

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
 Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052
2015
Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation THE NICHOLAS & DOROTHY CUMMINGS FOUNDATION		A Employer identification number 88-0321190
Number and street (or P O box number if mail is not delivered to street address) 561 KEYSTONE AVE 305	Room/suite	B Telephone number (see instructions) (775) 826-3311
City or town, state or province, country, and ZIP or foreign postal code RENO, NV 89503		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 19,843	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	239,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances	654			
b Less Cost of goods sold	17,901				
c Gross profit or (loss) (attach schedule)	-17,247		-17,247		
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	221,753	0	-17,247		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	71,769			79,402
	14 Other employee salaries and wages	64,432			64,432
	15 Pension plans, employee benefits	34,353			26,719
	16a Legal fees (attach schedule).	700			
	b Accounting fees (attach schedule).	17,138			
	c Other professional fees (attach schedule)	3,121			
	17 Interest	33			
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion	2,799			
	20 Occupancy	1,600			
	21 Travel, conferences, and meetings	10,904			
	22 Printing and publications				
	23 Other expenses (attach schedule).	31,399			1,317
	24 Total operating and administrative expenses. Add lines 13 through 23	238,248	0		171,870
	25 Contributions, gifts, grants paid	0			0
26 Total expenses and disbursements. Add lines 24 and 25	238,248	0		171,870	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-16,495				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	13,560	5,357	5,357
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use	17,901		
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ <u>77,137</u> Less accumulated depreciation (attach schedule) ▶ <u>66,225</u>	4,333	10,912	10,912
15 Other assets (describe ▶ _____)	750	3,574	3,574	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	36,544	19,843	19,843	
Liabilities	17 Accounts payable and accrued expenses	655	449	
	18 Grants payable			
	19 Deferred revenue	60,000	60,000	
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	60,655	60,449	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	4,639	4,639	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds	-28,750	-45,245		
30 Total net assets or fund balances (see instructions)	-24,111	-40,606		
31 Total liabilities and net assets/fund balances (see instructions)	36,544	19,843		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	-24,111
2	Enter amount from Part I, line 27a	2	-16,495
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	-40,606
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	-40,606

Part IV Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)	How acquired (b) P—Purchase D—Donation	Date acquired (c) (mo., day, yr.)	Date sold (d) (mo., day, yr.)
1a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			
	If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	3	

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
 If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	243,605	8,768	27.783417
2013	195,360	8,422	23.196390
2012	111,256	14,920	7.456836
2011	283,389	24,373	11.627169
2010	181,593	468	388.01923

2	Total of line 1, column (d).	2	458.08304
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	91.616609
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	18,283
5	Multiply line 4 by line 3.	5	1,675,026
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	
7	Add lines 5 and 6.	7	1,675,026
8	Enter qualifying distributions from Part XII, line 4.	8	171,870

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

Table with 11 rows for excise tax calculation. Rows include: 1a Exempt operating foundations, b Domestic foundations, c All other domestic foundations, 2 Tax under section 511, 3 Add lines 1 and 2, 4 Subtitle A (income) tax, 5 Tax based on investment income, 6 Credits/Payments (6a-6d), 7 Total credits and payments, 8 Enter any penalty, 9 Tax due, 10 Overpayment, 11 Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for statements regarding activities. Rows include: 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?, b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes..., c Did the foundation file Form 1120-POL for this year?, d Enter the amount (if any) of tax on political expenditures..., e Enter the reimbursement (if any) paid by the foundation..., 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?, 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument..., 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?, b If "Yes," has it filed a tax return on Form 990-T for this year?, 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?, 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either..., 7 Did the foundation have at least \$5,000 in assets at any time during the year?, 8a Enter the states to which the foundation reports or with which it is registered..., b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General..., 9 Is the foundation claiming status as a private operating foundation..., 10 Did any persons become substantial contributors during the tax year?

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.CUMMINGSFUNDATION.COM	13	Yes	
14 The books are in care of ► SABATINI & ASSOC LTD Telephone no ► (775) 324-2066 Located at ► 5255 LONGLEY LN SUITE 101 RENO NV ZIP+4 ► 89511			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year	15		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ►	16	Yes	No

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

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

		Yes	No
1a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>	1b		No
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c		
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20___, 20___, 20___, 20___ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20___, 20___, 20___, 20___	2b		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>).	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

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

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No **5b**

Organizations relying on a current notice regarding disaster assistance check here.

