

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

For	caler	dar year 2015 or tax year beginning FEE	3 1, 2015	, and end	ling	SEP 30, 201!	5
Na	ne of	foundation	-			A Employer identificatio	n number
		NANCY O'REILLY FAMILY				47-183718	3
_		nd street (or PO box number if mail is not delivered to street	Room/suite	B Telephone number			
		7 E. VILLA WAY		1.		(417)883-1	
		own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is	pending, check here
		INGFIELD , MO 65809					
G (heck	all that apply:	Initial return of a fo	ormer public cha	arity	D 1. Foreign organization	is, check here
		Final return	Amended return			Foreign organizations m check here and attach or	eeting the 85% test,
<u></u>	haak	type of organization: X Section 501(c)(3) ex	Name change				
"	_		Other taxable private founda	ation		E If private foundation sta	
		trket value of all assets at end of year J Accounting		Accrua	1	under section 507(b)(1	
			ther (specify)		.,	F If the foundation is in a under section 507(b)(1	
	\$	3,539,102. (Part I, colu		basis)			/(b), check here
		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	incom		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	3,344,702.			N/A	
	2	Check ▶ if the foundation is not required to attach Sch. 8				• • • • • • • • • • • • • • • • • • • •	
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	24,734.	24	,734.		STATEMENT 1
	5a	Gross rents					
	b	Net rental income or (loss)					
Φ	6a	Net gain or (loss) from sale of assets not on line 10	<8,330.	>			
Revenue	b	Gross sales price for all assets on line 6a 472,539.					
	7	Capital gain net income (from Part IV, line 2)		_	0.		
	8	Net short-term capital gain		•			
	9	Income modifications Gross sales less returns					•
	10a	and allowances	,				
		Less Cost of goods sold					
	11	Gross profit or (loss) Other income					
		Total Add lines 1 through 11	3,361,106.	24	,734.		
	13	Compensation of officers, directors, trustees, etc	0.	47	0.		0.
	14	Other employee salaries and wages					•
	15	Pension plans, employee benefits					
		Legal fees STMT 2	302.		0.		0.
<u>~</u> ë	Ь	Accounting fees STMT 3	2,768.		0.		0.
ZX ZX	C	Other professional fees STMT 4	10,189.	10	,189.		0.
	17	Interest					
₹ĕ	18	Taxes STMT 5	3,286.		0.		0.
≥ <u>S</u>	19	Depreciation and depletion					
ΗĒ	20	Occupancy					
ZŠ	21	Travel, conferences, and meetings					
3 6	22	Printing and publications			··		
SCANNED MAY 24 2011 Operating and Administrative Expenses	23	Other expenses Total operating and administrative					
A) e	24	expenses. Add lines 13 through 23	16,545.	10	,189.		0.
Q	25	Contributions, gifts, drants paid IVED	120,408.	10	1 + 0 9 •		120,408.
		Total expenses and-disbursements.	120, 100				120, 200
			136,953.	10	,189.		120,408.
	27	Subtract line 26 from line 12:0 9 2016					
		Add lines 24 and 25 Subtract line 26 from line 12:0 9 2016 Excess of revenue over expenses and disbursements	3,224,153.				
	Ь	Net investment income in hegative lenter (0)		14	,545.		
F225	C	Adjusted net income (if negative, enter 0.)				N/A	

