
Paid		DALII			Date	Chec		ΓIN	
	parer		CHAMBERLAIN Can la	5	9/25/201			0297003	
Use	Only		The state of the s				-0642125	0207000	-
		Firm's	address ► 1208 ADAMS AVENUE, ALAMOGORDO, NM 88310			0-0-0			_
May	the IR	S discuss	this return with the preparer shown above? (see instructions)		Phone	no. 5/	5-437-1970		_
21 70	3		(See instructions)				IX	Yes No	

THE PERSON NAMED IN	art III	KATO FOUNDATION, INC.	20-271	5739 Page
, ,	art III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to applied in the		
1	Briefly de	Check if Schedule O contains a response or note to any line in this describe the organization's mission:	s Part III.........	
	RESCUE	E AND PROVIDE ADOPTION SERVICES FOR CATC		
2	Did the o	organization undertake any significant program services during the year which		
	and prior	1 0111 990 01 990-EZ?	were not listed on	J.,
		areas those new services on schedule O.		Yes X No
3	Did the o	organization cease conducting, or make significant changes in how it conducted	. any program	
	00111000	** * * * * * * * * * * * * * * * * * * *	· · · · · · · · · · ·	Yes X No
4	Describe	describe these changes on Schedule O.	20 00 00 00 00 00	
		e the organization's program service accomplishments for each of its three larg s. Section 501(c)(3) and 501(c)(4) organizations are required to report the amo expenses, and revenue, if any, for each program service reported.	est program services, as meas ount of grants and allocations t	sured by o others,
4a	(Code:) (Expenses \$ 22,816 including grants of \$	\ /Povonuo ¢	27.504.)
	CAT RES	SCUE) (Revenue \$	37,581)
	Control (Control			
4b	(Code:) (Expenses \$ 50,971 including grants of \$	\	
	THRIFT S	STORE TO HELP FUND EXEMPT PURPOSE.) (Revenue \$	52,573)
łc	(Code:) (Expenses \$ including grants of \$	No selection of the contract o	
) (Expenses \$ including grants of \$) (Revenue \$)
-				
-				
-				
d (Other non-	rom conitro (D. III III III III III III III III III I		
u (Otner progr Expenses	ram services. (Describe in Schedule O.)		
5.000		\$ 0 including grants of \$ 0) (Revenue am service expenses	ue \$ 0)	

Part IV Checklist of Required Schedules

is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? It is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization required to complete Schedule C, Part I. Section 501(c)3) organizations. Did the organization repagale in licibity or in organization repagale in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II. Section 501(c)3) organizations. Did the organization repagale in lobbying activities, or have a section 501(n). Is the organization are 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 II. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III. Did the organization maintain oblections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 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 conseling, debt management, credit repair, or debt negaliation services? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for land, buildings, and equipment 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 VIII. Did the organization separate in amount for land, buildings, and equipment 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. Did the organization separate, independent audited financial statements for the tax year? If "Y	4	le the annual of the control of the		Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Is the organization required to complete Schedule C, Part I. 3 Did the organization regoge 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. 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 99-197 ("Yes," complete Schedule C, Part III. 5 Is 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? If "Yes," complete Schedule D, Part III. 5 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? II" "Yes," complete Schedule D, Part III. 5 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 5 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. 6 Did the organization report an amount for land, buildings, and equipment in Part X, line 12 If hat is 5% or more of its total assets reported in Part X, line 19 If "Yes," complete Schedule D, Part VV. 7 Did the organization report an amount for investments—rother securities in Part X, line 19 If hat is 5% or more of its total assets reported in Part X, line 19 If "Yes," complete Schedule D, Part VV. 8 Did the organization report an amount for investments—program related in Part X, line 19 If hat is 5% or more of its total assets reported in Part X, line 19 If		complete Schedule A			
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"Yes," complete Schedule D, Part II. 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 III. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 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. Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," as "complete Schedule D, Part V. If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for investments—organ 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. Did the organization report an amount for other insested in Part X, line 16 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other insested in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other insested in Part X, line 15% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. Did the organization report an amount for other insested in Part X, line 15% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. Did the organization report an amount	ь	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
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b IT "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		bid the organization operate one or more nospital facilities? If "Ves " complete Schooling II			
	b	ir "yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Part IV Checklist of Required Schedules (continued)

21	Did the annual of		Yes	No
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? If "Yes," complete Schedule I, Parts I and II.		100	140
22	bid the organization report more than \$5,000 of grants or other assistance to or for demand:	21		X
23	The state of the s	22		X
	organization's current and former officers, directors, trustees, key employees, and highest compensation			
24:	on projects in res, complete scriedule J	23		Х
	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? If "Yes," answer lines			
b	24b through 24d and complete Schedule K. If "No," go to line 25a. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
	to delease any tax-exempt bonds?			
d	Did the diganization act as an "on behalf of" issuer for honds outstanding at any time during the acceptance of	24c		
25a	Section 50 I(C)(3), 50 I(C)(4), and 50 I(C)(29) organizations. Did the organization and as in the section of th	24d		
h	a an eastern with a disqualified person during the year? If "yes " complete Schedule I - Part I	25a		Х
D	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in			- / \
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 200 or			
26	990-EZ? If "Yes," complete Schedule L, Part I	25b		Χ
	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 2 ft "Yes" to see the Control of th			
	disqualified persons? If "Yes," complete Schedule L, Part II.			
27	bid the organization provide a grant or other assistance to an officer director trustee, key employee	26		X
	substantial contributor of employee thereof, a grant selection committee member, or to a 250% controlled			
••	charged family member of any of these persons? If "Yes " complete Schedule I Part III	27		Х
28	was the organization a party to a business transaction with one of the following parties (see Schodule I	21		<u></u>
а	art v instructions for applicable filling thresholds, conditions, and exceptions).			
b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	and the second	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
29	was all silicely director, trustee, or direct or indirect owner? If "Yes " complete Schodule I. Doct IV	28c		Χ
30	The trie organization receive more than \$25,000 in non-cash contributions? If "Voc " complete School to Manual School to	29		Χ
	conservation contributions? If "You " complete Oak at 1.11			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30	_	X
	· ····································			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	31	+	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701.2 and 301 7701.20 (8.1%) and 301 77	32		Χ
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.			
34	The organization related to any tax-exempt or taxable entity? If "Ves " complete School to D. D. J. J.	33	_	<u>X</u>
	m, or iv, and i all v, line i	34		Х
	The angular region ridge a controlled entity within the meaning of section 512/b//12/2	35a		X
	is mile ord, and the ordanization receive any navment from or ongogo in one transaction in			_
36	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35b		
	organization? If "Yes," complete Schedule R, Part V, line 2. Did the organization conduct more than 50% of the activities the			
	- 1 and organization conduct more trial 5% of its activities through an entity that is not a related	36		<u>X</u>
	and that is treated as a partitership for federal income tax nurnoses? If "Ves." complete Schoolide D. Deut			
		37		Y
,0	Did the organization complete Schedule O and provide explanations in Cabadata O (D)	3/	-	<u>X_</u>
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
			- •	_

