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Form <b>990-PF</b>
Department of the Treasury Internal Revenue Service

#### **Return of Private Foundation**

or Section 4947(a)(1) Trustee Foundation

or Section 4947(a)(1) Trustee 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 separate instructions is at <a href="https://www.irs.gov/form990pf.">www.irs.gov/form990pf.</a>
ar beginning SEP 27, 2013 , and ending DEC 31,

OMB No 1545-0052

Ford	calendar year 2013 or tax year beginning SEP	27, 2013	, and ending	DEC 31, 2013	
Nan	me of foundation			A Employer identification	number
G	PD GROUP EMPLOYEES FOUNDA	TION INC.		46-3799183	
Num	mber and street (or P O box number if mail is not delivered to street a	address)	Room/suite	<b>B</b> Telephone number	
5	20 S. MAIN ST		2531	330-572-21	00
City	y or town, state or province, country, and ZIP or foreign po	ostal code	·	C If exemption application is p	ending, check here
A	KRON, OH 44311				_
G C	Check all that apply:	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return			
	Address change	Name change		<ol><li>Foreign organizations me check here and attach co</li></ol>	eting the 85% test, mputation
H C	Check type of organization: X Section 501(c)(3) exi	empt private foundation		E If private foundation sta	tus was terminated
	Section 4947(a)(1) nonexempt charitable trust (1)	Other taxable private founda	tion	under section 507(b)(1)	
I Fa	air market value of all assets at end of year   J   Accounting	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
(fr		ner (specify)		under section 507(b)(1)	
<b>&gt;</b>	\$ 565,619. (Part I, colur	nn (d) must be on cash b	pasis.)		
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	necessarily equal the amounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	579,250.		N/A	
	2 Check I 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				
ž	b Gross sales price for all assets on line 6a				
Revenue	7 Capital gain net income (from Part IV, line 2)		0.		
<b>~</b>	8 Net short-term capital gain			DE	FIVED
	9 Income modifications			1/1	DLIVED
	10a and allowances				SC
	b Less Cost of goods sold				17 2014
	c Gross profit or (loss)			က	RS
	11 Other income			00	THEFT
	12 Total. Add lines 1 through 11	579,250.	0.	00	JL14, J
	13 Compensation of officers, directors, trustees, etc	0.	0.	· <del></del>	0.
	14 Other employee salaries and wages				
s	15 Pension plans, employee benefits	10.055			40 555
Se	16a Legal fees STMT 1	10,857.	0.		10,557.
Expenses	b Accounting fees STMT 2	2,690.	0.		2,690.
Ĕ	c Other professional fees				
tive	17 Interest				<u> </u>
tra	18 Taxes				
and Administrative	19 Depreciation and depletion				
핕	20 Occupancy				<del></del>
Ă	21 Travel, conferences, and meetings		<del></del>		
ano	22 Printing and publications			,	
ing	23 Other expenses STMT 3	84.	0.	<u>-</u>	84.
rat	24 Total operating and administrative	12 621	•		42 224
Operating	expenses. Add lines 13 through 23	13,631.	0.	,	13,331.
	25 Contributions, girts, grants paid	0.			<u>U.</u>
	26 Total expenses and disbursements.	12 (21	,		12 221
	Add lines 24 and 25	13,631.	0.		13,331.
	27 Subtract line 26 from line 12:	ECE (10			
	Excess of revenue over expenses and disbursements	565,619.	0.		
	b Net investment income (if negative, enter -0-)		0.	N/A	
32350 10-10	c Adjusted net income (if negative, enter -0-)  O-13 LHA For Paperwork Reduction Act Notice, see i	notruotions		N/A	Form <b>990-PF</b> (2013)
10-10	.0-13 LMA FOR PAPERWORK REGUCTION ACT NOTICE, SEE I	แอนนิตินบิแจ.			101111 990-FFF (2013)

GPD GROUP EMPLOYEES FOUNDATION INC.