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No

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

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

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No **6b** **No**

If "Yes" to 6b, file Form 8870

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

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **7b**

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

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NICHOLAS A CUMMINGS 561 KEYSTONE AVE PMB 305 RENO, NV 89503	CHAIRMAN 5 00	0	0	0
JANET L CUMMINGS 561 KEYSTONE AVE PMB 305 RENO, NV 89503	PRESIDENT 40 00	71,769	7,633	0
DOROTHY M CUMMINGS 561 KEYSTONE AVE PMB 305 RENO, NV 89503	SECRETARY/TR 5 00	0	0	0
ANDREW M CUMMINGS 561 KEYSTONE AVE PMB 305 RENO, NV 89503	VICE PRES 2 00	0	0	0

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

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

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

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

Part VIII

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 EDUCATION TO PROFESSIONAL PSYCHOTHERAPISTS WHO ARE WORKING ON AND PROMOTING CUTTING-EDGE BEHAVIORAL HEALTH TREATMENT THROUGH WEBINARS	171,870
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	9,791
c	Fair market value of all other assets (see instructions).	1c	8,770
d	Total (add lines 1a, b, and c).	1d	18,561
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	18,561
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	278
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	18,283
6	Minimum investment return. Enter 5% of line 5.	6	914

Part XI Distributable Amount

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

1	Minimum investment return from Part X, line 6.	1	914
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	914
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	914
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	914

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	171,870
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	171,870
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	171,870

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				914
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				181,599
b From 2011.				282,174
c From 2012.				110,519
d From 2013.				194,939
e From 2014.				243,167
f Total of lines 3a through e.	1,012,398			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ <u>171,870</u>				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				914
e Remaining amount distributed out of corpus	170,956			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,183,354			
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions.				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	181,599			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	1,001,755			
10 Analysis of line 9				
a Excess from 2011.				282,174
b Excess from 2012.				110,519
c Excess from 2013.				194,939
d Excess from 2014.				243,167
e Excess from 2015.				170,956

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . ▶

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

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

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon				
a "Assets" alternative test—enter				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.				
c "Support" alternative test—enter				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

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

1 Information Regarding Foundation Managers:

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

See Additional Data Table

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

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Total				▶ 3a
b <i>Approved for future payment</i>				
Total				▶ 3b

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

NICHOLAS CUMMINGS

DOROTHY CUMMINGS

TY 2015 Accounting Fees Schedule

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT ACCOUNTING FEES	17,138			

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Amortization Schedule

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Description of Amortized Expenses	Date Acquired, Completed, or Expended	Amount Amortized	Deduction for Prior Years	Amortization Method	Current Year Amortization	Net Investment Income	Adjusted Net Income	Total Amount of Amortization
BIODYNE TRADEMARK	2001-07-14	750	675	15 0000	50			725

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: THE NICHOLAS & DOROTHY CUMMINGS
 FOUNDATION
EIN: 88-0321190

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER	1995-09-05	2,727	2,727	S/L	5 0000				
EQUIPMENT	1996-09-13	2,487	2,487	S/L	5 0000				
FAX MACHINE	1996-01-03	727	727	S/L	5 0000				
FILING CABINET	1996-09-30	121	121	S/L	5 0000				
SHELVES	1996-11-21	221	221	S/L	5 0000				
COMPUTER	1997-04-08	1,094	1,094	S/L	5 0000				
COMPUTER/NEC PROJECTOR	1999-01-13	7,542	7,542	S/L	5 0000				
COMPUTER	1999-11-23	3,191	3,191	S/L	5 0000				
COPY MACHINE-XEROX	2000-03-11	3,357	3,357	S/L	5 0000				
WEB PAGE	2000-06-06	1,810	1,810	S/L	3 0000				
COPY MACHINE	2002-06-27	5,846	5,846	S/L	5 0000				
COMPUTER EQUIPMENT	2003-08-02	5,361	5,361	S/L	5 0000				
COMPUTER	2003-11-13	3,078	3,078	S/L	5 0000				
FURNITURE	2004-06-15	4,247	4,247	S/L	7 0000				
COMPUTER	2005-03-24	4,312	4,312	S/L	5 0000				
COPY/FAX MACHINE	2006-03-06	864	864	S/L	5 0000				
EQUIPMENT	2006-09-18	2,260	2,260	S/L	5 0000				
PRINTER	2006-08-18	1,183	1,183	S/L	5 0000				
TELEPHONES	2006-09-18	1,492	1,492	S/L	7 0000				
COMPUTER	2008-01-11	1,190	1,190	S/L	5 0000				

