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OMB No 1545-0052

Department of the Treasury

**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.

Open to Public Inspection

Internal Revenue Service ► Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>. For calendar year 2014, or tax year beginning 01-01-2014 , and ending 12-31-2014 A Employer identification number Name of foundation Alexandra L Rowan Foundation 46-4913065 % DAVID ROWAN **B** Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 5B W Shady Ln (281) 541-1243 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code Houston, TX 770631303 G Check all that apply Initial return Initial return of a former public charity **-** □ D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85%Address change Name change test, check here and attach computation E If private foundation status was terminated Section 501(c)(3) exempt private foundation **H** Check type of organization **▶** □ under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust  $\Gamma$  Other taxable private foundation I Fair market value of all assets at end F If the foundation is in a 60-month termination **▶** □ under section 507(b)(1)(B), check here of year (from Part II, col. (c), C Other (specify) line 16) \$ 5,003 (Part I, column (d) must be on cash basis.) Part I (d) Disbursements Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see expenses per purposes (cash basis only) books Contributions, gifts, grants, etc., received (attach 75.276 Check ► ☐ if the foundation is **not** required to attach . . . . . . . . . . . . . . . Interest on savings and temporary cash investments Dividends and interest from securities. . . . . Gross rents . . . . . . . . . . . . Net rental income or (loss)\_ Revenue Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . Net short-term capital gain . . . Income modifications . . 10a Gross sales less returns and allowances b Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) . . . . 11 Other income (attach schedule) . 12 Total. Add lines 1 through 11 . . 75.276 o 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . Operating and Administrative Expenses 15 Pension plans, employee benefits . . . 囫 18,363 18,363 Legal fees (attach schedule). . . . . 16a **b** Accounting fees (attach schedule). Other professional fees (attach schedule) . 囪 8,910 8,910 17 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Travel, conferences, and meetings. 21 Printing and publications . . . . Other expenses (attach schedule) . . . . Total operating and administrative expenses. 24 Add lines 13 through 23 . . . . . 27.273 27,273 0 25 Contributions, gifts, grants paid. . . . 43,000 43,000 26 Total expenses and disbursements. Add lines 24 and 27,273 43,000 70,273 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 5.003 Net investment income (if negative, enter -0-) 0

**Adjusted net income** (if negative, enter -0-)

Pa	rt II	Balance Sheets should be for end-of-year amounts in the description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book	Value -	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) BOOK VAIDE	(0) 6000	5,003	
	2	Savings and temporary cash investments				3,000
	_	Accounts receivable				
	3	Less allowance for doubtful accounts			I	
	4	Pledges receivable  Less allowance for doubtful accounts			I	
	_					
	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 -				
sets	8	Inventories for sale or use				
38	9	Prepaid expenses and deferred charges				
∢	10a	Investments—U S and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)				
		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 🟲				
		Less accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe 🟲)				
	16	Total assets (to be completed by all filers—see the				
		instructions Also, see page 1, item I)			5,003	5,003
	17	Accounts payable and accrued expenses				
	18	Grants payable				
ě	19	Deferred revenue				
abilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)				
-	22	Other liabilities (describe 🗠)				
	23	Total liabilities (add lines 17 through 22)			0	
		Foundations that follow SFAS 117, check here 🕨 🦵				
ě		and complete lines 24 through 26 and lines 30 and 31.				
au	24	Unrestricted				
Balance	25	Temporarily restricted				
Ē.	26	Permanently restricted				
Fund		Foundations that do not follow SFAS 117, check here 🕨 🔽				
or F		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds				
š	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
Assets	29	Retained earnings, accumulated income, endowment, or other funds			5,003	
Net	30	Total net assets or fund balances (see instructions)			5,003	
Z	31	Total liabilities and net assets/fund balances (see instructions)	0		5,003	
Da	31 11		<u> </u>			
1	<u> </u>	Total net assets or fund balances at beginning of year—Part II, column	(a) line 30 /must see		$\overline{}$	
-			(a), line 30 (must agr		1	
2		Enter amount from Part I, line 27a			2	5,003
3					3	5,003
		Other increases not included in line 2 (itemize)   Add lines 1, 2, and 3		-	4	5,003
4				}		5,003
5		Decreases not included in line 2 (itemize)		- }	6	E 002
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F	raicii, coluliin (D), IIN	: DU .	0	5,003