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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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	ribe the kind(s) of property so arehouse; or common stock, 2			P-F	w acquired Purchase Donation	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a								
b NO	NE							
<u>C</u>				ļ				
<u>d</u>			<del></del>	<u> </u>				
e		4		<del></del>	· <del></del>	(1) (	(lasa)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				iain or (loss) s (f) minus (	
<u>a</u>								
b		<del></del>			<del></del>			
d				-				
е			<del></del>	-				
Complete only for assets shown	l and owr	ned by the foundation	n on 12/31/69	_		(I) Gains (C	Col. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E)	cess of col. (I)		C	ol. (k), but	not less thar (from col. (	1 -0-) <b>or</b>
<u> </u>		-		1	_		<del></del>	
b				$\dashv$				
C				$\neg$		-		
d								
e								
Capital gain net income or (net ca		o enter in Part I, line inter -0- in Part I, line		}	2			
3 Net short-term capital gain or (lo				Í				
If gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8	column (c).	, , , ,		}	3			
Part V   Qualification L	Inder Section 4940(e	e) for Reduced	Tax on Net	Inve	stment Ir	ncome		
(For optional use by domestic private	e foundations subject to the se	ection 4940(a) tax or	net investment ii	ncome.)				N/A
If section 4940(d)(2) applies, leave t	hio nort blank							
ii section 4340(u)(2) applies, leave t	ins part diank.							
Was the foundation liable for the sec		• •	•	riod?				Yes N
If "Yes," the foundation does not qua				ntrion				
1 Enter the appropriate amount in	y		nore making any e			ı		(d)
(a) Base period years Calendar year (or tax year beginni	A 4 4 - 4 - 1 1.6	b) ring distributions	Net value of no	(c) incharit	able-use asse	ts	Distrib	(d) ution ratio ided by col. (c))
2012	iiig iii)					<del>-</del>	(601. (6) 014	idea by col. (c))
2012			l · · · · · · · · · · · · · · ·			-		
2010								
2009								
2008								
<del></del>								
2 Total of line 1, column (d)	•					2		
3 Average distribution ratio for the	5-year base period - divide the	e total on line 2 by 5,	or by the number	of year	s			
the foundation has been in existe	nce if less than 5 years					3		
4 Enter the net value of noncharital	ble-use assets for 2013 from f	Part X, line 5				4		
							i	
5 Multiply line 4 by line 3						5		
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6		
7 Add lines 5 and 6						7		
	5							
8 Enter qualifying distributions from If line 8 is equal to or greater that	•	VI. line 1b. and comi	plete that part usin	ng a 1%	tax rate.	8	<u> </u>	
See the Part VI instructions.				J =				

	·		7991			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see in:	stru	ctio	ns)
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 instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here  and enter 1%	1				0.
	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	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	_			0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				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 2014 estimated tax	11				
Pa	rt VII-A Statements Regarding Activities					
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	)?		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		Х
c	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •					
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	•				
	managers. ► \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	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, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
t	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	'A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		Γ	5		Х
	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					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law	- 1			
	remain in the governing instrument?			6	$\mathbf{x}$	
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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	OH		_			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	Ĺ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	Γ			
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	X	

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Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.GPDFOUNDATION.ORG			
14	The books are in care of ► JAMES SHIVES  Telephone no. ► 330-5	72-2	100	
	Located at ▶520 S MAIN ST, STE 2531, AKRON, OH ZIP+4 ▶44			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			T
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	<u>''</u>		<del></del>
	country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	T	Yes	No
1a	During the year did the foundation (either directly or indirectly):		. 00	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1 1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 1		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No	ŀ		
	(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)?			
	(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.)			
,	• • • • • • • • • • • • • • • • • • • •			
•	olf any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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)?  N/A	1		,
		1b		<del> </del>
	Organizations relying on a current notice regarding disaster assistance check here			
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1		، تو
•	before the first day of the tax year beginning in 2013?	1c		X
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)):			
•	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2013?  Yes X No			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			l .
	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.)  N/A	2b		<b></b>
(	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			,
•	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38				
	during the year?  Yes X No			
·	o If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after			1
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
_	Form 4720, to determine if the foundation had excess business holdings in 2013 ) N/A	3b		<u> </u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			ļ. <u></u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		X