Fo	rm 99	0-PF (2015) DR. NANCY O'REILLY FAMI	LY FOUNDATION	47-	1837183 Page 2
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
L	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		25,103.	25,103.
		Savings and temporary cash investments			
		Accounts receivable			
	"	Less; allowance for doubtful accounts			
	۱,	Pledges receivable			
	"	Less: allowance for doubtful accounts			
	_ ا		-	<u> </u>	
	1 1	Grants receivable			,
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable		•	
		Less: allowance for doubtful accounts	· · · · · · · · · · · · · · · · · · ·		
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			···
⋖	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	·		
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	0.	1,901,261.	3,513,999.
	1	Land, buildings, and equipment: basis			0/020/3331
	'	Less accumulated depreciation			
	15	Other assets (describe)			
	I .				
	10	Total assets (to be completed by all filers - see the	0.	1,926,364.	3,539,102.
_	47	Instructions. Also, see page 1, item 1)	0.	1,940,304.	3,333,104.
	1	Accounts payable and accrued expenses			
	1	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
įä	1	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
			_		
_	23	Total liabilities (add lines 17 through 22)	0.	0.	ď
		Foundations that follow SFAS 117, check here			
(A)		and complete lines 24 through 26 and lines 30 and 31.			
ĕ	24	Unrestricted			
la	25	Temporarily restricted	· · · · · · · · · · · · · · · · · · ·	·	
Ba	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	1,926,364.	
é	30	Total net assets or fund balances	0.	1,926,364.	
_					
	31	Total liabilities and net assets/fund balances	0.	1,926,364.	
L	art	Analysis of Changes in Net Assets of Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	0.
2		amount from Part I, line 27a		2	3,224,153.
		r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	3,224,153.
		eases not included in line 2 (itemize)	SEE ST	ATEMENT 6 5	1,297,789.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	1,926,364.
Ť					Form 990-PF (2015)

Fo	orm 990-PF (2015) DR •	NANCY O'REILLY	FAMIL'S	FOUNDAT	OI	N	4	17-183	7183	_ Page 3
T	Part IV Capital Gains	and Losses for Tax on	Investmen	nt Income						
	(a) List and descr 2-story brick wa	ribe the kind(s) of property sold (earehouse; or common stock, 200 s	e g., real estate, shs. MLC Co.)		(b) I	How acquired - Purchase - Donation	(c) Date (mo.,	acquired day, yr.)	(d) Date (mo., da	
18	1						 			
ī	SEE ATTACHED	STATEMENTS			1					
_										
_(1									
_6	<u> </u>	· · · · · · · · · · · · · · · · · · ·			<u> </u>					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		ost or other basis expense of sale				Gain or (loss) s (f) minus (
_ {	l							_		
_t)				ļ					
_9	3	1.1.								_
_(<u></u>					<u>. </u>			
_6				480,86	9.	·			~8	<u>,330.</u>
_	Complete only for assets showin	g gain in column (h) and owned b	y the foundatio	n on 12/31/69				Col. (h) gain i		
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (1) r col. (1), if any			col. (k), but Losses	not less than (from col. (f	ı -0-) or า)) —————	
_8										_
_ <u>b</u>) <u>-</u>	- <u></u>							<u></u>	
_(
d										
e									<8_	<u>.330.</u>
2	Capital gain net income or (net ca	pital loss) { If gain, also entitle loss, enter			}	2			<8,	330.
3	Net short-term capital gain or (los If gain, also enter in Part I, line 8,		and (6):							
	If (loss), enter -0- in Part I, line 8					3		N/A		
F	Part V Qualification U	nder Section 4940(e) fo	or Reduced	d Tax on Net	Inve	estment l	ncome			
(Fo	or optional use by domestic private	foundations subject to the section	n 4940(a) tax o	n net investment in	come	.)			N/A	
						•				
If s	section 4940(d)(2) applies, leave th	nis part blank.								
W	as the foundation liable for the sect	ion 4942 tax on the distributable a	amount of any y	ear in the base per	rod?				Yes	No No
lf °	Yes," the foundation does not qual	ify under section 4940(e). Do not	complete this p	art.				_		
1	Enter the appropriate amount in e	each column for each year; see the	e instructions be	efore making any ei	ntries.	•				
	(a) Base period years Calendar year (or tax year beginnir	(b) ng in) Adjusted qualifying d	listributions	Net value of no	(c) nchar	ıtable-use ass	ets	Dıstrıbı (col. (b) dıvı	(d) ution ratio ded by col.	(c))
	2014									
	2013									
	2012									
_	2011									
_	2010									
2	Total of line 1, column (d)						2			
3	Average distribution ratio for the 5	5-year base period - divide the tota	al on line 2 by 5	, or by the number	of yea	ars				
	the foundation has been in exister	nce if less than 5 years					3			
4	Enter the net value of noncharitab	le-use assets for 2015 from Part)	X, line 5				4			
5	Multiply line 4 by line 3						5			
6	Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6	-		
7	Add lines 5 and 6						7			
8	Enter qualifying distributions from	•					8			
_	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, li	ne 1b, and com	plete that part usin	g a 19	% tax rate.				