	PF (2014) Capital Gains	and Lo	sses for Tax on Inv	estma	ent Income	<b>.</b>			Page
(4	a) List and describe	the kind	(s) of property sold (e g , i common stock, 200 shs	real es	tate,	(b) How acquired P—Purchase D—Donation	(c) Da	ate acquired , day, yr )	(d) Date sold (mo , day, yr )
1a						2 24			
_									
_									
_									
<b>(e)</b> G	ross sales price		(f) Deprectation allow (or allowable)	ed		l : or other basis pense of sale			or (loss) ) minus (g)
<u>а</u>			(or allowable)		plus ex	pense or sale		(e) plus (i)	) minus (g)
 b									
С .									
d									
e									
	lata only for accets	- howing	gain in column (h) and owr	od by	the foundation	on 12/21/60	- (1	) C /C-l	/->
		snowing i	(j) Adjusted basis	ieu by					(h) gain minus less than -0-) <b>or</b>
(i) F M	1 V as of 12/31/69		as of 12/31/69		(k) Excess of col (i) over col (j), if any		Losses (from col (h))		
а									
b									
С									
d									
e									
2 0	Capital gain net inco	me or (ne	et capital loss)			in Part I, line 7 in Part I, line 7	2		
3 N	Net short-term capit	al gaın oı	(loss) as defined in secti	ons 12	222(5) and (6)	)			
			ne 8, column (c) (see instr	uction	s) If(loss), e	nter -0 -	3		
Part V	Qualification U	Jnder S	Section 4940(e) for	Redu	ced Tax on	Net Investme	nt Inc	come	
For option			undations subject to the s						
			•					- ,	
f section 4	49 <b>4</b> 0(d)(2) applies,	leave thi	s part blank						
			n 4942 tax on the distribu r under section 4940(e) [				eriod?		│ Yes │ No
<b>1</b> Enter	the appropriate amo	unt in ea	ch column for each year, s	see ins	structions befo	re making any ent	ries		
	(a) nod years Calendar ax year beginning in)	Adjus	(b) sted qualifying distributions	Net	(c) value of nonchar	itable-use assets	(	( <b>d)</b> Distribution col (b) divided	
	2013								
	2012								
	2011								
	2010								
	2009								
						<u> </u>	2		
t	he number of years t	he found	the 5-year base period—dation has been in existen	ce if le	ss than 5 year	s	3		
			ritable-use assets for 201			_	4		
						_	5		
			ncome (1% of Part I, line :			<u> </u>	6		
							7		
			from Part XII, line 4				8		
	f line 8 is equal to or he Part VI instruction		than line 7, check the box	( in Pai	rt VI, line 1b,	and complete that	part us	ing a 1% tax	rate See

Form	990-PF (2014)		Р	age 4					
Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the in	structio	ns)						
1a	1a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A"								
	on line 1								
	Date of ruling or determination letter(attach copy of letter if necessary-see								
ь									
_	here F and enter 1% of Part I, line 27b								
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of								
	Part I, line 12, col (b)								
2	· · · · · · · · · · · · · · · · · · ·								
3	enter -0-) Add lines 1 and 2								
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others								
-	enter -0-)								
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0					
6	C redits/P ayments								
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a								
b	Exempt foreign organizations—tax withheld at source 6b								
c	Tax paid with application for extension of time to file (Form 8868) 6c								
d	Backup withholding erroneously withheld 6d								
7	Total credits and payments Add lines 6a through 6d			0					
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached.								
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10								
11	Enter the amount of line 10 to be Credited to 2015 estimated tax F Refunded F 11								
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No					
	It participate or intervene in any political campaign?								
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions								
	for definition)?								
	for definition)?								
	published or distributed by the foundation in connection with the activities.								
C	Did the foundation file Form 1120-POL for this year?	1c		No					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year								
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$								
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed								
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No					
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles								
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. з		No					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No					
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b							
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No					
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either								
	By language in the governing instrument, or	1	]						
	By state legislation that effectively amends the governing instrument so that no mandatory directions								
	that conflict with the state law remain in the governing instrument?	. 6		No					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),								
	and Part XV.	. 7	Yes						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)								
	<b>&gt;</b>								
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney								
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b		No					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)								
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?								
	If "Yes," complete Part XIV	. 9		No					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names								
	and addresses.	. 10		No					