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this

14-	The series of the series are sponse or note to any line in this Part V			
1a	Enter the number reported in Poy 2 of Form 1000 Fig.		Yes	No
b	and trainibot reported in box 3 of Form 1096 Enter -0- it not applicable	7,84		and the
c	- The fideliber of Forms VV-20 [IICIU0e0 In line 12 Enter In it not applicable			
	and digarillation comply with backup withholding rules for reportable navmonts to wonders and			
2a	gaming (gambling) winnings to prize winners?	10	X	
	Transmittal of Maga and Tay			
b	Statements, filed for the calendar year ending with or within the year covered by this return .	3		
	and the least of the reported of life 2d, did the Ordanization file all required federal ample and the second of t	2b	X	
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)			
b	and organization have unlikely pusiness aross income of \$1 000 or more during the	3a		Х
4a	indication in Cohedule O	3b		
	and during the calcillativest, and the organization have an interest in or a signoture or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	1		
b	account)?	4a		Х
	See instructions for filing requirements for FinCon Form 444 Departs of Fin	SIMPLE SECTION	Esta!	
	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a				Value of the second
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
С	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		
	organization solicit any contributions that were not tax deductible as charitable contributions?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a	\sqcup	Х
	gifts were not tax deductible?	00040		
7	Organizations that may receive deductible contributions under section 170(c).	6b	ALCO CONTROL OF	CALL PROPERTY.
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for any last			
	and services provided to the payor?	414	940-4-1	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a	\vdash	X
С	bid the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b	\vdash	
	required to file Form 8282?	7.		V
d	in res, indicate the number of Forms 8282 filed during the year	7c	Sandan Augus	X
е	bid the digalization receive any funds, directly or indirectly to pay premiums on a personal honest contractor	7-		
f	Did the organization, during the year, pay premitime directly or indirectly on a paragraph and the second base of the second ba	7e 7f		X
g	a to organization received a contribution of qualified intellectual property did the organization file Form 2000 as a service to		-	X
h	in the diganization received a contribution of Cars, poars, airplanes, or other vehicles, did the organization file a Form 4000, on	7g 7h	\rightarrow	
8	opensoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711	1000000	The second
120	openisoring organization have excess business holdings at any time during the year?	0		111001
9	oponsoring organizations maintaining donor advised funds.	8		
а	Did the sponsoring organization make any taxable distributions under section 49662	9a	acutional lev	NE N THE
b	bid the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	_	
10	couldn't of (c)(r) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gloss receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 50 I(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			
12a	against amounts due or received from them.)			
b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	and the second	and the second
13	100, enter the amount of tax-exempt interest received or accrued during the year			
а	Section 501(c)(29) qualified nonprofit health insurance issuers			U
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	The state of the instructions for additional information the organization must report on Schedule O	196		
~	the trie amount of reserves the organization is required to maintain by the states in which			
С	the organization is licensed to issue qualified health plans			
14a	Lifter the amount of reserves on hand			100 mg 10
	bid the organization receive any payments for indoor tanning services during the tay years	14a		X
	11 100, flas it lifed a FUIII / ZU ID IEDOIT these naumonted If "No " man data a control of the	14b		

Form 990 (2014) KATO FOUNDATION, INC. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Enter the number of voting members of the governing body at the end of the tax year Yes No 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. Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 2 X 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X Did the organization contemporaneously document the meetings held or written actions undertaken during 7b X the year by the following: Χ 8a Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached d8 X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) X No 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, X affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 10b 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. 12a 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12b 12c 13 13 Χ 14 X Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official. 15a 15b 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 16a with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 16a X 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? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: 20

ED DENTON

56 DANLEY RANCH ROAD, ALAMOGORDO, NM 88310

Form 990 (2014)	KATO FOUNDATION, INC.									20.2744	700
Part VII	Compensation of Officers, Dir	ectors, Truste	ees,	Ke	уΕ	mp	loye	es.	Highest Com	20-2715	739 Page
	Linkingees, and independent	Contractore									
Section A.	Check if Schedule O contains a	response or n	ote t	o ai	ny I	ine	in thi	s F	Part VII...		\square
	Officers, Directors, Trustees, Key	Employees, and	Hia	hest	t Cc	mn	ensat	ha	Employees		
•											
List all of List the who received organization a List all of \$100,000 of re List all of organization, re List persons in compensated of	of the organization's current officers, on. Enter -0- in columns (D), (E), and of the organization's current key emplorganization's five current highest coreportable compensation (Box 5 of Found any related organizations. Of the organization's former officers, keyportable compensation from the organist the organization's former directors nore than \$10,000 of reportable compensation from the organization's former directors and the following order: individual trustees the persons and former such persons.	oyees, if any. Se mpensated emp rm W-2 and/or B ey employees, a nization and any or trustees that ensation from the sor directors; institution of the sor directors of th	ee ins loyee lox 7 nd hi relat rece e org	on wateruces (of Figure 1) gheat of the contraction	as p tion other orm st co orga l, in zatio	s for the omposite on a stee	r defir an an 99-MI pensat ations. capac nd an	nitio officed eed city y re	on of "key employ cer, director, trus of more than \$" employees who as a former direct elated organizations; key employee	vee." tee, or key empl 100,000 from the received more the ctor or trustee of ons. s; highest	oyee) nan the
X Check this	box if neither the organization nor an	y related organiz	zatior	n co	mpe	ensa	ated a	ny d	current officer, di	rector, or trustee	
	(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do box,	not c unle	Posheck ss pe	sition more ersor	e than on is both	one an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ED DEN	TON			Ĺ			ted				
TREASURER	ION	30.00	V		V						
(2) KATHIE	ENTO	0.00	Х	-	Х	_					

(A) Name and Title	(B) Average hours per	box,	unle: er an	heck ss pe d a c	ersor	e than	an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(1) ED DENTON	30.00	- 277									
TREASURER	0.00	Х		Х							
(2) KATHLEEN TO	20.00										
DIRECTOR	0.00	Х									
(3) STEVEN DUNIGAN	20.00										
SECRETARY	0.00	Х		Х							
(4) KATHLEEN DENTON	5.00										
PRESIDENT & CEO	0.00	Х		х							
(5)											
(6)											
(7)											
(8)							1				
(9)			+	1							
(10)			1				+			<u> </u>	
(11)			+		1		+				
(12)	765		+	+	\dashv		+				
(13)			+		+		+				
(14)			1		+		1				

	Section A. Officers, Directors, Tru	ustees, Key Em	ploye	es,	an	d H	ighes	st C	ompensated En	nployees (contir	nued)
	(A) Name and title	(B) Average hours per	not cl unles	Po: neck ss pe	(C) sition more erson direct	e than is bot or/trus	one h an tee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(15)						0				
(16)										
(17											
(18)											
(19)				-							
						N.					
(25)											
1b c d	Sub-total Total from continuation sheets to Part VII, Secondary (add lines 1b and 1c)	ction A		٠					0	0	0
2	Total number of individuals (including but not lim reportable compensation from the organization	ited to those list	ed ah	OVA	1 14/	ho r	eceiv	ed i	more than \$100,	0 000 of	0
3	Did the organization list any former officer, direct employee on line 1a? <i>If "Yes," complete Schedul</i>	tor or trustee k	ev en	nlo	V00	or	high	est o	compensated		Yes No
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate individual	reportable com	pensa 0? <i>If</i> "	ition Yes	an ," c	d of	her c	omi	nancation from	1	3 X
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	e compensation	from	anv	un	rela	ted o	rgar	nization or individ	dual	4 X
	don B. independent Contractors										5 X
1	Complete this table for your five highest compensor compensation from the organization. Report compens.	sated independe pensation for th	ent co e cale	ntra	cto ar y	rs th ear	nat re endir	ceiv	ved more than \$7 vith or within the	100,000 of organization's ta	x
	(A) Name and business addres	SS							(B) Description of service	ces Co	(C)
											0
							+				0
											0
2	Total number of independent contractors (including more than \$100,000 of compensation from the one	ng but not limited	to th	ose	list	ed a	above	e) w	ho received	5	0

Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to a	ny line in	this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under section 512-514
nts	울 1	Tall	0		40000000000000000000000000000000000000		312-314
Contributions, Gifts, Grants		Membership dues	0				
	<u>ا</u> ا	Fundraising events	7,451				
5		Related organizations	0				
ons	5	Government grants (contributions) 1e	0				
buti	The C	f All other contributions, gifts, grants, and					
if i	<u> </u>	similar amounts not included above	37,581	Will Amelican			
ပိ	E F	Total Add lines 10, 1f	0	nc 20 7 (2) - 13 (2)			4 11 11 11 11
ø		The second of th	► ss Code	45,032	the state of the s		
enn	2a	CLASSY CATS TUBLET STATE	-		The same of the sa	海自己出版。	
Rev	b			52,573	52,573		
<u>ic</u>	0			0			
Ser	d			0			,
a	e			0			
Program Service Revenue	f	All other program service revenue		0			
<u> </u>	g	Total. Add lines 2a–2f	▶	52,573	The second of the second	and the same services and	
	3	investment income (including dividends, interest, and		02,073	SERVICE TO THE PROPERTY OF THE		EXTRANGED AND MISSEL
	١.	other similar amounts) .	▶	2	2		
	4	income from investment of tax-exempt bond proceeds	. ▶	0			
	5	Royalties	▶	0			
	60	(i) Real (ii) Per	sonal				
	6a	Gross rents	5				
	b	Less: rental expenses	Į.				
	d	Rental income or (loss) 0	0				
	7a	Net rental income or (loss)	. ▶	. 0			and the same of th
	"	assets other then invest					
	b	Less: cost or other basis	0				
		and sales expenses					
	С	Gain or (loss) 0	0				
	d	Net gain or (loss)					
				0			
Other Revenue	8a	Gross income from fundraising					
/er		events (not including \$ 7.451					
Re.		of contributions reported on line 1c).	17				
e		See Part IV, line 18	4,728				
듣	b	Less: direct expenses b	4 728				
_	C	Net income or (loss) from fundraising events	. ▶	0			AND
	9a	Gross income from gaming activities.	7				
	b	See Part IV, line 19	0				
	C	Less: direct expenses	0				
	3.7557	Net income or (loss) from gaming activities		0			The second second second second
		returns and allowances	(Jake				
	b	Less: cost of goods sold b	0	Two is a second			
	С	Net income or (loss) from sales of inventory	0		F1. 300 (19.5)		
		Miscellaneous Revenue Business		0			
	11a	Busiless	Joue				
	b			0			
	С			0			
	d	All other revenue		0			
	е 12	Total. Add lines 11a–11d	. ▶	0			
	12	Total revenue. See instructions.	. ▶	97,607	52 575		terrescent and a feet of

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must expend to the	
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	
Check if Schedule O contains a response or note to any line in this Part IX	
The skill defined to contains a response of note to any line in this Part IX	

Do 8b	not include amounts reported on lines 6b, 7b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
	domestic governments. See Part IV. line 21	0			
2	Grants and other assistance to domestic	- U		A STREET OF THE STREET	Principle of the second
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign	0		A CONTRACTOR OF THE PARTY OF TH	
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	0		Control of the State of the Sta	
5	Compensation of current officers, directors,	- 0			
	trustees, and key employees	0.000	100 to 10		
6	Compensation not included above, to disqualified	8,000	8,000		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4059(a)(7)) and				
7	persons described in section 4958(c)(3)(B)	0			
8	Other salaries and wages .	3,537	3,537		
Ū	Pension plan accruals and contributions (include				
9	section 401(k) and 403(b) employer contributions)	0			
10	Other employee benefits	0			
11	Payroll taxes	883	883		
	Fees for services (non-employees):				
a	Management	0	5500 E		
b	Legal	0			
C	Accounting	1,534		1,534	
d	Lobbying	0		1,004	
е	Professional fundraising services. See Part IV, line 17	0	TO AN INC. TO SEE THE		
f	Investment management fees	0		而为100mm (100mm)	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule (A)	o			
12	Advertising and promotion	1,588		4.500	
13	Office expenses	316		1,588	
14	Information technology	0		316	
15	Royalties				
16	Occupancy	0			
17	Travel	24,521	24,521		
18	Payments of travel or entertainment expenses	0			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates .	0			
22	Depreciation, depletion, and amortization	0			
 23	Insurance	4,990	4,990	0	0
24	Other expenses, Itamiza expenses	2,344	2,344		1
	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	SUPPLIES	6,137	6,137	A STATE OF THE STA	STATE OF THE PARTY OF THE STATE
b	BANK FEES	556		556	
С	PROPERTY TAXES	559	559		
d	CAT RESCUE EXPENSES	22,816	22,816		
	All other expenses	0	22,010		
25	Total functional expenses. Add lines 1 through 24e	77,781	73,787	3,994	
26	Joint costs. Complete this line only if the		. 5,. 57	5,334	0
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or	note t	to any line in this Part X .			
-					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			18,320	1	11,232
	2	Savings and temporary cash investments			.0,020	2	6,012
	3	Pleages and grants receivable, net			0	_	0,012
	4	Accounts receivable, net			0	_	
	5	Loans and other receivables from current and for	ormer o	officers, directors		100	. 20.00
	1	trustees, key employees, and highest compens	ated e	mployees.			
	_	Complete Part II of Schedule L			The state of the s	5	AZ PICTURGURAZIONE I TENENZARIA PRINCIPALI CO
	6	Loans and other receivables from other disqualified person	ons (as	defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	nd cont	ributing employers and			
S		sponsoring organizations of section 501(c)(9) voluntary e	mplove	es' beneficiary			
Assets	_	organizations (see instructions). Complete Part II of Sche	dule L.		33.31.31	6	AT THE REAL PROPERTY OF THE PARTY OF THE PAR
Ass	7	Notes and loans receivable, net			0	7	C
	8	Inventories for sale or use				8	9,115
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or			Established the		TO THE SEA STORM
	ь	other basis. Complete Part VI of Schedule D	10a	127,803			
	11	Less: accumulated depreciation	10b	28,274	87,742	10c	99,529
	12	Investments—publicly traded securities			0	11	0
	13	Investments—other securities. See Part IV, line		0	12	0	
	14	Investments—program-related. See Part IV, line		0	13	0	
	15	Intangible assets		0	14	0	
	16	Other assets. See Part IV, line 11			0	15	0
	17	Total assets. Add lines 1 through 15 (must equa	al line 3	34)	106,062	16	125,888
	18	Accounts payable and accrued expenses Grants payable				17	
	19	Grants payable				18	
	20	Tax-exempt hand liabilities			19		
	21	Tax-exempt bond liabilities	-		20		
S	22	Loans and other payables to current and former	of Schedule D	Control for the state of the control	21		
Liabilities		trustees, key employees, highest compensated	onicer	s, directors,			
Ē		disqualified persons. Complete Part II of Schedu	empioy	rees, and			
Ë	23	Secured mortgages and notes payable to unrela	tod thi			22	
	24	Unsecured notes and loans payable to unrelated	teu tiii Libird	rd parties	0	23	0
	25	Other liabilities (including federal income tax, pay	rulla j	to related third	0	24	0
		parties, and other liabilities not included on lines	17 24	Complete			
				. Complete			
	26	Total liabilities. Add lines 17 through 25			0	25	0
		Organizations that follow SFAS 117 (ASC 958)	choo	lk hore	0	26	0
Ses		complete lines 27 through 29, and lines 33 an	, chec	k fiere			land the second
an	27	Unrestricted net assets .		i di di			
Bal	28	Temporarily restricted net assets .			106,062	27	125,888
힏	29	Permanently restricted net assets				28	
ן הַּ		Organizations that the state of			HARTON AND AND AND AND AND AND AND AND AND AN	29	
9		Organizations that do not follow SFAS 117 (ASC958), c complete lines 30 through 34.	heck h	ere 🕨 🔛 and			
Net Assets or Fund Balances	30						
SSe	30 31	Capital stock or trust principal, or current funds .				30	
ğ	32	Paid-in or capital surplus, or land, building, or equ	uipmer	nt fund		31	
Ne	33	Retained earnings, endowment, accumulated inc	ome, c	or other funds		32	
	34	Total liabilities and not assets find belonged.			106,062	33	125,888
	-	Total liabilities and net assets/fund balances			106,062	34	125,888