	990-PF (2015) DR. NANCY O'REILLY FAMILY FOUNDATION		1837			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see	nstru	ıctio	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)		<u> </u>			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			2	91.
	of Part I, line 27b	2			•	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		ľ	<u> </u>		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3	<u> </u>		2	91.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<u> </u>			<u>0.</u>
5	Tax based on Investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	<u> </u>		2	91.
6	Credits/Payments:	,		r		1
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a					
b	Exempt foreign organizations - tax withheld at source 6b		1			
C	Tax paid with application for extension of time to file (Form 8868) 6c 291	. •				
đ	Backup withholding erroneously withheld . 6d					ړ.
7	Total credits and payments. Add lines 6a through 6d	7			2	<u>91.</u>
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				
	Enter the amount of line 10 to be; Credited to 2016 estimated tax ▶ Refunded ▶	- 11	<u> </u>			
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in		٧,	Yes	No
	any political campaign?			1a		_X_
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition of the definition).			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or				
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			ļ .		
		<u>•</u>				:
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation]	-3	· 1
	managers. ▶ \$ 0 .					المحيدة
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>
	If "Yes," attach a detailed description of the activities			-	-	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					ı
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 of the state	ite law			4	
	remain in the governing instrument?			6	Х	
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	₩		7	_X_	
				* '	~	ı
Ва	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MO					
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				<u>-</u> -	-
	of each state as required by General Instruction G? If "No," attach explanation	.1		86	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculations of the tayable year heavising in 2015 (and instructions for Part VIIV.2 (6.1) or any lates (1.2) and VIIV.2 (6.1) or any lates (1.2) any lates (1.2) and VIIV.2 (6.1) any lates (1.2) any lates (1	ilendar				·
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	Gumru	ο .	9	v	<u>X</u>
-10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	STMT		m 990	X	(0015)
			F01	111 33C		(2015)

523531 11-24-15

Į Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
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		х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	†
	Website address ► N/A	10		
14	The books are in care of ▶ CENTRAL TRUST & INVESTMENT COMPANY Telephone no. ▶ 417883	383	8	
•	Located at ► 3333 S NATIONAL, SPRINGFIELD, MO ZIP+4 ►65			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	007		$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	Ш
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	securities, or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16		_
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
<u> </u>	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
10	During the year did the foundation (either directly or indirectly):		163	140
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	l i	i	
	(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?			
	(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.)			
h	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)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	'' <u>'</u>		
r	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	.		
٠	before the first day of the tax year beginning in 2015?	1c		х
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)):			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
_	before 2015?			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
	Equ	m aa c	-DE	(2015)