▶ 20\_\_\_\_\_, 20\_\_\_\_\_, 20\_\_\_\_\_, 20\_\_\_\_

b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

No

No

3b

☐ Yes ☑ No

	rt VII-B Statements Rega	rdir	a Activities for	Wh	ich Form 4720	May	Re Dequired (cont	inue	d)	rage <b>o</b>
5a	During the year did the foundation		_		10111 4720	1-14	be required (com:	macı		
	(1) Carry on propaganda, or other		•		islation (section 49)	45(e	))?	- No		
	(2) Influence the outcome of any		,	_	•	•				
	on, directly or indirectly, any							- No		
	(3) Provide a grant to an individua						☐ Yes ☑			
	(4) Provide a grant to an organiza					scrit				
	in section 4945(d)(4)(A)? (se							- No		
	(5) Provide for any purpose other									
	educational purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.			, No		
b	If any answer is "Yes" to 5a(1)-(									
	Regulations section 53 4945 or i	nac	urrent notice regard	ling d	lisaster assistance	(see	instructions)?		5b	
	Organizations relying on a curren	t noti	ce regarding disast	eras	sistance check here	e	▶↑	-		
c	If the answer is "Yes" to question									
	tax because it maintained expend	liture	responsibility for th	ne gra	ant?		Г Yes Г	No		
	If "Yes," attach the statement requi	ired b	y Regulations section	n 53.	4945-5(d).					
6a	Did the foundation, during the yea	r, red	eive any funds, dire	ectly	or indirectly, to pay	prer	niums on			
	a personal benefit contract?						Г Yes Г	No		
ь	Did the foundation, during the yea	r, pa	y premiums, directly	y or i	ndirectly, on a perso	nal	benefit contract?		6b	
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, w	vas th	ie foundation a party	y to a	prohibited tax shel	ter ti	ransaction?   <b>Yes</b>   <b>Y</b>	No		
ь	If yes, did the foundation receive	any	proceeds or have an	y net	t income attributable	e to t	the transaction?		7b	No
Da	Information About	t Off	icers, Directors	s, Tr	ustees, Founda	itio	n Managers, Highly	Paid	Empl	oyees,
	and Contractors	_								
1	List all officers, directors, trustees									
	(a) Name and address		Title, and average hours per week		c) Compensation If not paid, enter		(d) Contributions to mployee benefit plans			e account,
	(-,	1	voted to position		-0-)		deferred compensation	oti	herallo	wances
David	Rowan	Four	ider		0					
	hady Ln	1 0								
	ston,TX 77063	<u> </u>		<u> </u>						
2	Compensation of five highest-paid	emp	loyees (other than	those	e included on line 1–	-see	1	iter "N	NONE."	
(a)	Name and address of each employ	/ee	(b) Title, and aver				(d) Contributions to employee benefit	(e) E	xpens	e account,
•	paid more than \$50,000		hours per week devoted to positi		(c) Compensation		plans and deferred		-	wances
							compensation			
	I number of other employees hald a		F. C. C. C.		•					

Form 990-PF (2014)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Hig	hly Paid Employees,
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
Total number of others receiving over \$50,000 for professional services.		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
		- 1
List the foundation's four largest direct charitable activities during the tax year. Include re- organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1		
2		
3		
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation during		A mount
1		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		<b>►</b>

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	
b	A verage of monthly cash balances	1b	12,20
c	Fair market value of all other assets (see instructions).	1c	
d	Total (add lines 1a, b, and c)	1d	12,20
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	12,20
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	18
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	12,02
6	Minimum investment return. Enter 5% of line 5	6	60
Par	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private oper certain foreign organizations check here $\blacktriangleright$ and do not complete this part.)	ating	foundations and
1	Minimum investment return from Part X, line 6	1	60
2a	Tax on investment income for 2014 from Part VI, line 5		
ь	Income tax for 2014 (This does not include the tax from Part VI ) 2b	1	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	60
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	60
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	60
Par	t 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	43,00
ь	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	43,00
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	43,00
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet the section 4940(e) reduction of tax in those years	her the	foundation qualifies fo