THE PERSON NAMED IN	1990 (2014) KATO FOUNDATION, INC.	20.27	15720		40
Pai	rt XI Reconciliation of Net Assets	20-21	15739	Pa	ge 12
	Check if Schedule O contains a response or note to any line in this Part XI		1521 SEN		П
1	Total revenue (must equal Part VIII, column (A), line 12)	1		97	<u></u> 7,607
2	rotal expenses (must equal Part IX, column (A), line 25)	2			7,781
3	revenue less expenses. Subtract line 2 from line 1	3			9,826
4	Net assets of fund balances at beginning of year (must equal Part X, line 33, column (A))	4			3,020 3,062
5	Net diffealized gallis (losses) on investments.	5			J,002
6	Bornated services and use of facilities	6			
7	investment expenses.	7			
8 9	Filor period adjustments	8			
10	Other changes in het assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33)				
Par	t XII Financial Statements and Reporting	10		125	,888
1 (41)	- manolar otatements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			. [
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			Yes	No
i.	Accounting method used to prepare the Form 990: X Cash Accrual Other		3 75 77		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a					
	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		2a		X
	reviewed on a separate basis, consolidated basis, or both:				
b	Doi: Consolidated and separate pasis		Trans.		
~	Were the organization's financial statements audited by an independent accountant?		2b		X
	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:		No.		
_	Separate basis Consolidated basis Both consolidated and separate basis		10-10-25		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the addit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3a					
ou	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
b	the Single Audit Act and OMB Circular A-133?		3a		X
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

Form **990** (2014)

Department of the Treasury

Name(s) shown on return

Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562. Business or activity to which this form relates

OMB No. 1545-0172

0

Sequence No. 179

Form 4562 (2014)

Identifying number KATO FOUNDATION, INC. 990 20-2715739 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions). Threshold cost of section 179 property before reduction in limitation (see instructions) 2 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-3 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 8 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562. 9 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . 10 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 11 13 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . 14 15 16 Other depreciation (including ACRS) . Part III MACRS Depreciation (Do not include listed property.) (See instructions.) 16 Section A 18 If you are electing to group any assets placed in service during the tax year into one or more general 4,429 Section B - Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (a) Classification of property year placed (d) Recovery (business/investment use (e) Convention (f) Method (g) Depreciation deduction in service only-see instructions) 19 a 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/L property 27.5 yrs. MM S/L i Nonresidential real 2/20/2014 16,777 39 yrs. MM S/L property S/L Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20 a Class life **b** 12-year 12 yrs. S/L c 40-year 40 yrs. Part IV Summary (See instructions.) S/L 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 184 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 4,990 portion of the basis attributable to section 263A costs For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2014) KATO FOUNDATION, INC. Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property Part V used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (a) (b) (c) Business/ (d) (f) (g) (i) Basis for depreciation (business/ investment Type of property Date placed Cost or other basis investment use Recovery Method/ Depreciation Elected section 179 (list vehicles first) percentage in service use only) period Convention Special depreciation allowance for qualified listed property placed in service during deduction 25 the tax year and used more than 50% in a qualified business use (see instructions) 25 Property used more than 50% in a qualified business use: PU TRUCK 12/27/2010 100.00% 1,600 5 200DB - HY 184 Property used 50% or less in a qualified business use: S/L -% S/L -% S/L -Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 . . . 28 184 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 0 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (f) Total business/investment miles driven during Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 the year (do not include commuting miles) . . . Total commuting miles driven during the year . 32 Total other personal (noncommuting) 33 Total miles driven during the year. Add lines 30 through 32 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions). Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? Yes No Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your 38 employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI Amortization (a) (b) (c) (d) (e) (f) Description of costs Date amortization Amortizable amount Amortization Code section Amortization for this year period or begins percentage Amortization of costs that begins during your 2014 tax year (see instructions):

Total. Add amounts in column (f). See the instructions for where to report

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Assets by Classification - 990	00	İ					KATO FOUNDATION, INC.		20-2715739						
					×			ı							
Description of	Date		Business	Cost or											
	Placed	Asset	Use	Other	Sec. 179		lei oad S	Caprilla		ć		Con	Prior Accum.	2014	2014
No. "**" indicates DISPOSED	In Service	Code	%	Basis	Deduction	Credit	Allowance	Value	Basis	Recovery	Method	Code	Deprec.,	Denrec	Accum.
5-yr High technology medical equipment	nent	,													Debiec.
Total 6 or list to 1	21/2/12/9	ì	100.00%	8,345	0	0	4,173	0	4,172	5	200DB	¥	6,343	801	7,144
iotal: 3-yr high tech medical equipment	quipment			8,345	0	0	4,173	0	4,172			1	6.343	801	7 144
7-yr Section 1245 personal property with no class life	with no class li	ife										ı		3	+ '
BUS WRAP SIGN	10/15/2010	F-14	100.00%	1,895	0	0	1,895	0	0	7	200DB	ž	1 806	c	į
DISPLAT CASE - JEWELKY CASH REGISTER	7/19/2011	F-14	100.00%	452	0	0	452	0	0		200DB	ξ	1,095	> c	1,895
DISPLAY CASE	9/23/2011	4 :	100.00%	228	0	0	228	0	0	7	200DB	÷	228	o c	452
DISPLAY CASES	10/5/2011	7-	100.00%	270	0 (0	0	0	270	7	200DB	÷	152	34 0	186
APEXX VET EQUIPMENT	6/21/2012	F-14	100.00%	216	0 0	0 (0	0	216	7	200DB	Η	122	27	149
Total: 7-vr 1245 ners aron w/o	21021120	<u>+</u>	00.00	9,408	0	0	2,730	0	2,729	7	200DB	Η	3,788	477	4,265
dass ille	dassille		I	8,520	0	0	5,305	0	3,215			ı	6 637	538	7 475
39-yr Nonresidential and commercial real estate	real estate											l		8	21.
BUILDING - KITTY CITY	12/28/2011	R-5	100.00%	20,305	0	0	0	-	20.305	30	300/10				
BUILDING - RCADDITION	10/29/2012	R-5	100.00%	41,123	0	0	0	0	41 123	n 0	SUGDS	MM	1,064	521	1,585
BUILDING - 2013 ADDITION	12/31/2013	R-5	100.00%	23,133	0	0	0	0	23 133	3 8	SI /GPG	MM	1,2/4	1,054	2,328
BUILDING - 2014 ADDITION	2/20/2014	R-5	100.00%	16,777	0	0	0	0	16,777	30	SI /GDS	MM	ç, ç	593	618
Total: 39-yr Nonresidential real estate	estate			101.338	C	c	c		000,000	3	2000		0	3//	377
					>	o		5	101,338			ı	2,363	2,545	4,908
<u>5-yr Qualified nonpersonal use vehicles</u> TRANSIT BUS	23/2010	V-2	100.00%	8,000	0	0	0	0	8 000	ιc	8000C	}	9		
Total: 5-yr Qual nonpersonal use veh	e veh		1 1	8,000	0	0	0	0	8,000)		 	0,010	325	7,540
5-yr Light trucks, vans, and autos built on a truck chassis	on a fruck ch	assis										1	200	276	7,540
PU TRUCK	12/27/2010		100.00%	1,600	0	0	0	0	1.600	7.	2000R	¥	1 222	Š	,
Total: 5-yr Truck, van, auto on trk chassis	k chassis			1,600	0	C	c		0001	•		l E	626,1	184	1,507
						,		>	nnoʻi			ı	1,323	184	1,507
SubTotals				127,803	0	0	9,478	0	118 325						
Less: Disposed Assets Finding Totals			4) (0) (0) (0) (0	0) (0	(0)	23,284	4,990	28,274
				127,803	0	0	9,478	0	118,325			1	23 284	4 990	78 274
												1		200,4	4/7'07

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. 2014

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

w/form990.