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Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No		'
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	s?	Y6	es X No		]
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?	•	Ye	es X No		ł
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
the prevention of cruelty to children or animals?		Ye	es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	ider the exceptions described	in Regulations		,	
section 53.4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	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 mainta	ined	}		
expenditure responsibility for the grant?	Ŋ	I/A. 🗌 Ye	es No		
If "Yes," attach the statement required by Regulations section 53.494	15-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		ınagers, Highly	/		
1 List all officers, directors, trustees, foundation managers and their	<del>,                                     </del>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E accou allo	xpense int, other wances
DARRIN KOTECKI	PRESIDENT				
520 SOUTH MAIN STREET, SUITE 2531	1				
AKRON, OH 44311	0.25	0.	0.		0.
JAMES SHIVES	TREASURER				
520 SOUTH MAIN STREET, SUITE 2531					
AKRON, OH 44311	0.25	0.	0.		0.
JEFFREY EVANS	SECRETARY				
520 SOUTH MAIN STREET, SUITE 2531					
AKRON, OH 44311	0.25	0.	0.		<u> </u>
	_				
Companyation of five bishoot soid assets as father than the sign	aboded on the d) If a sec	100015			
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	enter "NONE."	(d) Contributions to	(-)	V00000
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	accou	xpense int, other wances
NONE	_	1			
	_			1	
	4	1			
				<b></b>	
	4				
		ļ			
	4				
Total number of other employees paid over \$50,000	L	<u> </u>	l		
LOTAL HOURDS OF AREA CHIDIOACES DAID OAGL 930.000					U

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Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly	·	
3 Five highest-paid independent contractors for professional services. If none, enter "			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compen	sation
NONE	(B) Type of solvies	(C) compone	
NOME	1		
	4	1	
		<del></del>	
	-		
	<u> </u>		
	4		
Total number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers productions.	al information such as the ced, etc.	Expenses	
1 NONE			
			0.
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lir	ies 1 and 2.	Amount	
1 NONE			
			0.
2			
All other program-related investments. See instructions.			
3	•		
Total Add lines 1 through 3			0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	89,522.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	89,522.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	89,522.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,343.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	88,179.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	1,160.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	1,160.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,160.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,160.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,160.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		10 001
a	, , , , , , , , , , , , , , , , , , , ,	1a	13,331.
	Program-related investments - total from Part IX-B	1b	0.
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:		
	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	13,331.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,331.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	ADAD(a) reduction of the in these wase	144411103 101	3000011

Form **990-PF** (2013)