Form 990-PF (2014)	ations.\			Page <b>9</b>
Part XIII Undistributed Income (see instru	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2013	2013	2014
Distributable amount for 2014 from Part XI, line 7				601
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only				
<b>b</b> Total for prior years 2012, 2011, 2010				
3 Excess distributions carryover, if any, to 2014				
<b>a</b> From 2009				
<b>b</b> From 2010				
c From 2011				
<b>d</b> From 2012				
e From 2013				
f Total of lines 3a through e				
4 Qualifying distributions for 2014 from Part				
XII, line 4 🕨 \$ 43,000				
Applied to 2013, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years				
(Election required—see instructions)				
c Treated as distributions out of corpus (Election				
required—see instructions)				601
d Applied to 2014 distributable amount	43.300			100
e Remaining amount distributed out of corpus	42,399			
5 Excess distributions carryover applied to 2014				
(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	42,399			
<b>b</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				
—see instructions				
e Undistributed income for 2013 Subtract line				
4a from line 2a Taxable amount—see				
instructions				
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1 This amount must				(
be distributed in 2015				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may				
be required - see instructions)				
8 Excess distributions carryover from 2009 not				
applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2015.	42,399			
Subtract lines 7 and 8 from line 6a				
a Excess from 2010				
b Excess from 2010 b				
c Excess from 2012				
d Excess from 2013				
<b>e</b> Excess from 2014				

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

c Any submission deadlines

factors

Form 990-PF (2014)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year UNIVERSITY OF PITTSBURGH N/A General Purpose 43,000 128 North Craig Street Park Plaza PITTSBURGH, PA 15260 43,000 **b** Approved for future payment

Form 990-PF (2014)  Part XVI-A Analysis of Income-Produci	na Activitic				Page <b>12</b>
Enter gross amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	( <b>b)</b> A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
a b c d					
e  f g Fees and contracts from government agencies  Membership dues and assessments					
3 Interest on savings and temporary cash investments					
<ul><li>4 Dividends and interest from securities</li><li>5 Net rental income or (loss) from real estate</li></ul>					
<ul> <li>a Debt-financed property</li> <li>b Not debt-financed property</li> <li>6 Net rental income or (loss) from personal property</li></ul>					
7 Other investment income					
<ul> <li>9 Net income or (loss) from special events</li> <li>10 Gross profit or (loss) from sales of inventory.</li> <li>11 Other revenue a</li> </ul>					
b					
d e 12 Subtotal Add columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify columns)	alculations)		1		
Part XVI-B Relationship of Activities to  Explain below how each activity for which the accomplishment of the foundation's instructions.)	h income is re	ported in column (	(e) of Part XVI-A c	ontributed import	

Part	XVI	Information Re Noncharitable					sactions an	nd Relationship	s With			
		organization directly or ii 501(c) of the Code (othe	ndirectly	engage	ın any of	the following w					Yes	No
org	anızat	tions?										
<b>a</b> Tra	nsfer	s from the reporting four	ndation to	a nonc	haritable	exempt organi:	zation of					
		h								1a(1)		No
(2)	Othe	erassets								1a(2)		No
		insactions										
		es of assets to a noncha										No
		chases of assets from a								<b>—</b>		No
		tal of facilities, equipme										No
		nbursement arrangemer								1b(4)		No
		ns or loan guarantees.								1b(5)		No
		rmance of services or n		-	_							No
		of facilities, equipment, i swer to any of the above								1c		No
oft	he go iny tra	ods, other assets, or se ansaction or sharing arm (b) Amount involved	rvices giv angement	en by t , show	he reporti in column	ng foundation	If the foundation of the goods, of	on received less th	nan fair marki vices receive	et value ed	<u>!</u>	nts
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	-+											
							1					
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des	cribe	undation directly or indirectly or indirectly of the complete the following of the complete the following of the complete the following of the complete the compl	ne Code (d schedule	other th	an sectio	n 501(c)(3)) o	r in section 52	7?	cription of relati		es F	, No
Sign	the	der penalties of perjury, best of my knowledge a prmation of which prepar	ind belief,	it is tru	je, correc	t, and complete	Declaration (	of preparer (other t	than taxpaye		sed on	all
Here						2015-11-15	· • • · · · ·	T T T		preparei	shown	
		Signature of officer or t	rustee			Date	Title			tr )? 🔽 🐧	res	do
		Print/Type preparer's James Loh	name	Prepa	rer's Sıgn	ature	Date 2015-11-	Check if self- employed ▶	_	000042	200	
Paid Prepa Use	arer			•			1	Firm's EIN ►				
Only		Firm's address ▶										
- •		2929 Allen Parkway 2 770197100	Oth Floor	· Hous	ton, TX			Phonenb (7	13)960-170	06		

