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## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see instructions.

▶ 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 www.irs.gov/form990pf.

Open to Public Inspection

		dar year 2014 or tax year beginning	, 2014, and ending , 20   \( \text{/-}						
		undation			A Employe	er identification num	ber		
_7	HE	CAPUAND FOUNDATION d street (or PO box number if mail is not delivered to street address)			34	-193971	55		
			Roon	n/suite	B Telephor	ne number (see instru			
	140	GREENTRES RD  n, state or province, country, and ZIP or foreign postal code							
Cıt			C If exemption application is pending				ding check here▶□		
	mo	RELAND HILLS, OH 44022				and approximate to por			
G			n of a former public	charity	D 1. Foreig	n organizations, chec	k here ▶ □		
		☐ Final return ☐ Amended	t return						
		Address change  Name char	nge			oreign organizations meeting the 85% test, heck here and attach computation			
Н	Check	type of organization: X Section 501(c)(3) exempt p	rivate foundation		E If private	foundation status was	s terminated under		
	Section	on 4947(a)(1) nonexempt charitable trust \(\bigcap\) Other tax	able private found	dation	section 5	507(b)(1)(A), check her	<b>▶</b> □		
1		narket value of all assets at J Accounting method			F KALLS				
	end of	f year (from Part II, col. (c),	<i>-</i>		under se	indation is in a 60-mor ection 507(b)(1)(B), che	ith termination ck here ►		
	line 16	6) ► \$ (Part I, column (d) must be	on cash basis.)			· · · · · ·			
Р	art I	Analysis of Revenue and Expenses (The total of		Ī			(d) Disbursements		
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable		
( )		the amounts in column (a) (see instructions) )	books	""	come	income	purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)	€00	<b></b>			<del>                                     </del>		
	2	Check ► 🔀 if the foundation is <b>not</b> required to attach Sch. B		<del>                                     </del>					
	3	Interest on savings and temporary cash investments	0	<del> </del>	0	0	<del>                                     </del>		
	4	Dividends and interest from securities	391	30		201			
	5a	Gross rents		-		9"-			
	b	Net rental income or (loss)					-		
0	6a.	Net gain or (loss) from sale of assets not on line 10	222				<del> </del>		
Revenue	b	Gross/sales price for all assets on line 6a					<del> </del>		
Š	7.	Capital gain net income (from Part IV, line 2)	W		D				
æ	8	Net Short-term-capital gain.	······································			0	-		
	9!	Income modifications					-		
	10a	Gross sales less returns and allowances							
	b	Less: Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)		<u> </u>			<del> </del>		
	12	Total. Add lines 1 through 11	14/3	2	91	391			
_	13	Compensation of officers, directors, trustees, etc.	_ / / / /				<u>                                     </u>		
ë	14	Other employee salaries and wages							
penses	15	Pension plans, employee benefits							
_	1	Legal fees (attach schedule)							
Ü	b	Accounting fees (attach schedule) CPA TAYD	660		600	<del></del>			
<u>ĕ</u>	c	Other professional fees (attach schedule)			· ·		<del> </del>		
aţ	17	Interest							
St	18	Taxes (attach schedule) (see instructions)	-						
Ē	19	Depreciation (attach schedule) and depletion							
ᇦ	20	Occupancy					<del> </del>		
Ž	21	Travel, conferences, and meetings				·			
ī	22	Printing and publications							
g G	23	Other expenses (attach schedule)				<u> </u>			
Operating and Administrative Ex	24	Total operating and administrative expenses.			<u>, , , , , , , , , , , , , , , , , , , </u>		6		
ā		Add lines 13 through 23	600		600	д	0		
þe	25	Contributions, gifts, grants paid	550				550		
0	26	Total expenses and disbursements. Add lines 24 and 25	1150	7	e00		450		
	27	Subtract line 26 from line 12.		<u>L</u>			750		
	а .	Excess of revenue over expenses and disbursements	2103						
	b	Net investment income (if negative, enter -0-) .	- V )	21	$\overline{1}$				
	I	Adjusted net income (if negative, enter -0-)		30	4	654	<del> </del>		
_						10 1			