# Part XIII Undistributed Income (see instructions)

Line 27		(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
2 Understoned become, if any, so a this was of a place at Enter amount of corpus or promoting the property of the promoting o	1 Distributable amount for 2013 from Part XI, line 7		·		
3 Excess distributions carryover, if any, to 2013: a From 2008 b From 2019 c From 2010 d From 2011 c From 2012 1 Total of lines 3s throughe 4 Qualifying distributions for 2013 from Part XI, line 4: № \$ 13, 331. Applied to 2012, but not more than line 2a b Applied to undistributed income of prior years (Electrion required - see instructions) c Treated as distributions or of corpus Search (Electrion required - see instructions) c Treated as distributions or of corpus filter an entire of the see instructions c Treated as distributions or of corpus filter an entire of the see instructions c Treated as distributions or of corpus filter an entire of the see instructions d Applied to 2013 distributable amount filter an entire of the see instructions c From 2014 d Applied to 2013 distributable amount filter an entire of the see instructions c From 2014 c From 2015 c From 2016 c From 2017	2 Undistributed income, if any, as of the end of 2013		· · · · · · · · · · · · · · · · · · ·		
S Excess distributions carryover, if any, to 2013: a From 2008 b From 2009 c From 2010 d From 2011 e From 2012 f Total of lines 3a through a	a Enter amount for 2012 only			0.	
3 Excess distributions carryover, if any, to 2013:  From 2008  From 2010  From 2011  From 2011  From 2012  1 Total of lines 3a through e  4 Qualitying distributions for 2013 from  Applied to 2013, but not more than line 2a  Applied to 2013, but not more than line 2a  Applied to undistributed income of prior  years (Election required -see instructions)  1 Treated as distributions out of corpus  [Election required -see instructions)  4 Applied to 2013 distributible amount  4 Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 3013  May be shown in column (a)  6 Eiter the net total of each oclima as indicated below:  1 2,171.  5 Excess distributions out of corpus  5 Excess from 2014  6 Exter the net total of each oclima as indicated below:  1 2,171.  5 Excess distribution on the 3c occurs of the service and an animal and a service and an animal animal animal and animal animal animal animal animal animal animal and animal	b Total for prior years:		0		
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difform 2011 eFrom 2012	<b>b</b> From 2009				
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section 170(b)(1)(F) or 4942(g)(3)  8 Excess distributions carryover from 2008 not applied on line 5 or line 7  9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a  0 Analysis of line 9: a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 e Excess from 2013  12,171.					
8 Excess distributions carryover from 2008 not applied on line 5 or line 7  9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a  12,171.  0 Analysis of line 9: a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 e Excess from 2013  12,171.	· · · · · · · · · · · · · · · · · · ·				
not applied on line 5 or line 7  9 Excess distributions carryover to 2014.  Subtract lines 7 and 8 from line 6a  12,171.  0 Analysis of line 9:  a Excess from 2009  b Excess from 2010  c Excess from 2011  d Excess from 2012  e Excess from 2013  12,171.		0.			······································
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a  12,171.  0 Analysis of line 9: a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 e Excess from 2013  12,171.					
Subtract lines 7 and 8 from line 6a  12,171.  Analysis of line 9:  a Excess from 2009  b Excess from 2010  c Excess from 2011  d Excess from 2012  e Excess from 2013  12,171.	··· <b>—</b>	0.1		_	
0 Analysis of line 9: a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 e Excess from 2013 12,171.	,	40 454			
a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 e Excess from 2013 12,171.		12,171.			
b Excess from 2010 c Excess from 2011 d Excess from 2012 e Excess from 2013 12,171.	· · · · · · · · · · · · · · · · · · ·				
d Excess from 2011 e Excess from 2013  12,171.					
dExcess from 2012 e Excess from 2013 12,171.					
e Excess from 2013 12,171.					
- AAA BE	e Excess from 2013   12,1/1.		<del></del>		Form <b>990-PF</b> (2013)

Form 990-PF (2013) GPD GRO	UP EMPLOYEE	S FOUNDATIO	N INC.		99183 Page 10
Part XIV   Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo		•	▶ ∟_	·	
<b>b</b> Check box to indicate whether the found		ng foundation described i		4942(j)(3) or49	342(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	-1	4.5
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
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 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	L				
(4) Gross investment income					
Part XV Supplementary Info			if the foundatio	n had \$5,000 or m	ore in assets
1 Information Regarding Foundation	on Managers:	· · · · · · · · · · · · · · · · · · ·			
List any managers of the foundation why year (but only if they have contributed it.)	o have contributed more	than 2% of the total cont ection 507(d)(2).)	ributions received by th	e foundation before the clo	se of any tax
SEE STATEMENT 4					
b List any managers of the foundation when other entity) of which the foundation has	o own 10% or more of th s a 10% or greater interes	e stock of a corporation ( st.	or an equally large port	tion of the ownership of a pa	artnership or
NONE					
2 Information Regarding Contribut Check here ▶ ☐ If the foundation of the foundation makes gifts, grants, etc.	only makes contributions t	to preselected charitable	organizations and does	not accept unsolicited requ complete items 2a, b, c, and	
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be addr	essed:	
SEE STATEMENT 5					
b The form in which applications should l	pe submitted and informa	tion and materials they st	nould include;		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields.	kınds of institutions. or	other factors:	
_	,, gu-gu-pula	,			
323601 10-10-13					Form <b>990-PF</b> (2013)

Page 11

				····
3 Grants and Contributions Paid During the	Year or Approved for Future I	Payment	· · ·	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				1
NONE				
110112				
				, <u>-</u>
			<u> </u>	
			ļ '	
		ļ		
Total		. <u> </u>	▶ 3a	0.
b Approved for future payment				
VOLUM				
NONE				
		L	<u></u>	
Total	<u> </u>		<b>▶</b> 3b	0.