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER	2009-07-17	1,928	1,928	S/L	5 0000				
COMPUTER	2010-09-29	1,722	1,464	S/L	5 0000	258			
FURNITURE	2010-08-04	893	563	S/L	7 0000	128			
PRINTER	2010-09-21	1,500	1,275	S/L	5 0000	225			
TELEPHONE SYSTEM	2011-01-03	4,632	2,647	S/L	7 0000	662			
CAMERA	2011-04-05	1,203	902	S/L	5 0000	241			
FURNITURE	2014-09-21	2,658	1,424	S/L	7 0000	380			
IPAD TABLET	2015-01-07	893		S/L	5 0000	179			
MACBOOK LAPTOP	2015-01-07	2,558		S/L	5 0000	512			
LENOVO A10 PC	2015-12-17	2,244		S/L	5 0000				
HP LASERJET	2015-12-17	470		S/L	5 0000				
COMPUTER	2015-03-20	1,185		S/L	5 0000	178			
COMPUTER	2015-11-17	2,143		S/L	5 0000	36			

**TY 2015 Land, Etc.
Schedule**

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
EQUIPMENT & FURNITURE	77,137	66,225	10,912	10,912

TY 2015 Legal Fees Schedule

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT LEGAL FEES	700			

TY 2015 Other Assets Schedule

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
TRADEMARK	750	3,574	3,574

TY 2015 Other Expenses Schedule

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
DUES AND SUBSCRIPTIONS	2,636			
OFFICE	5,413			
INTERNET	969			
BANK CHARGES	194			
INSURANCE	7,020			
POSTAGE	255			
TELEPHONE	3,392			
COMPUTER EXPENSE	3,075			
VIDEO PRODUCTION	1,253			1,253
ADVERTISING	64			64
FEES	228			
ONLINE SUBSCRIPTIONS	4,034			
SUPPLIES	807			
MEALS	1,944			

TY 2015 Other Professional Fees Schedule

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WEBSITE HOSTING	2,922			
IT SUPPORT	199			

TY 2015 Sales Of Inventory Schedule

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Category	Gross Sales	Cost of Goods Sold	Net (Gross Sales Minus Cost of Goods Sold)
BOOK SALES	654	17,901	-17,247

**TY 2015 Substantial Contributors
Schedule**

Name: THE NICHOLAS & DOROTHY CUMMINGS
FOUNDATION

EIN: 88-0321190

Name	Address
NDC GAMMA LP	561 KEYSTONE AVE PMB 305 RENO,NV 89503
NDC INVESTMENTS LP	561 KEYSTONE AVE PMB 305 RENO,NV 89503

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2015

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

Name of the organization THE NICHOLAS & DOROTHY CUMMINGS FOUNDATION

Employer identification number 88-0321190

Organization type (check one)

Filers of:

Section:

- Form 990 or 990-EZ [] 501(c)() (enter number) organization [] 4947(a)(1) nonexempt charitable trust not treated as a private foundation [] 527 political organization Form 990-PF [x] 501(c)(3) exempt private foundation [] 4947(a)(1) nonexempt charitable trust treated as a private foundation [] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

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

Special Rules

- [] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc , purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc , contributions totaling \$5,000 or more during the year [] \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
 THE NICHOLAS & DOROTHY CUMMINGS
 FOUNDATION

Employer identification number
 88-0321190

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NDC GAMMA LP	\$ 90,000	Person <input checked="" type="checkbox"/>
	561 KEYSTONE AVE PMB-305		Payroll <input type="checkbox"/>
	RENO, NV 89503		Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
2	NDC INVESTMENTS	\$ 144,000	Person <input checked="" type="checkbox"/>
	561 KEYSTONE AVE PMB-305		Payroll <input type="checkbox"/>
	RENO, NV 89503		Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
3	NDC HOLDINGS LLC	\$ 5,000	Person <input checked="" type="checkbox"/>
	561 KEYSTONE AVE PMB 305		Payroll <input type="checkbox"/>
	RENO, NV 89503		Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>

Name of organization THE NICHOLAS & DOROTHY CUMMINGS FOUNDATION	Employer identification number 88-0321190
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Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

Name of organization THE NICHOLAS & DOROTHY CUMMINGS FOUNDATION	Employer identification number 88-0321190
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
---		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
---		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
---		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
---		_____	