Inspection

Employer identification number

KATO	O FOUNDATION, INC.					Employer identifica		
Par	tl Reason for Public Cha	arity Status (All o	organizations must o	omplete	thic nort	Can in atmost	2715739	
The	3 Lation to not a private lourid	audii because it is:	(FOr lines 1 through 11	chack or	dy one how	1		
1	A church, convention of church	ches, or association	of churches described	in sectio	n 170/h)/1)	.) (Δ)(i)		
2	A school described in section	170(b)(1)(A)(ii). (A	Attach Schedule F)		(5)(1)	(4)(1).		
3	A hospital or a cooperative ho	spital service organ	nization described in se	ction 170	\/b\/4\/	:>		
4	A medical research organizat hospital's name, city, and stat	ion operated in con	junction with a hospital	described	in section	ı). ı 170(b)(1)(A)(iii). E	Inter the	
5	An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle	ege or university owned	or opera	ted by a go	vernmental unit de	scribed in	
6	A federal, state, or local gover		ental unit described in a	oction 1	70/6\/4\/4\/			
7	X An organization that normally described in section 170(b)(1	receives a substan	tial part of its support fr	om a gov	ernmental u	v). unit or from the gen	eral public	
8	A community trust described i	n section 170(b)(1)	MAMMIN (Complete Ber	+ II V				
9 [An organization that normally receipts from activities related support from gross investmen acquired by the organization a	receives: (1) more to its exempt funct	than 33 1/3% of its sup tions—subject to certain	port from	ns, and (2)	no more than 33 1.		
10 [An organization organized and	d operated exclusive	elv to test for public sat	ety See s	ection 500	Va\(4\)		
11 [An organization organized and of one or more publicly support Check the box in lines 11a thro	d operated exclusive	ely for the benefit of, to	perform t	he function	s of, or to carry out	the purposes on 509(a)(3).	
а	Type I. A supporting organithe supported organization organization. You must co	zation operated, su (s) the power to rea	pervised, or controlled	h : !				
b	Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.							
d	Type III non-functionally in that is not functionally integ requirement (see instruction	rated. A suppo	rting organization operation	ated in co	nnection wi	th its supported org	ganization(s) tentiveness	
е	I I CHECK THIS DOX II THE OLDSHIP	Zation received a w	ritton dotormination fra	44 - 100		/. Type I Type II Typ	- 111	
	integrated, or i		ally integrated supporting	ng organiz	ation.	Type I, Type II, Typ	e III	
f	Line in a number of supported	organizations.						0
<u>g</u>	Provide the following information (i) Name of supported organization	n about the suppor				CC1 59 NA 71 HP 6/61		
	or a second	(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	,
(A)				Yes	No			
(A)								
(B)								_
(C)								_
(D)								_
(E)								
Total				(0		 0
FOR Day	nomically D. J. C. A. C. C.		The state of the s	THE RESERVE OF THE PERSON NAMED IN	AND RESIDENCE AND LINES.	UI		U

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.)

70,694	(b) 2011 89,120	(c) 2012	(d) 2013	(e) 2014	(f) Total
70,694					(r) Iotai
70,694	89,120	90.940	1	1	
		89,819	77,952	97,605	425,190
				07,000	420, 190
					(
70.604					
70,094	89,120	89,819	77,952	97,605	425,190
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2010	(b) 2044	(10000			
			(d) 2013	(e) 2014	(f) Total
70,694	89,120	89,819	77,952	97,605	425,190
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	28	11	2	. 2	43
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ctions)	Self-Self-Self-Self-Self-Self-Self-Self-			ASSESSED FOR THE PARTY OF THE P	425,233
on's first so	· · · ·		L	12	
ni s ilist, se	cona, thira, tourth,	or fifth tax year as	a section 501(c)(3))	
Oroonto.		· · · · · · ·			
ercentaç	je				
divided by	line 11, column (f))			14	99.99%
nt II, IIIIe 14			<u>L</u>	15	99.99%
Not check th	ne box on line 13, a	ind line 14 is 33 1/3	3% or more, check	this box	
y supported	organization				▶ X
not check a	box on line 13 or 1	6a, and line 15 is	33 1/3% or more, c	check this	
blicly suppl	orted organization .		11		▶
ganization of ts-and-circu	did not check a box umstances" test, ch	on line 13, 16a, or seck this box and st	r 16b, and line 14 top here. Explain i	in	
umstances'	test. The organiza	check this box and	d stop here. Expla publicly	ain in	, _
	divided by till, line 14 not check till y supported not check a ablicly supported ganization of the condition of the conditio	2010 (b) 2011 70,694 89,120 28 28 ctions)	2010 (b) 2011 (c) 2012 70,694 89,120 89,819 28 11 28 11 28 11 28 ctions) on's first, second, third, fourth, or fifth tax year as increased by the second by the secon	2010 (b) 2011 (c) 2012 (d) 2013 70,694 89,120 89,819 77,952 28 11 2 28 11 2 28 11 2 28 11 2 29 20 20 20 20 20 20 20 20 20 20 20 20 20	2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 70,694 89,120 89,819 77,952 97,605 28 11 2 2 28 11 2 2 29 2 20 2 20 3 3 4 4 5 5 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7

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.)

Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . 2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). 3 Total support. (Add lines 9, 10c, 11, and 12.). 4 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) Section C. Computation of Public Support Percentage 5 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)). 6 Public support percentage from 2013 Schedule A, Part III, line 15 10 0.00% 11 0.00% 15 0.00% 16 0.00% 17 0.00% 18 Investment income percentage from 2013 Schedule A, Part III, line 17		ction A. Public Support		,	en, piedoc con	ipicte rait ii.)		
Settion B. Total Support Administrative on service for service service from aministrative or service from aministrative from aministrative from aministrative from aministrative from aministrative from a service from	Cal	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(4) 2012	(-) 0044	
does seeps from administors, mechanidaes and or services performed, or facilities and or services performed, or facilities or floating and the part of the organization's mechanics and an unrelated trade or floatings and the part of the organization's mechanics and an unrelated trade or floatings and the part of the organization's floatings and the part of the organization without charge. 5 Total. Add lines 1 through 5. 6 Total. Add lines 1 through 5. 7 A mounts floating organization and a selected 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 7 and 7b. 8 Public support (Subtract line 7c from line 6). 9 Amounts from line 6. 9 O O O O O O O O O O O O O O O O O O	1	Gifts, grants, contributions, and membership fees		(=) = 0	(0) 2012	(u) 2013	(e) 2014	(f) Total
soli or servicia performaci, or facilities brunsing in any activity that is related to the opportunitation's successing purpose. 3 Giness receipts from activities that are not an understand care or business under section 513 1 Tax revenues levels of 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 Total. Add lines 1 through 5 7 a Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amounts of the second of the seco	•	received. (Do not include any "unusual grants.")					1	
furnished in any activity that is related to the organization's benefit and exemple younges. 3 Gross receipts from activities that are not as unrelated trace to business used exection \$13 and alter 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 Total. Add lines 1 through 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2	Gross receipts from admissions, merchandise						
organization's tax-examply purpose. Occas recepts from activities that are not an unrelated state or business under section \$13\$. Tax revenues levided for the organization's benefit and either paid to or expended on its behalf. Tax revenues levided for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge organization check this box and stop here. Livelion D. Computation of Public Support Percentage Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Total support percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Total support percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Total support percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Total support percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Total support percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Total support percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Total s		furnished in any activity that is related to the						
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Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of 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

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b 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 Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a 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.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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 Part VI 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.
- 5a 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 Part VI, 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).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) 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.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - 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.)