Form 990-PF (2013)

Part XVI-A **Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.  1 Program service revenue:  a b c d e f g Fees and contracts from government agencies  Unrelated business income (a) (b) (c) (c) (c) (c) (d) Related or function incode Amount (e)  Fexclusion (d) Related or function incode (e)  Fexclusion (d) Related or function incode (e)  Fexclusion (d) Related or function incode (e)  Fexclusion (d) Fexclusion	exempt
1 Program service revenue:  a b c d e f g Fees and contracts from government agencies  Business code Amount sion Amount function in code Amount sion Amount sion Amount sion Amount function in code Amount sion A	
a	
b	
c d e f Fees and contracts from government agencies	
d e f g Fees and contracts from government agencies	
e f g Fees and contracts from government agencies	
	<del></del>
2 Membership dues and assessments	
3 Interest on savings and temporary cash	
investments	
4 Dividends and interest from securities	
5 Net rental income or (loss) from real estate:	
a Debt-financed property	
b Not debt-financed property	<del></del>
6 Net rental income or (loss) from personal	<del></del>
property	
7 Other investment income	
8 Gain or (loss) from sales of assets other	<del></del>
than inventory	
9 Net income or (loss) from special events	
10 Gross profit or (loss) from sales of inventory	
11 Other revenue:	<del></del>
a	
c	
d	<del></del>
e 12 Subtotal. Add columns (b), (d), and (e) 0. 0.	0.
	0.
13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculations.)	
Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
Line No.   Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of	<del></del>
the foundation's exempt purposes (other than by providing funds for such purposes).	
N/A	

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of								Yes	No	
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
а	a Transfers from the reporting foundation to a noncharitable exempt organization of:									
	(1) Cas	sh				•		1a(1)		_X_
	(2) Oth	er assets						1a(2)		X
b	Other tra	ansactions:								1
	(1) Sal	es of assets to a noncharital	ble exempt organizatı	on				1b(1)		X
	(2) Pur	rchases of assets from a no	ncharitable exempt or	ganization				1b(2)		X
	(3) Rer	ntal of facilities, equipment,	or other assets					1b(3)		X
	(4) Rei	mbursement arrangements						1b(4)		X
	(5) Loa	ans or loan guarantees						1b(5)		X
	(6) Per	formance of services or me	mbership or fundrais	ing solicitation	ns			1b(6)		X
		of facilities, equipment, ma						1c		X
d		nswer to any of the above is							ets,	
		ces given by the reporting for			ed less than fair market valu	ie in any transaction	or sharing arrangement, st	now in		
		(d) the value of the goods,			<del></del>	T	<u></u>			
	ne no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, and s	haring arra	angeme	nts
<u>N/</u>	A									
		<del></del>				<u> </u>				
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	_+						<del></del>			
			11 - 61 - 4 - 4 - 4 4	-1-411		<del></del>				
2a		oundation directly or indirec	,	•		zations described	_	٦.,	T	٦.,
		on 501(c) of the Code (othe		(3)) or in sect	tion 52/?		<u> </u>	Yes	LA	No
<u> </u>	If Yes,	complete the following sch " (a) Name of org			(b) Type of organization	<del></del>	(a) Description of relational			
		N/A	Janization		(b) Type of organization		(c) Description of relationsh	lih		<del></del>
		N/A			<del> </del>					
		·			<del> </del>	<del></del>				
					<del>                                     </del>	ļ	<del></del>		_	
			<del> </del>			<del> </del>		-		
	Un	der penalties of perjury, I declare	that I have examined this	return, urcludin	l ng accompanying schedules and	statements, and to the	best of my knowledge			
Si	l and	d belief, it is true, correct, and co					r has any knowledge retu	the IRS d	prepar	er
He		11/1200	$\mathcal{M}$		111/11/25	OFFICE		vn below	(see ins	T
		signature of officer or trustee	1		Date Date	Title		¥ Yes_		J No
		Print/Type preparer's na		Preparer's s		Date	Check   If I PTIN			
	,	//		11		1 , 1	self- employed			
Pa	id /	LAURA B. C	TIT.P	Ka	$\rho C$	ulufully		050	877	
	epare			ATS C	EDELIAN & CO	<del> </del>	Firm's EIN ▶ 34-15			
	se Onl		Clubby, CO	, 0		•	THINSLIN P Jant.	201	J 4	
-		Firm's address ▶ 17	35 MERRIM	AN ROA	ÚD.		<del> </del>			
		ľ	RON, OH 4				Phone no. 330-86	54-6	661	
_								rm <b>99</b> 0		(2013)
							,,	500	• • •	(-0.0)

# Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

2013

Name of the organization

Employer identification number

G	PD GROUP EMPLOYEES FOUNDATION INC.	46-3799183				
Organization type(check	one):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt chantable trust <b>not</b> 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					
General Rule  X For an organization	c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule of the Conference of the C					
Special Rules						
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region (b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
total contribution	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
contributions for If this box is chec purpose. Do not (	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contruse exclusively for religious, charitable, etc., purposes, but these contributions did not to ked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization because in the edge, etc., contributions of \$5,000 or more during the year	ely religious, charitable, etc.,				
but it <b>must</b> answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Feet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	• • • • • • • • • • • • • • • • • • • •				

### GPD GROUP EMPLOYEES FOUNDATION INC.

46-3799183

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	JOSEPH R. & MARY JO CIUNI 23549 STANDFORD ROAD	\$18,000.	Person X Payroll Noncash
	SHAKER HEIGHTS, OH 44122		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BRADLEY & MARTHA CRAMER		Person X
	1571 CARRIAGE HOUSE DRIVE	\$17,000.	Payroll Noncash
	SUFFIELD, OH 44260		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MOHAMED DARWISH AND DIANA STEWART		Person X
	3673 SANCTUARY DRIVE	\$12,000.	Payroll Noncash
	AKRON, OH 44333		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JEFFREY D. EVANS		Person X
	1148 WOODSVIEW DRIVE	\$35,000.	Payroll Noncash
	AKRON, OH 44313		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	WALID AND BETH GEMAYEL		Person X
	2550 COWALL DRIVE	\$	Payroll
	HILLIARD , OH 43026		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	DAVID AND SUSAN GRANGER		Person X
	2872 BYRON DRIVE	\$26,000.	Payroll Noncash
	NORTH CANTON, OH 44720		(Complete Part II for noncash contributions.)
323452 10-2	4-13	Schedule B (Form	990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

## GPD GROUP EMPLOYEES FOUNDATION INC.

46-3799183

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	
7	JOSEPH & VICKI KIDDER  2146 FOREST OAK DRIVE  AKRON, OH 44312	\$19,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
8	KATHLEEN & DARRIN KOTECKI 7232 CURRY CIRCLE HUDSON, OH 44236	\$35,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
9	DIANA & DAVID MARTIN  8640 CANDLEBERRY STREET NW  MASSILLON, OH 44646	\$ 20,000.	Person X Payroll Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
10	PATRICK M. MCADAMS  2443 CREEKSIDE CHASE DRIVE  MEDINA, OH 44256	\$\$	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
11	TREVER G. POWERS  708 COUNTRYWOOD DRIVE  NOBLESVILLE, IN 46060	\$25,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
12	MARK AND JULIE SALOPEK  3638 WEST GALLOWAY DRIVE	\$	Person X Payroll	
323452 10-2	RICHFIELD, OH 44286	Cahadula B /Earm	noncash contributions.) 990, 990-EZ, or 990-PF) (2013)	

### GPD GROUP EMPLOYEES FOUNDATION INC.

46-3799183

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Part i	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	JAMES & JULIE SHIVES  104 EAST MOHAWK DRIVE  MALVERN, OH 44644	\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	ANGELA D. WELLS  3340 HEMPHILL ROAD  NORTON, OH 44203	\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	GPD SERVICES COMPANY, INC.  520 SOUTH MAIN STREET, SUITE 2531  AKRON, OH 44311	\$125,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	GPD TELECOM, INC.  520 SOUTH MAIN STREET, SUITE 2531  AKRON, OH 44311	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for

### GPD GROUP EMPLOYEES FOUNDATION INC.

46-3799183

(a)			
No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
Part I		(see instructions)	
		\$	
(a)		(c)	
No. from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(see instructions)	Date received
		<del></del>	
		\$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
1		<u> </u>	
		\$	
(a) No.	(6)	(c)	(4)
from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(see instructions)	
		<u> </u>	
(a) No.	/L.\	(c)	4-0
from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncestrative given	(see instructions)	Date received
		<u> </u>	
		\$	
(a) No.	(1-)	(c)	g_43.
from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Bookington of Honough property given	(see instructions)	20.5 16061760
- 1			