Da	rt II	Ralance Sheets Attached schedules and amounts in the description colu		blumn Beginning of year		End of year	
-			should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Valu	ie	(c) Fair Market Value
	1	Cash-non-interest-	bearing				
l	2	Savings and tempora	ary cash investments				
	3	Accounts receivable					
1		Less: allowance for o	doubtful accounts ►				
	4	Pledges receivable ▶	<b>-</b>	. 1			
,		Less: allowance for o	doubtful accounts ►			~	
ļ	5	Grants receivable .					
	6		m officers, directors, trustees, and other				
j		disqualified persons	(attach schedule) (see instructions)				ļ
	7	Other notes and loans re	eceivable (attach schedule) ▶				
1		Less: allowance for do	ubtful accounts ▶	<u> </u>	•		, ,
\$	8	Inventories for sale of	oruse				
Assets	9	Prepaid expenses ar	nd deferred charges				
¥	10a		state government obligations (attach schedule)				
	b	Investments-corpor	rate stock (attach schedule) 矣 . T	× 6 88 1	5776		
	С		rate bonds (attach schedule)				
	11	Investments-land, build	dings, and equipment basis ►			*	
		Less. accumulated depre	eciation (attach schedule)				
	12	Investments—mortga	age loans				
ļ	13	Investments—other (	(attach schedule)		_		
	14	Land, buildings, and ed	quipment: basıs ▶				
j		Less: accumulated dep	reciation (attach schedule) ▶				
ļ	15	Other assets (describ	pe ▶)				
	16	Total assets (to	be completed by all filers-see the	( 00)	15771		
		ınstructions. Also, se	ee page 1, item I)	6881	5776	)	
	17		nd accrued expenses				
Liabilities	18						
	19						·
<u></u>	20		ectors, trustees, and other disqualified persons				
<u>.</u>	21	~ ~	r notes payable (attach schedule)				
_	22	Other liabilities (desc					
	23		lines 17 through 22)	00	0		٠
S			bllow SFAS 117, check here >				
ည္		•	24 through 26 and lines 30 and 31.				
ā	24						
Ba	25	Temporarily restricte		<del></del>			1
Net Assets or Fund Balances	26	Permanently restricted					
큔		and complete lines	o not follow SFAS 117, check here ► ☐			- 1	
5	27	-	principal, or current funds			- 1	
ts	28		plus, or land, bldg., and equipment fund				
Se	29	-	cumulated income, endowment, or other funds	6881	5776		,
As	30	=	fund balances (see instructions)	0881	4771		
et	31		and net assets/fund balances (see	000			:
Z				6881	5776		ļ
Pa	rt III		nges in Net Assets or Fund Balances				
			palances at beginning of year-Part II, colui	mn (a), line 30 (must	agree with	$\neg \neg$	
			d on prior year's return)			1	6881
2		r amount from Part I, I			<u> </u>	2	263
3			led in line 2 (ıtemize) ▶			3	
	Add	lines 1, 2, and 3				4	7144/
_	D	الماز المتعلقين المتعار الأعام المتعارب	line O (demine)		ľ	5	1368
6	Total	I net assets or fund ba	alances at end of year (line 4 minus line 5)—F	Part II, column (b), lin	e 30	6	5716
		<del></del>					Form <b>990-PF</b> (2014)