	Yes	T	Vo
1			
2			
3a			
3b			
3c			
4a	1 1 6 G		
4b			
4c			
5a	CSASSAVAII I		G 690
5b			
5c	\neg		_
6			
7			
8			
9a			
9b			
9c			
10h			

	Activities Test. Answer (a) and (b) below.
а	Did substantially all of the organization's activities during the tax year directly further the assessment
	those supported organizations and explain how these activities directly furthered their assessment
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
)	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.

Parent of Supported Organizations. Answer (a) and (b) below.

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.

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

1 Check bere if the remotionally Integrated 509(a)(3) Supporting	Organ	nizationo	rage
☐ Check here if the organization satisfied the Integral Part Test as a qualify	ina tru	t on Nov. 20, 4070 0 :	
other Type III non-functionally integrated supporting organizations must o	omnlet	te Sections A through E	structions. All
Section A - Adjusted Net Income	ompiei	(A) Prior Year	(B) Current Year
1 Net short-term capital gain	1		(optional)
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	0	0
Portion of operating expenses paid or incurred for production or	9		
collection of gross income or for management, conservation, or			
maintenance of property held for 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	0	
Section B - Minimum Asset Amount	10	(A) Prior Year	(B) Current Year
Aggregate fair market value of all non-exempt-use assets (see			(optional)
instructions for short tax year or assets held for part of year):			En la
Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	
e Discount claimed for blockage or other	10857	0	0
factors (explain in detail in Part VI):			and the factor of
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,		0	0
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount	10	0	0 Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1 4		
2 Enter 85% of line 1	1	The second of th	0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	2		0
4 Enter greater of line 2 or line 3	3		0
5 Income tax imposed in prior year	5		0
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	3		
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional instructions.	ly_intoo	rated Type III averaged	0
instructions).	ıy-ıı ileg	rated Type III supporting of	ganization (see

Par	ion D - Distributions	(3) Supporting Organ	izations (continued)	27 10703 Page
-				Current Year
1		exempt purposes		Ourient real
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of supporte	d	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported organiz	rations	
4	Timodrits paid to acquire exempt-use assets		- Cutorio	
5	(prior in a 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 organization is respo	neivo	
	(provide details in Part VI). See instructions.	and organization is respo	IISIVE	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
			/!!\	0.00
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable
1	Distributable amount for 2014 from Section C, line 6	A TOTAL CONTRACTOR OF THE STREET	F16-2014	Amount for 2014
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а	Control of the second s			
b	grant of the first and the state of the stat			
С	Secure paper and the first first first			
d	Control of the Contro			
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years	0		
h	Applied to 2014 distributable amount		0	The first state of the state of
i	Carryover from 2009 not applied (see instructions)	The property of the control of the c		C
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		the second of th	Marie Constitution of the
4	Distributions for 2014 from Section	0		Marian Caralas Bayana and a little
	D line 7:			
а	Applied to underdistributions of prior years		以外的企业是是	
b	Applied to 2014 distributable amount		0	
С	Remainder. Subtract lines 4a and 4b from 4.	Control of the Contro	A STORY THROUGH A CONTRACTOR	0
5	Remaining underdistributions for years prior to 2014, if	0		经决定基础的
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h		0	
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			0
	and 4c.			
8	Breakdown of line 7:	0		
а	= - candown of fine 7.			A CONTRACTOR OF THE PARTY OF TH
b			一种一个一种种	
C				
	Excess from 2013			
	Evenes from 2044			
U	Excess from 2014 0			

Schedule A (F	orm 990 or 990-EZ) 2014	KATO FOUNDATION, INC.	00.07.777
Part VI	Supplemental	Information, Provide the explanations required by Dart II, line 49, D	20-2715739 Page 8
	Part III, line 12.	Also complete this part for any additional information. (See instructions)	I, line 17a or 17b; and
		(See instructions)	
12000			

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No. 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

KA	TO FOUNDATION, INC.		Employer identification number
Pa	Int I Organizations Maintaining Donor Advised France Office in		20-2715739
	The state of the s	Fund	ds or Accounts.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6	3.	
1	(a) Donor advised funds		(b) Funds and other accounts
2	Total number at end of year		
3	Aggregate value of contributions to (during year) .		
4	Aggregate value of grants from (during year) .		
5	Aggregate value at end of year		
·	Did the organization inform all donors and donor advisors in writing that the assets held if	in do	nor advised
6	and the diganization's property. Subject to the organization's evolutive legal control	10	
·	and donor advisors in writing that are a		. — —
	and only for chantable pulposes and not for the henefit of the depart or depart of the		22
Do	perpede comening impermissible private benefit?		Yes No
Pa	Conservation Easements.		
_	Complete if the organization answered "Yes" to Form 990, Part IV, line 7		
1	raipose(s) of conservation easements held by the organization (check all that apply)	•	
		ofa	historically important land area
	Protection of natural habitat		
	Preservation of open space	or a	certified historic structure
2	Complete lines 2a through 2d if the organization hold a gualification		
	Complete lines 2a through 2d if the organization held a qualified conservation contribution easement on the last day of the tax year.	n in t	he form of a conservation
а			Held at the End of the Tax Year
b	Total number of conservation easements . Total acreage restricted by conservation conservation.		2a
С	Total acreage restricted by conservation easements . Number of conservation easements on a confidual kinks in the conservation easements.		2b
d	Number of conservation easements on a certified historic structure included in (a).		2c
	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.		
3	historic structure listed in the National Register		2d
	Number of conservation easements modified, transferred, released, extinguished, or term during the tax year	inate	ed by the organization
4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the arrival in		
	Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the consequence of the c	hand	dling of
6	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspection,		Yes No
	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation e	asen	nents during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easen		
	s \$	nents	during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of		
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	sect	tion
9	In Part XIII, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the tout of the footbalance sheet.		· · · · · L Yes No
	balance sheet, and include, if applicable, the text of the footnote to the organization's finar the organization's accounting for conservation asserts.	and e	expense statement, and
	the organization's accounting for conservation easements.	ncial	statements that describes
Part	Organizations Maintaining Collections of Art, Historical Treasures, o	01	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	r Ot	ner Similar Assets.
1a	If the organization elected as permitted under CEAS 440 440 450 550.		
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its rev	enue/	e statement and balance sheet
b	of public service, provide, in Part XIII, the text of the footnote to its financial statements that If the organization elected, as permitted under SEAS 410 (ASS 255) and a statements that	t des	scribes these items.
	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue works of art, historical treasures, or other similar assets to feld for a life in the second state of the second	ie sta	atement and balance sheet
	of public service, provide the following amounts as letter to the public exhibition, education	n, or	research in furtherance
	of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990. Part VIII. line 4		
	(i) Revenue included in Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X.		▶ \$
2	(ii) Assets included in Form 990, Part X. If the organization received or held works of out historical to		• \$
	James of the state		inancial gain, provide the
b	Revenue included in Form 990, Part VIII, line 1. Assets included in Form 990, Part X		▶ \$
	The state of the following state of the stat		