GPD GF	ROUP EMPLOYEES FOUNDATI	ON INC.	46-3799183				
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the	ridual contributions to section 501(c ne following line entry. For organization	(7), (8), or (10) organizations that total more than \$1,000 for the one completing Part III, enter the year. (Enter this information once)				
	Use duplicate copies of Part III if addition	c., contributions of \$1,000 or less for al space is needed.	the year. (Enter this information once)				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Full pose of gift	(c) Ose of grit	(a) Description of now girt is field				
		<del></del>					
		<del></del>					
	(e) Transfer of gift						
ļ	Transferee's name, address, a	nd 7ID + 4	Polationship of transferor to transferor				
T	Transfered 5 hame, address, an	10211 + 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 gif	t				
}	Transferee's name, address, a	nd 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, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
i	<del></del>	<del></del>					
F		(e) Transfer of git	it .				
		· · · · · · · · · · · · · · · · · · ·					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				

LEGAL	FEES	S'	PATEMENT	1	
10,857.	0.		10,55	57.	
10,857.	0.	10,		57.	
ACCOUNTI	NG FEES	S'	<b>FATEMENT</b>	2	
2,690.	0.	0.		2,690.	
2,690.	0.		2,69	90.	
OTHER E	XPENSES	S'	PATEMENT	3	
84.	0.		84		
84.	0.	0.		84.	
	EXPENSES PER BOOKS  10,857.  10,857.  ACCOUNTI  (A) EXPENSES PER BOOKS  2,690.  OTHER E  (A) EXPENSES PER BOOKS  84.	EXPENSES NET INVEST- PER BOOKS MENT INCOME  10,857. 0.  10,857. 0.  ACCOUNTING FEES  (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  2,690. 0.  OTHER EXPENSES PER BOOKS NET INVEST- PER BOOKS NET INVEST- PER BOOKS NET INVEST- MENT INCOME  84. 0.	(A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME  10,857. 0.  10,857. 0.  ACCOUNTING FEES  (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME  2,690. 0.  OTHER EXPENSES  (A) (B) (C) ADJUSTED NET INCOME  2,690. 0.  (C) ADJUSTED NET INCOME  (C) ADJUSTED NET INCOME  (A) (B) (C) ADJUSTED NET INCOME  (B) (C) ADJUSTED NET INCOME  84. 0.	(A) (B) (C) (D)  EXPENSES NET INVEST- ADJUSTED CHARITAE PER BOOKS MENT INCOME NET INCOME PURPOSE  10,857. 0. 10,55  10,857. 0. 10,55  ACCOUNTING FEES STATEMENT  (A) (B) (C) (D)  EXPENSES NET INVEST- ADJUSTED CHARITAE PER BOOKS MENT INCOME NET INCOME PURPOSE  2,690. 0. 2,69  OTHER EXPENSES STATEMENT  (A) (B) (C) (D) (D) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	

NAME OF MANAGER

DARRIN KOTECKI JAMES SHIVES JEFFREY EVANS FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

5

#### NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

GPD GROUP EMPLOYEES' FOUNDATION 520 SOUTH MAIN STREET AKRON, OH 44311

TELEPHONE NUMBER

330-572-2100

#### FORM AND CONTENT OF APPLICATIONS

NAME OF ORGANIZATION, ADDRESS, PERSON TO CONTACT AND PHONE NUMBER, TAX EXEMPT STATUS AND IF EXEMPT BASIS FOR EXEMPTION, AMOUNT OF FUNDS REQUESTED, REASON FUNDS REQUESTED AND HOW THEY WILL BE USED, OTHER INFORMATION HELPFUL TO THE TRUSTEES IN MAKING A DETERMINATION, A COPY OF YOUR INTERNAL REVENUE TAX DETERMINATION LETTER, A LIST OF CURRENT BOARD OF TRUSTEES MEMBERS, A COPY OF YOUR MOST RECENT ANNUAL REPORT OR AUDITED FINANCIAL STATEMENT, AND MOST RECENT TAX RETURN 990.