(i) F M V as of a b c d e 2 Capital gai 3 Net short-tif gain, als Part I, line or optional use section 4940(d)(as the foundation)	nly for assets show f 12/31/69  In net income or ( term capital gain o enter in Part I, 8	not canital locel / Y	plus ed by the foundat (k) Ex over (k) Ex	Part I, line 7 Part I, line 7 Part I, line 7 Part I, line 7 (6): ss), enter -0- in	(e) plus (f)  (l) Gains (Col col (k), but not Losses (from the col	(h) gain minus less than -0-) <b>or</b>
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Part I, line art V Qual r optional use ection 4940(d)( is the foundation	8	r Section 4940(e) for Re	duced Tax or	. " }		
art V Qual r optional use lection 4940(d)( s the foundation	lification Unde by domestic priva	r Section 4940(e) for Re	duced Tax or			
r optional use lection 4940(d)( s the foundation	by domestic priva				Income	
	on liable for the se	ection 4942 tax on the distri ualify under section 4940(e)			pase period?	☐ Yes 擬
Enter the a	ppropriate amou	nt in each column for each	year; see the ins	structions before ma	akıng any entries.	
Sees see		(b)		(c)	Desta	(d)
	riod years ax year beginning in)	Adjusted qualifying distribut	ions Net valu	e of nonchantable-use as	ssers (col (b) di	bution ratio vided by col (c))
20	113	570		6881	0,0	8284
20	112	1197		1338	0,8	7462
20	)11	22'13		6663	0,3	3213
20	110	12500;		46 910	0.20	
20	009	2000		72,030	0.0	2/7:7
						10282
	ne 1, column (d)				2 1/0	0505
		or the 5-year base period—c ation has been in existence i				,3207
1 Entor the	not value of non-	naritable-use assets for 201	1 from Da≠ V !··	no 5	4 5	776
• Enter the r	iet value of flonci	iantable-use assets for 2014	4 HOIII Part A, III	neo		2-2
5 Multiply lin	ne 4 by line 3 .				. 5 /	853
6 Enter 1% o	of net investment	income (1% of Part I, line 2	7b)		. 6	39
					1	
7 Add lines 5					7 18	392

Part \		e instruc	tion	18)				
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		e de como de	~ <del> </del>				
	here ▶ ☐ and enter 1% of Part I, line 27b							
С	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-)		ز					
3	Add lines 1 and 2		$\rightarrow$					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	<u>Q</u>	<del>-</del>					
5 6	Credits/Payments.							
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a			1				
b	Exempt foreign organizations—tax withheld at source 6b		1	N. E.				
C	Tax paid with application for extension of time to file (Form 8868) . 6c							
d	Backup withholding erroneously withheld 6d			K. X.				
7	Total credits and payments. Add lines 6a through 6d							
8	Enter any <b>penalty</b> 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							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10							
11								
Pain. 1a	VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it was Y	/es	No				
	participate or intervene in any political campaign?	1a		*				
b	Instructions for the definition)?							
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials							
	published or distributed by the foundation in connection with the activities.							
	Did the foundation file Form 1120-POL for this year?							
d	<ul> <li>Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:</li> <li>(1) On the foundation. ► \$</li> <li>(2) On foundation managers. ► \$</li> </ul>							
_	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	900 TO 1					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	of <b>3</b>		Y				
<i>4</i> 2	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	$\dashv$	<u>×</u>				
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b						
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	- †	X				
	If "Yes," attach the statement required by General Instruction T.		1					
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 the governing instrument so the governing instrum	at Marie		E.				
_	conflict with the state law remain in the governing instrument?	6						
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 X'	7						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► NoN							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener	al .	NG 7					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	14 28 ACC 2 180						
-	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes		<b>5</b> 5.080.76	-				
	complete Part XIV	´   9		×				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	eir		X				
	names and addresses							

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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		4
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		┼
	Website address ► WWW, CAPUANO, ORG		<u> </u>	
14	The books are in care of ► TERRY CAPUAND Telephone no. ► <b>216</b> Located at ► /40 GREENIRG RD, MORS CAND 41CLS, OH ZIP+4 ► 440	74	47	188
	Located at ► 140 GREENTRES RD, MORSCAND GILLS, OH ZIP+4 ► 440	122	_	· 
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ [
40	and enter the amount of tax-exempt interest received or accrued during the year			····
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	·	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		$\times$
	"Yes," enter the name of the foreign country			′
Dort		L	<u></u>	L
Ган	VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		¥	
1a	During the year did the foundation (either directly or indirectly):		Yes	No
ıa				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Light Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . □ Yes → No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	[]		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	ļļ		
2		1c		
	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)):			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			İ
	6e, Part XIII) for tax year(s) beginning before 2014?			1
_	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
D	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			ļ
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	<u> </u>		
С	all years listed, answer "No" and attach statement—see instructions.)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		<u>~</u>
·	► 20 17, 20 17, 20 16			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1	
	at any time during the year?		l	l
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	. 1	- 1	
	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		j	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		ı	
	foundation had excess business holdings in 2014.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		$\overline{\sim}$
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		
	Foi	m <b>99</b> 0	-PF	(2014)