Sc	hedule D (Form 990) 2014 KATO FOUNDATION	N INC								
P	art III Organizations Maintaining (Using the organization's acquisition, acc	Collections of	Art Li	ictorical "			20-2	2715739		Page
3	Using the organization's acquisition, accurate of its collection items (check all that	ression and other	Art, m	storical	reasures	, or Oth	er Similar A	ssets (c	ontinu	ıed)
	use of its collection items (check all that	apply):	record	s, cneck ar	ny of the foll	owing tha	it are a signific	ant		
	a Public exhibition	αρριγ).	d [
	b Scholarly research		F		or exchan	ge progra	ms			
	Preservation for future generation		е	Othe	er 					
4	Provide a description of the organization	S								
	Provide a description of the organization Part XIII.	is collections and	explair	how they	further the o	organizati	on's exempt pu	urpose in		
5										
	During the year, did the organization soli assets to be sold to raise funds rather the	an to be maintaine	ations o	of art, histor	ical treasur	es, or oth	er similar			
Pa	ert IV Escrow and Custodial Arran	ar to be maintaint	eu as p	art of the o	rganization'	s collection	on?		Yes	No
	Complete if the organization a	igements.	4							
	Complete if the organization a 990, Part X, line 21.	inswered "Yes"	to For	m 990, Pa	rt IV, line 9	9, or rep	orted an amo	ount on F	orm	
1a										
	Is the organization an agent, trustee, cus included on Form 990, Part X?	stodian or other int	termedi	ary for con	tributions or	other as	sets not		_	
b	If "Yes," explain the arrangement in Part	XIII and complete	the foll	· · · ·				. Ш	Yes	No
C	- 9		- 14 P21			10		Amoun	t	
d	Additions during the year					-				
e	- is insulations during the year					4 -				
f	and balance					16				
2a	Did the organization include an amount o	n Form 990. Part	X line	21 for escr	OW or custo	dial acce				
b	If "Yes," explain the arrangement in Part X	XIII. Check here if	the eve	planation by	ow or custo	ulai acco	unt liability?	□,	Yes X	∐ No
Pa	rt V Endowment Funds.	The street the street is	tric exp	Janation	as been pro	vided in F	Part XIII			
11/2	Complete if the organization ar	swered "Vec" to	o Eorn	000 D-	411/12 4					
	J. James and A.	(a) Current year		rior year						
1a	Beginning of year balance	0	(0) F	O O	(c) Two yea	rs back	(d) Three years ba	ick (e) F	our year	rs back
b	Contributions									
С	Net investment earnings, gains,									
5.25	and losses									
d	Grants or scholarships							_		
е	Other expenditures for facilities									
	and programs									
7	Administrative expenses									
2	End of year balance	0		0		0		0		0
a	Provide the estimated percentage of the c	urrent year end ba	alance	(line 1g, co	lumn (a)) he	eld as:				
b	Board designated or quasi-endowment Permanent endowment		%							
C	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c sh	%								
3a	Are there endowment funds not in the post	socion of the are								
	organization by:	session of the org	anizatio	on that are	held and ad	Iministere	d for the	Tr.		
	(i) unrelated organizations								Yes	No
	(") related organizations							3a(i)		
b	Too to ca(ii), are the related organization	ins listed as requir	rad on	Schodula F	2			3a(ii)		
4	Decembe in Fait Ain the intended uses of the	ne organization's (endowr	ment funds	····			3b		L
Part	Land, Buildings, and Equipme	ent.								
	Complete if the organization ans	swered "Yes" to	Form	990 Part	IV line 11	2 Soo E	orm 000 De		40	
	Description of property	(a) Cost or other	basis	(b) Cost	or other					
4-	Land	(investment)			(other)		ccumulated reciation	(d) Bo	ook value	e
1a	Land		0		0	100				
b	Buildings		0		101,338		4,908		O	<u>0</u> 6,430
c d	Leasehold improvements		0		0		0		90	0,430
e	Equipment		0		26,465	,	23,366		-	3,099
	Add lines 1a through 1a (Calumn (1)		0				20,000			0,099
· otal	Add lines 1a through 1e. (Column (d) must	equal Form 990, F	Part X.	column (B)	line 10c)		•			0.520

Schedule D (Form 990) 2014 KATO FOUNDATION, INC			
Part VII Investments—Other Securities	26		20-2715739 Pag
Complete if the organization an	swered "Yes" to Form 990) Part IV line 11h Co. F.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of	
(1) Financial derivatives		Cost or end-of-year	ar market value
(2) Closely-held equity interests	0		
	0		
(Δ)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0		
Part VIII Investments—Program Relate	0	· · · · · · · · · · · · · · · · · · ·	SAMPLE ATTRICT
Complete if the organization ans	Swered "Yes" to Form 900	Port IV line 44 - 0 =	
(a) Description of investment	(b) Book value	raitiv, line 11c. See Fori	m 990, Part X, line 13
	(b) Book value	(c) Method of v Cost or end-of-year	raluation: market value
(1)		,	mamor value
(2)			
(3)			
(4) (5)			
(6)			
(7)			
(8)		•	
(9)			
otal (Column (h) must see 15			
Part IX Other Assets.	0		
Complete if the organization answ	wered "Yes" to Form 990,	Part IV, line 11d. See Forn	n 990, Part X, line 15
(a) [Description		(b) Book value
(2)			24 - 24 - 24 - 24 - 24 - 24 - 24 - 24 -
(3)			
(4)			
(5)			

(a) Paradia (b) Control (c) Paradia (c) Pa	n 990, Part X, line 15.
(1) (a) Description	(b) Book value
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities	0

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X,

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes	(b) Book value	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)	-	
(8)		
(9)		
Total (Column (h) must see 15	•	
2. Liability for uncertain tay positions. In Dark XVIII		0

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Г	Reconciliation of Revenue per Audited Financial Statements With Revenue p	20-2/15/39	Page 4
_		er Return.	
1	and out of support the support of the state		
2	and all to included on line 1 but not on Form don Bort VIII line 40.	1	
а	Net diffedized gains (losses) on investments		
b	2 original delivines and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) Add lines 2a through 2d		
е	Add lines 2a through 2d		
3	Add lines 2a through 2d .	2e	0
4		3	0
а	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
b	Investment expenses not included on Form 990, Part VIII, line 7b		
c	outer (Bescribe III Fall XIII.)		
5	riad lines 4d and 4D.	4c	0
THE REAL PROPERTY.	The state of the s		0
Га	TO COMMUNICITY OF EXPERISES PAR ATIMITED FINANCIAL CALL	nor Poture	0
4	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	per Keturn.	
1		14	
2		1	
a	boriated services and use of facilities		
b	. Hor year adjustments .	+	
C	Cutof 105565		
d	Tarier (Becombe in Fait All).		
е	riad inico za trilough zu .	2000	
3		2e	0
4	7 should included on Form 990. Part IX line 25, but not on line 4.	3	0
а	investment expenses not included on Form 900. Part VIII. line 75	Zerom 2788ach Grand State	
b	other (bescribe in Part XIII.)		
С	Add lines 4a and 4b		
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information	4c	0
Pari	Supplemental Information.	5	0
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any and VIII and 2b; Part XII, lines 2d and 4b; and Part XII, lines 2d and 4b.		
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	ation.	

Part XIII	Library (Continued) KATO FOUNDATION, INC. TAIL Supplemental Information (continued)	20-2715739	D				
Fart Alli	Supp	nemental Informa	ation (continued)			20-21 10/08	Page 5
			17777777777	 			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2014

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

KATO FOUNDATION, INC.	Employer identification number
	20-2715739
Form 990, Part VI, Section B, Line 12C: CONFLICT OF INTEREST POLICY MUST BE SIGNED A	NNUALLY BY
ALL MEMBERS OF THE BOARD OF DIRECTORS.	
Form 990, Part VI, Section C, Line 19: DISCLOSURE OF GOVERNING DOCUMENTS, CONFLICT	
POLICY, AND FINANCIAL STATEMENTS ARE PROVIDED UPON REQUEST.	- GI INTEREOT

Schedule O (Form 990 or 990-EZ) (2014)	
Name of the organization	Page
KATO FOUNDATION, INC.	Employer identification number
	20-2715739

Form 990 Comparison

KATO FOUNDATION, INC.