#### ANY SUBMISSION DEADLINES

NO GRANTS AWARDED IN 2013 DUE TO THE SHORT YEAR.

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANTS ARE ONLY MADE TO QUALIFIED ORGANIZATIONS UNDER THE INTERNAL REVENUE SERVICE CODE SECTION 501(C)(3) WITH SPECIAL CONSIDERATION TO PRE SELECTED K-12 PUBLIC SCHOOL ENTITIES AND ORGANIZATIONS SERVING PUBLIC SCHOOL CHILDREN IN GRADES K-12 AND CHILDREN WITH MEDICAL AND SPECIAL NEEDS. THE FOUNDATION DOES NOT ORDINARILY MAKE COMMITMENTS FOR MULTI-YEAR GRANTS OR CONSIDER GRANTS TO ANNUAL FUND DRIVES, TO UNITS OF GOVERNMENT, OR ORGANIZATIONS WHICH ARE PRIMARILY TAX-SUPPORTED. REQUESTS FROM THE SAME ORGANIZATION CAN BE CONSIDERED ONLY ONCE DURING A TWELVE-MONTH PERIOD.

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Form 886	68 (Rev 1-2014)					Page 2
	are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	omplete only Part II and check this	box		X
	ly complete Part II if you have already been granted an a				3868	
	are filing for an Automatic 3-Month Extension, complet					
Part II				al (no co	pies needed)	
			Enter filer's	identifyin	g number, see ir	structions
Type or	Name of exempt organization or other filer, see instruc	ctions			identification nur	
print						
File by the	GPD GROUP EMPLOYEES FOUNDATE	ION II	NC.		46-3799183	
due date for filing your return See	Number, street, and room or suite no. If a PO box, so. 520 S. MAIN ST, NO. 2531	ee instruc	tions	Social sec	curity number (SS	5N)
instructions	City, town or post office, state, and ZIP code For a for AKRON, OH 44311	oreign add	ress, see instructions			
Catantha	Deturn and for the vertical test the particular to the first		to application for each return			0 4
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			<u> </u>
Applicat	ion	Return	Application	··	<del> </del>	Return
Is For		Code	Is For			Code
	O or Form 990-EZ	01				
Form 990	)-BL	02	Form 1041-A			08
Form 472	20 (individual)	03	Form 4720 (other than individual)			09
Form 990	)-PF	04	Form 5227			10
Form 990	D-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	D-T (trust other than above)	06	Form 8870			12
STOP! D	o not complete Part II if you were not already granted	d an autor	natic 3-month extension on a prev	riously file	d Form 8868.	
	JAMES SHIVES					
	ooks are in the care of $\triangleright$ 520 S MAIN ST,	STE	2531 - AKRON, OH 4	4311		
•	hone No ▶ 330-572-2100		Fax No ► 330-572-21	01		
	organization does not have an office or place of busines					<b>-</b>
<ul><li>If this</li></ul>	is for a Group Return, enter the organization's four digit					
box 🕨	If it is for part of the group, check this box		ach a list with the names and EINs o	f all memb	ers the extension	is for
			BER 15, 2014	השת	21 201	2
	, or our , o		7, 2013 , and endir			
6 if t	the tax year entered in line 5 is for less than 12 months, o	check reas	son X Initial return	Final r	eturn	
L.	Change in accounting period					
7 St	ate in detail why you need the extension	mo	THER THE INFORMATI	ON TO	PREPARE	λ
		TO GA	THER THE INFORMATI	ON IO	PREFARE	
<u></u>	OMPLETE AND ACCURATE RETURN.				·	
	this application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069.	enter the tentative tax, less any			
	nrefundable credits. See instructions		•	8a	\$	100.
_	this application is for Forms 990 PF, 990-T, 4720, or 6069	9, enter ar	ny refundable credits and estimated			
	x payments made Include any prior year overpayment a					
	reviously with Form 8868		•	8b	\$	100.
_	alance due. Subtract line 8b from line 8a. Include your p	ayment w	th this form, if required, by using			
	TPS (Electronic Federal Tax Payment System) See insti		-	8c	s	0.

EFTPS (Electronic Federal Tax Payment System) See instructions

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature >

Title > CPA

Date Form **8868** (Rev. 1-2014)