n.	_	_	4
۲a	a	е	1

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 I	May Be R	equire	d (contin	ued)		
5a	During the year did the foundation pay or incur ar	ny amo	unt to:							
	<ol> <li>Carry on propaganda, or otherwise attempt to</li> <li>Influence the outcome of any specific public directly or indirectly, any voter registration dri</li> </ol>	election	on (see section	on 495		irry on,		Ędno ZΩo		
	<ul><li>(3) Provide a grant to an individual for travel, stud</li><li>(4) Provide a grant to an organization other than</li></ul>	dy, or o a char		rganız	ation descr	ibed in	Yes	□ANo □No		
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to c	charita	able, scientific	c, litera	ry, or educ	ational		<u></u>		
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice in	transa	ctions fail to	qualify	under the	excepti	ons descril	_	5b	
С	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility	he foun	idation claim grant?	exem	otion from	the tax		No   No		
6a	on a personal benefit contract?									
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	ns, dired	ctly or indired	tly, on	a personal	benefr		,	6b	X
	b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?									
Par	Information About Officers, Direct and Contractors								nploy	es,
_1	List all officers, directors, trustees, foundation	n mana	gers and the			(see i	nstruction	s).		
	(a) Name and address	hour devote	e, and average s per week ed to position	(If n	npensation ot paid, ter -0-)	emplo	Contributions byee benefit p erred compen	lans		nse account, illowances
	RRY CAPUAND YD GREENTREE RD IORELAND HILLS, OH YYDZZ		4.00	<u> </u>	0			2	_	0
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	e incl	uded on li	ne 1-	see instru	ctions	s). If no	one, ente
	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per w devoted to po	eek	(c) Comper	sation	(d) Contribut employee b plans and de compensa	enefit eferred		nse account, illowances
Total	number of other employees paid over \$50,000 .	· ·			<u> </u>			. •		

All other program-related investments. See instructions

Form 990-PF (2014) Information About Officers, Directors, Trustees, Foundation Managers, Part VIII and Contractors (continued) 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 Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount

Form 990-PF (2014)

Part		gn to	undations,
	see instructions.)	г т	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		6/7/
a	Average monthly fair market value of securities	1a	5671
þ	Average of monthly cash balances	1b	100
C	Fair market value of all other assets (see instructions)	1c	6771
d	<b>Total</b> (add lines 1a, b, and c)	1d	5//
е			
•	1c (attach detailed explanation)	2	
2	Subtract line 2 from line 1d	3	5 77/
3 4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see	-	<u> </u>
-	instructions)	4	87
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5684
6	Minimum investment return. Enter 5% of line 5	6	284
Part			<del>OZ_O_7</del> _
· are	and certain foreign organizations check here ► □ and do not complete this part.)	ou i i u	200110
1	Minimum investment return from Part X, line 6	1	284
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)	1 1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	289
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	284
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,		081
	line 1	7	284
Part	XII Qualifying Distributions (see instructions)		_
, are		т	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		500
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	_550
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	_	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	oden democratical (dataser the regarder of the configuration)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	750
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	1 _ 1	9
^	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	550
	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation
	qualifies for the section 4540(e) reduction of tax in those years.		5 000 DE (00.11)

Pari	XIII Undistributed Income (see instructio	ns)			Page
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	(d) 2014
	line 7				550
2	Undistributed income, if any, as of the end of 2014.				
а	Enter amount for 2013 only			O	
ь	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2014:				
a b	From 2009				
C	From 2011				
d	From 2012				
e	From 2013				
f	Total of lines 3a through e	550	-		
4	Qualifying distributions for 2014 from Part XII, line 4: ► \$ 550				No. 2 10 10 10 10 10 10 10 10 10 10 10 10 10
а	Applied to 2013, but not more than line 2a .			7	
b	Applied to undistributed income of prior years				**************************************
	(Election required—see instructions)		1		
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2014 distributable amount				0
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2014				0
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	-100			
b	Prior years' undistributed income. Subtract line 4b from line 2b	<del>- 550</del>			
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
е	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				0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2015.	(1)			
	Subtract lines 7 and 8 from line 6a	0 0			
10	Analysis of line 9:				
a	Excess from 2010				
b	Excess from 2011				
G	Excess from 2012			ĺ	
d e	Excess from 2013 Excess from 2014				

