

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No 1545-0687

2015

For calendar year 2015 or other tax year beginning 10/01, 2015, and ending 09/30, 2016

Information about Form 990-T and its instructions is available at www.irs.gov/form990t.
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) C Book value of all assets at end of year 12,882,497.	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions) NURSE-FAMILY PARTNERSHIP	D Employer identification number (Employees' trust see instructions) 20-0234163
		Number, street, and room or suite no. If a P O box, see instructions 1900 GRANT STREET, SUITE 400	E Unrelated business activity codes (See instructions) 900099
		City or town, state or province, country, and ZIP or foreign postal code DENVER, CO 80203	
		F Group exemption number (See instructions) ▶	

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity ▶ OTHER

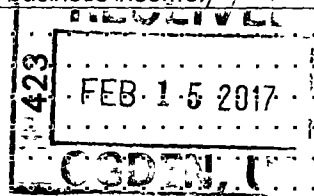
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation ▶

J The books are in care of ▶ TONY TROXELL Telephone number ▶ 303-865-8393

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales <u>2,177.</u>			
b	Less returns and allowances			
	c Balance ▶	1c	2,177.	
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit Subtract line 2 from line 1c	3	2,177.	2,177.
4a	Capital gain net income (attach Schedule D)	4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5		
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9	Investment income of a section 501(c)(7) (9) or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (See instructions, attach schedule)	12	154. ATCH 1	154.
13	Total. Combine lines 3 through 12.	13	2,331.	2,331.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14		
	Salaries and wages	15		3,489.
	Repairs and maintenance	16		
	Bad debts	17		
	Interest (attach schedule)	18		
	Taxes and licenses	19		122.
	Charitable contributions (See instructions for limitation rules)	20		
	Depreciation (attach Form 4562)	21		
	Less depreciation claimed on Schedule A and elsewhere on return	22a		
	Depletion	22b		
	Contributions to deferred compensation plans	23		
	Employee benefit programs	24		
	Excess exempt expenses (Schedule I)	25		946.
	Excess readership costs (Schedule J)	26		
	Other deductions (attach schedule)	27		
28	Total deductions. Add lines 14 through 28.	28		
29	Total deductions. Add lines 14 through 28.	29		4,557.
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	30		-2,226.
31	Net operating loss deduction (limited to the amount on line 30)	31		
32	Unrelated business taxable income before specific deduction Subtract line 31 from line 30	32		-2,226.
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33		1,000.
34	Unrelated business taxable income Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34		-2,226.



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Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here See instructions and.
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)
(1) \$ (2) \$ (3) \$
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750). \$
(2) Additional 3% tax (not more than \$100,000) \$
c Income tax on the amount on line 34. 35c
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from Tax rate schedule or Schedule D (Form 1041). 36
37 Proxy tax. See instructions. 37
38 Alternative minimum tax. 38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies. 39

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116). 40a
b Other credits (see instructions). 40b
c General business credit. Attach Form 3800 (see instructions). 40c
d Credit for prior year minimum tax (attach Form 8801 or 8827). 40d
e Total credits. Add lines 40a through 40d. 40e
41 Subtract line 40e from line 39. 41
42 Other taxes. Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule). 42
43 Total tax. Add lines 41 and 42. 43 0.
44 a Payments: A 2014 overpayment credited to 2015. 44a
b 2015 estimated tax payments. 44b
c Tax deposited with Form 8868. 44c
d Foreign organizations. Tax paid or withheld at source (see instructions). 44d
e Backup withholding (see instructions). 44e
f Credit for small employer health insurance premiums (Attach Form 8941). 44f
g Other credits and payments. Form 2439 Form 4136 Other. Total 44g
45 Total payments. Add lines 44a through 44g. 45
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached. 46
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed. 47
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid. 48
49 Enter the amount of line 48 you want. Credited to 2016 estimated tax Refunded 49

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here. Yes No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. Yes No
3 Enter the amount of tax-exempt interest received or accrued during the tax year. \$

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

1 Inventory at beginning of year. 1
2 Purchases. 2
3 Cost of labor. 3
4a Additional section 263A costs (attach schedule). 4a
b Other costs (attach schedule). 4b
5 Total. Add lines 1 through 4b. 5
6 Inventory at end of year. 6
7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2. 7
8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No

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

Sign Here Signature of officer Date Title
12/1/16 CFO
May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only Print/Type preparer's name SHELLY A OWENS CPA Preparer's signature Date 12/1/16
Firm's name CROWE HORWATH LLP Firm's EIN 35-0921680
Firm's address 1801 CALIFORNIA STREET, SUITE 2200 DENVER, CO 80202 Phone no 303-831-5000
Check if self-employed PTIN P00517745

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

Table with 4 rows for property description (1-4).

2. Rent received or accrued

Table with 3 columns: (a) From personal property, (b) From real and personal property, and 3(a) Deductions directly connected with the income.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A).

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B).

Schedule E - Unrelated Debt-Financed Income (see instructions)

Table with 5 columns: 1 Description of debt-financed property, 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property, 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Column 4 divided by column 5, 7 Gross income reportable, 8 Allocable deductions.

Totals

Total dividends-received deductions included in column 8

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

Table for Exempt Controlled Organizations with 6 columns: 1 Name of controlled organization, 2 Employer identification number, 3 Net unrelated income, 4 Total of specified payments made, 5 Part of column 4 that is included in the controlling organization's gross income, 6 Deductions directly connected with income in column 5.

Nonexempt Controlled Organizations

Table for Nonexempt Controlled Organizations with 5 columns: 7 Taxable Income, 8 Net unrelated income, 9 Total of specified payments made, 10 Part of column 9 that is included in the controlling organization's gross income, 11 Deductions directly connected with income in column 10.

Totals

Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).

Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

Table with 5 columns: 1. Description of income, 2. Amount of income, 3. Deductions directly connected, 4. Set-asides, 5. Total deductions and set-asides. Includes rows (1)-(4) and a Totals row.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

Table with 7 columns: 1. Description of exploited activity, 2. Gross unrelated business income, 3. Expenses directly connected, 4. Net income (loss) from unrelated trade or business, 5. Gross income from activity that is not unrelated business income, 6. Expenses attributable to column 5, 7. Excess exempt expenses. Includes rows (1)-(4) and a Totals row.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

Table with 7 columns: 1. Name of periodical, 2. Gross advertising income, 3. Direct advertising costs, 4. Advertising gain or (loss), 5. Circulation income, 6. Readership costs, 7. Excess readership costs. Includes rows (1)-(4) and a Totals row.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

Table with 7 columns: 1. Name of periodical, 2. Gross advertising income, 3. Direct advertising costs, 4. Advertising gain or (loss), 5. Circulation income, 6. Readership costs, 7. Excess readership costs. Includes rows (1)-(4) and a Totals row.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

Table with 4 columns: 1. Name, 2. Title, 3. Percent of time devoted to business, 4. Compensation attributable to unrelated business. Includes rows (1)-(4) and a Total row.

ATTACHMENT 1

PART I - LINE 12 - OTHER INCOME

OTHER INCOME	154.
PART I - LINE 12 - OTHER INCOME	<u>154.</u>

Nurse Family Partnership

20-0234163

Form 990-T Attachment 1

Explanation of NOL

2011 NOL	(22,757)
NOL used in 2012	<u>900</u>
NOL Available in 2013	(21,857)
NOL used in 2013	<u>2,692</u>
NOL Available in 2014	(19,165)
NOL used in 2014	<u>576</u>
NOL Available in 2015	(18,589)
2015 NOL	<u>(2,226)</u>
NOL Available in 2016	(20,815)