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## **TY 2014 Depreciation Schedule**

Name: Alexandra L Rowan Foundation

**EIN:** 46-4913065

# TY 2014 Legal Fees Schedule

Name: Alexandra L Rowan Foundation

**EIN:** 46-4913065

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES - FORMATION	18,363	18,363		

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### **TY 2014 Other Professional Fees Schedule**

Name: Alexandra L Rowan Foundation

**EIN:** 46-4913065

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WEBSITE DEVELOPMENT	8,910	8,910		

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DLN: 93491320009405

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

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.

2014

**Employer identification number** 

Alexandra E Rowali Found	lation	46-4913065				
Organization type (chec	ck one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a p	private foundation				
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	☐ 4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation				
	501(c)(3) taxable private foundation					
	on filing Form 990, 990-EZ, or 990-PF that received, during the year om any one contributor. Complete Parts I and II. See instructions fo					
	om any one contributor Complete Parts I and II See instructions fo	or determining a contributor's total contributions				
Special Rules						
under sections 50 received from any	on described in section 501(c)(3) filing Form 990 or 990-EZ that me 19(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 one contributor, during the year, total contributions of the greater r (ii) Form 990-EZ, line 1 Complete Parts I and II	or 990-EZ), Part II, line 13, 16a, or 16b, and that				
during the year, to	on described in section 501(c)(7), (8), or (10) filing Form 990 or 99 otal contributions of more than \$1,000 <i>exclusively</i> for religious, characteristic to children or animals. Complete Parts I, II, and III	· · · · · · · · · · · · · · · · · · ·				
during the year, c this box is checke purpose Do not c	on described in section $501(c)(7)$ , $(8)$ , or $(10)$ filing Form 990 or 99 contributions $exclusively$ for religious, charitable, etc., purposes, but, enter here the total contributions that were received during the complete any of the parts unless the <b>General Rule</b> applies to this le, etc., contributions totaling \$5,000 or more during the year.	ut no such contributions totaled more than \$1,000 lf year for an exclusively religious, charitable, etc, organization because it received nonexclusively				

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

Name of organization Alexandra L Rowan Foundation Employer identification number 46-4913065

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	David Rowan 5b W Shady Ln Houston, TX77063	\$ 57,32 <u>5</u>	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization Employer identification number Alexandra L Rowan Foundation 46-4913065 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is

needed	i		
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- =		<u> </u>	
a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s_	
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u>s</u>	
) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	

	rganization L Rowan Foundation	Employer identification number			
	E NOWall I Ouridadoll	46-4913065			
Part III	Exclusively religious, charitable, etc., contribute that total more than \$1,000 for the year from entry. For organizations completing Part III, enter the year (Enter this information once. See instructuse duplicate copies of Part III if additional space.	n any one the total of ctions)►	contributor. Complet		
(a) No. from	(b) Purpose of gift		Use of gift	(d) Description of how gift is held	
Part I	(b) Full pose of gift	(0	, use of gift	(d) bescription of now girt is field	
=	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relations		onship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c	Use of gift	(d) Description of how gift is held	
-	Transferee's name, address, and ZIF		Transfer of gift Relatio	onship 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 Relat		tionship of transferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c	Use of gift	(d) Description of how gift is held	
		101	Transfer of gift		
-	Transferee's name, address, and ZIF		_	onship of transferor to transferee	