200	VIV. Duite 1 On the Francis	4'	-Maria and David	\/II \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>	
Part	<del></del>	<del></del>			"	
1a	If the foundation has received a ruling					•
	foundation, and the ruling is effective fo		_			V(0) [7] 40 40() (5)
	Check box to indicate whether the four		operating toundar		ection [] 4942(j	)(3) or 4942(j)(5)
<b>2</b> a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	<del></del>	(e) Total
	investment return from Part X for	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	
	each year listed					
	85% of line 2a					
C	Qualifying distributions from Part XII,	Ì		}		-
	line 4 for each year listed	_				
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities .			<u> </u>		
е	Qualifying distributions made directly					
	for active conduct of exempt activities.			}	}	
	Subtract line 2d from line 2c	_				
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"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 .					
С	"Support" alternative test - enter:		-			
	(1) Total support other than gross		,			
	investment income (interest,	<u> </u>				
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)		ļ			
	(2) Support from general public			-		
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)		<b>_</b>			
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Part		on (Complete th	is part only if t	he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-				•	
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation	who have contribu	ited more than 29	% of the total cont	ributions received	by the foundation
	before the close of any tax year (but of	only if they have co	ontributed more th	nan \$5,000). (See s	ection 507(d)(2).)	•
	N/A					
b	List any managers of the foundation	who own 10% or	more of the sto	ck of a corporation	n (or an equally la	arge portion of the
	ownership of a partnership or other e	ntity) of which the	foundation has a	10% or greater into	erest.	
	NIA					
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, e	etc., Programs:		
	Check here ▶ ☐ If the foundation	only makes contr	ibutions to prese	lected charitable	organizations and	d does not accept
	unsolicited requests for funds. If the	foundation makes	gifts, grants, etc.	(see instructions) t	to individuals or o	rganizations under
	other conditions, complete items 2a,	b, c, and d.				
а	The name, address, and telephone nu	umber or e-mail ad	dress of the person	on to whom applic	ations should be	addressed:
	The name, address, and telephone no TERRY CAPUAN	0 216	7447188			
	140 EREGNTREE	RD more	CAND HI	LLS OH	44022	
b	The form in which applications should	be submitted and	d information and	materials they sho	uld include:	
	•		•			
	LETTER RE	4UES7		-		
	Any submission deadlines:	• • • • • • • • • • • • • • • • • • • •		7		
	MARCH 31					
d	Any restrictions or limitations on av	wards, such as b	y geographical ai	reas, charitable fie	elds, kinds of ins	stitutions, or other
	factors:					,
	MOAIG/					

Supplementary Information (continued) 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 56 BELL FLOWER CENTER PUBLIC DONATION 11811 SHAKER BLUD#220 CLEVELAND, DH 44120 CAMP CHEERFUL PUBLIC DONATION 100 CHEERFUL LANE STRONGS VILLE, OIT 4413 CLEVELAND FOODBANK 100 DONATHOL 1550 S. WATERLOO PUBLIC CLEVELAND, OH 44194 FIELDSTONE FARM 100 POBOX 23129 CHAGRIN FALLS, OF 44023 DONATION PUBLIC 50 MIDDLEBURG EARLY LEARNING PUBLIC DONATION MIDOLZBURG, BH 44130 50 DONATION MORELAND HILLS FUND PUBUC MORZIAND HILLS, OH 44022 DONATION THE CITY MISSION 180 PUBLE 5310 CARNEBIE AVE CLSVELAND OH 44103 550 3a **b** Approved for future payment