	20-2715739 1a Federated campaigns		Prior Year	Current Year	Difference	%
	1a Federated campaigns	. 1a	0	0	0	0%
	b Membership dues	. 1b	0	0	0	09
	c Fundraising events	. 1c	8,445	0 0	-129	
	related organizations	144	0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0%
	e Government grants (contributions).	1e	0	0		09
	I All other contributions, giπs, grants	1 1				- 07
	and similar amounts not included above .	. 1f	31,885	37.581	5 696	18%
	g Total (add lines 1a through 1f)	. 1g	40,330			129
	2 Flogram service revenue:				1,702	12/
	a CLASSY CATS THRIFT STORE	2a	37,622	52.573	14 951	40%
	b	2b			0	09
	C	2c	0	0	0	0%
	d	2d	0	0		0%
	6 All others	2e	0	0		09
	f All other program service revenue	2f	0			09
	g Total (add lines 2a through 2f).	2g	37,622			40%
	3 investment income			02,070	14,551	407
	(including dividends, interest and other similar amounts)	3	2	2		00
evenue	4 income from investment of tax-exempt bond proceeds	1	0	0	-	09
evenue	5 Royalties	5	0			09
	da Gloss rents (real and personal).	6a	0			09
	b Less rental expenses	6b	Ö			09
	l c Net rental income or (loss)	6c	0			0%
	in a Gross amount from sales of assets (other than inventory)	7a	0			
	b Less. cost or other basis and sales expenses	7b	0			0%
	c Net gain or (loss) from sales of assets.	7c	0			0%
	8a Gross income from fundraising events	8a	4,112			
	b Less direct expenses	9h	4,112			15%
	c Net income or (loss) from fundraising events	00	0			15%
	sa Gloss revenue from gaming activities	00	0			0%
	b Less. direct expenses	9b	0			0%
	Net income or (loss) from gaming activities	9c	0			0%
	Toal Gross sales of inventory, less returns and allowances	10a	0			0%
1	b Less: cost of goods sold	10b	0			0%
Ļ	C Net income or (loss) from	10c	0			0%
1	Miscellaneous Revenue			<u> </u>	- 0	0%
	11a	11a	o	ام		00/
	b	11b	0			0%
	C	11c	0			0%
	d All other revenue	11d	0			0%
	e Total	11e	0			0%
	12 Total revenue:			U	0	0%
	Add lines 1g, 2g, 3, 4, 5, 6c, 7c, 8c, 9c, 10c, and 11e	12	77,954	97,607		

Form 990 Comparison	(Page 2)

KATO FOUNDATION, INC.

	1	Grants and other assistance to		Prior Year	Current Year	Difference	0-2715739 %
	1.	Organizations and demostic			s and side it day	Difference	/0
	1 2	organizations and domestic governments. Grants and other assistance to domestic-	. 1	0	0	0	0%
	-	Individuals				-	
	3	Grants and other assistance to foreign -	. 2	0	o	o	0%
	-	organizations, foreign governments, and					
		foreign individuals .					
	4	Benefits paid to or for members	. 3	0	0	0	09
	5	Compensation -	4	0	0	0	0%
		current officers, directors, trustees, and key employees	_				
	6	Compensation -	5	5,000	8,000	3,000	60%
		not included above, to disqualified persons					
	1	(as defined under sections 4958(f)(1) and (c)(2)(P))					
	7	other salaries and wades	7	0	0	0	0%
	8	i chold plan continuing (incline 401/k) and 402/k)	0	3,240	3,537	297	9%
	9	Elliployee penetits	9	0	0	0	0%
	10	r ayron taxes .	10	630	0	0	0%
		r ces for services (non-employees).		030	883	253	40%
	1 4	Management	11a	o	o		00/
-unct-		Legariees	. 11b	0	0	0	0%
onal		Accounting tees	11c	1,478	1,534	56	0% 4%
Expenses		LODDYING	. 11d	0	0	0	0%
-xpciises	ı	r rolessional fulfulaising fees	11e	0	0	0	0%
		" " " " " " " " " " " " " " " " " " "	1445	0	0	0	0%
	42	Other	11g	0	0	0	0%
	12	Advertising and promotion	12	1,310	1,588	278	21%
	13	Office expenses	13	552	316		
	14	information technology	14	0	0	-236	-43%
	15	Royalties	15	0		0	0%
	16	Occupancy	16		0	0	0%
	17	Travel	17	16,235	24,521	8,286	51%
	18	Payments of travel or entertainment expenses	17	0	0	0	0%
		for any federal, state, or local public officials					
	19	Conferences, conventions, and meetings	18	0	0	0	0%
	20	Interest	19	0	0	0	0%
	21	Interest Payments to offiliate	20	0	0	0	0%
	22	Payments to affiliates .	21	0	0	0	0%
	W175-100	Depreciation, depletion, and amortization .	22	4,794	4,990	196	4%
	23	Insurance	23	1,932	2,344	412	21%
	24	Other expenses not covered above:		7,		712	2170
		SUPPLIES	24a	4,778	6,137	4 250	000/
		BANK FEES	24b	393	556	1,359	28%
	С	BUSINESS LICENSES	24c	559		163	41%
	d	CAT RESCUE EXPENSES	24d	17,925	559	0	0%
	е		24e		22,816	4,891	27%
	25	Total functional expenses (add lines 1 through 24e)	24e	0	0	0	0%
			25	58,826	77,781	18,955	32%

Form 990 Comparison (Page 3) KATO FOU

Balance Sheets (end of year figures) KATO FOUNDATION, INC.

20-2715739

·	1	Cash - non-interest-hearing		Prior Year	Current Year	Difference	%
	2	The state of the s	. 1	18,320	11,232	-7,088	-39%
	3	go and temporary cash investments	2	0	6,012	6,012	09
	4	i i ago ana grants receivable, riet	3	0	0	0	0%
	5	resourts receivable, riet	4	0	0	0	09
	"	and other receivables from current and former					
		officers, directors, trustees, key employees, or other					
Assets		related parties	. 5	0	0	o	09
	6	Loans and other receivables from other disqualified				-	- 0
	-	persons	6	o	o	o	09
	7	The art round receivable, riet	7	0	0	0	09
	8	inventories for sale or use	8	0	9,115	9,115	09
	9	repair expenses and defended charges	9	0	0,110	9,113	
	10	Land, buildings, and equipment, net of accum, den	10	87,742	99,529	11,787	09
	111	investments - publicly-traded securities	11	0	0	7	139
	12	investments - other securities	12	0	0	0	0%
	13	Investments - program-related	13	0	0		09
	17	intangible assets	14	0	0	0	09
	13	Other assets	15	0	0	0	09
	10	Total assets (add lines 1 through 15)	16	106,062	125,888	0	09
	17	Accounts payable and accrued expenses	17	0	125,888	19,826	199
	10	Grants payable	18	0	0	0	0%
	19	Deletted revenue	19	0	0		0%
	20	rax-exempt bond liabilities	20	0	0	0	0%
iab-	41	Escrow account liability	21	0	0	0	0%
ities	22	Loans and other payables to current/former officers.		- 0	- 0	0	0%
		directors, trustees, key employees, highest compensated					
		employees, disqualified persons.	22	o			
	23	Secured mortgages and notes payable to unrelated 3rd parties	23	0	0	0	0%
	24	Unsecured notes and loans payable	24	0	0	0	0%
	25	Other liabilities	25	0	0	0	0%
	20	Total liabilities (add lines 17 through 25)	26	0	0	0	0%
	Org	anizations that follow SFAS 117 (ASC 958)		- 0	0	0	0%
	27	Unrestricted net assets	27	106,062	105 000	40.000	
et	20	remporarily restricted net assets	28		125,888	19,826	19%
ssets	29	Permanently restricted net assets	29	0	0	0	0%
	Org	anizations that do not follow SFAS 117 (ASC 958):	23	- 0	0	0	0%
und	30	Capital stock, trust principal, or current funds	30				
alances	31	Paid-in or capital surplus, or land, building, and equipment fund		0	0	0	0%
	32	Retained earnings, endowment, accum. income, or other funds.	31	0	0	0	0%
	33	Total net assets or fund balances		0	0	0	0%
	34	Total ligh and not access to the second seco	33	106,062	125,888	19,826	19%
		account delances (add lines 20 and 33)	34	106,062	125,888	19,826	19%