34-1939755

THE CAPVANO FOUNDATION
Analysis of Income-Producing Activities

Ente	Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		4 (e)	
1	Progra	am service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)	
	а							
	b		, and the second			•		
	c							
	d							
	е							
	f _							
	g Fe	es and contracts from government agencies			<del>                                     </del>			
2	_	pership dues and assessments						
3		st on savings and temporary cash investments			-		7000	
4		ends and interest from securities	-		14	391		
-		ental income or (loss) from real estate:		<del></del>	<del>  '-1</del>	-3-11	<del> </del>	
J		• •	ļ <del></del>		<del> </del>		<del>                                     </del>	
		ebt-financed property					<del></del> -	
_		ot debt-financed property	<u></u>					
6		ental income or (loss) from personal property	<u> </u>		<del>                                     </del>		72/2-	
7		investment income			<del> </del>		200	
8		or (loss) from sales of assets other than inventory					<del> </del>	
9		come or (loss) from special events	,					
10		profit or (loss) from sales of inventory			<b></b>	.00		
11	Other	revenue: a AMRRIGAS			14	182	ļ	
	b							
	c							
	d							
	е							
12	Subto	otal. Add columns (b), (d), and (e)				- 573	222	
13	Total.	Add line 12, columns (b), (d), and (e)				13	795	
(See	e works	heet in line 13 instructions to verify calculation	ns.)					
Pa	rt XVI	B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes			
Lir	ne No.	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repo	orted in column	(e) of Part XVI	-A contributed ii	mportantly to the	
	▼	accomplishment of the foundation's exempt pur	rposes (other tha	n by providing fur	nds for such purp	oses) (See instruc	ctions)	
N	1B					<del></del>		
-7					-	<del></del>		
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_								

Page **13** 

		Exempt Or	ganizations				_		
1	in sec			ngage in any of the followir ection 501(c)(3) organization				Yes	No
а	-		oorting foundation to	a noncharitable exempt or	ganization of				i
•				····	=		10/1)		
							1a(1)		Z,
		ther assets					. 1a(2)		7
b		r transactions:					h		-
				npt organization			<del></del>		×
				ble exempt organization .			. 1b(2)		×
	(3) R	ental of facilities	, equipment, or other	assets			. [1b(3)	L	7
	(4) R	eimbursement ai	rrangements				. 1b(4)		<u> </u>
		oans or loan gua					1b(5)		
	(6) P	erformance of se		p or fundraising solicitation					¥
С				ts, other assets, or paid em					7
d				," complete the following s				fair m	
_				es given by the reporting f					
				ement, show in column (d) t					
(a) Line		(b) Amount involved		antable exempt organization	(d) Description of transfe				
(a) Line	70 1	(b) Amount involved	(c) Name of noncin	antable exempt organization	(d) Description of transfe	is, transactions, a	ind sharing and	angeme	2118
/¥/	<i>l</i> ‡+								
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					<del> </del>				
					ļ				
			<u> </u>		<u> </u>				
2a	Is the	e foundation dire	ectly or indirectly affi	liated with, or related to, o	one or more tax-exem	pt organizatio	ns	_	
	desc	ribed in section 5	501(c) of the Code (of	ther than section 501(c)(3))	or in section 527? .		· 🗌 Yes		No
b	If "Ye	es," complete the	e following schedule.					(	
		(a) Name of organ	nization	(b) Type of organization		(c) Description of	relationship		
	$\overline{X}$								
-	_/								
				<del></del>					——
	Lind	er negative of negative	I declare that I have examined	d this return, including accompanying	schedules and statements, and	I to the best of my	knowledge and	helief #	ie true
حمزی				n taxpayer) is based on all information		wledge	—— <u> </u>		_
Sign	'	1. 10	· · · · <del>-</del>	12/2-7	. ,	Ma	the IRS discu		
Here		Ilmi Cex	Escano,	13/20/18	TRUSTSE		h the preparer e instructions)?		
	Sıgf	nature of officer of tru		Dafe ' Title	e	<u> </u>			
Paid		Print/Type prepare	r's name	Preparer's signature	Date	Check	] if PTIN		· <u></u>
Prep	arer					self-empl			
		Firm's name				Firm's EIN ▶			
use	Only	Firm's address ▶			<del>,</del>	Phone no			