Form 990-PF (2015) DR. NANCY O'REILLY FAMII		<u>47-18371</u>	.83	Page 6		
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)			
5a Dyring the year did the foundation pay or incur any amount to:				ľ		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No			
(2) Influence the outcome of any specific public election (see section 4955);						
any voter registration drive?		Y	es X No	- 1	1	
(3) Provide a grant to an individual for travel, study, or other similar purposes	(3) Provide a grant to an individual for travel, study, or other similar purposes?					
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section					
4945(d)(4)(A)? (see instructions)		Y	es 🗶 No 📗			
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or	for				
the prevention of cruelty to children or animals?		Y	es X No		l.	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations	ŀ			
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b		
Organizations relying on a current notice regarding disaster assistance check t	here		▶□			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	from the tax because it mainta	ained			j	
expenditure responsibility for the grant?	ì	N/A 🔲 Y	es 🔲 No			
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
a personal benefit contract?		Y	es X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		İ	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 s	shelter transaction?	Ye	es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?				7b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highly	У			
1 List all officers, directors, trustees, foundation managers and their	compensation.					
A Nilson and add are	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other	
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allo	wances	
NANCY O'REILLY	OFFICER					
3897 E. VILLA WAY						
SPRINGFIELD, MO 65809	0.00	0.	0.		0.	
RAGAN O'REILLY	OFFICER					
1954 E. VALLEY ROAD						
SANTA BARBARA , CA 93108	0.00	0.	0.		0.	
LAUREN O'REILLY	OFFICER					
29021 WAGON ROAD						
AGOURA HILLS, CA 91301	0.00	0.	0.		<u> </u>	
LEIGH A. O'REILLY FISHER	OFFICER					
1722 CHASTAIN PARKWAY						
PACIFIC PALISADES, CA 90272	0.00	0.	0.		<u> </u>	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	acco	Expense unt, other wances	
NONE						
	_					
·····		-				
	_					
						
	-					
		-		-		
	1					
Total number of other employees paid over \$50,000				L		

orm 990-PF (2015) DR. NANCY O'REILLY FAMILY FOUND	DATION 47-1	L837183 Page 7
Part VIII	Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five high	est-paid independent contractors for professional services. If none, en		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	NONE		
Total number	of others receiving over \$50,000 for professional services Summary of Direct Charitable Activities		<u>▶</u> 0
		habital aformation and has the	· · · · · · · · · · · · · · · · · · ·
number of or	lation's four largest direct charitable activities during the tax year. Include relevant sta ganizations and other beneficiaries served, conferences convened, research papers pi	oduced, etc.	Expenses
ı 1	N/A		
2			
'			
١			
Port IV B	Commence of Discourse Deleted Investments		
	Summary of Program-Related Investments two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2.	Amount
	N/A	7,1,11,00	741104111
·	,		
?			
All other prog	ram-related investments. See instructions.		
, ai ouioi prog }	nam rolated investments, oce menuellons.		
ul bbA Jetol	nes 1 through 3	▶	11 -

		see instructions)
Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
Average monthly fair market value of securities	1a	3,889,997.
Average of monthly cash balances	1b	3,889,997. 14,696.
Fair market value of all other assets	1c	
Total (add lines 1a, b, and c)	1d	3,904,693.
Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation) 1e 0		
Acquisition indebtedness applicable to line 1 assets	2	0.
Subtract line 2 from line 1d	3	3,904,693.
Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	58,570.
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,846,123.
Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	127,503.
part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	and certain	
foreign organizations check here 🕨 🔛 and do not complete this part.)	_	
Minimum investment return from Part X, line 6	1	127,503.
Tax on investment income for 2015 from Part VI, line 5		
Income tax for 2015. (This does not include the tax from Part VI.)		
Add lines 2a and 2b	2c	291.
Distributable amount before adjustments. Subtract line 2c from line 1	3	127,212.
Recoveries of amounts treated as qualifying distributions	4	0.
Add lines 3 and 4	5	127,212.
Deduction from distributable amount (see instructions)	6	0.
Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	127,212.
Qualifying Distributions (see instructions)		-
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	120,408.
Program-related investments - total from Part IX-B	1b	0.
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
Amounts set aside for specific charitable projects that satisfy the:		
Suitability test (prior IRS approval required)	3a	
Cash distribution test (attach the required schedule)	3b	
Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	120,408.
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.
Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	6	120,408.

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,		· · · ·		
line 7				127,212.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			113,803.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 120,408.			440 000	
a Applied to 2014, but not more than line 2a			113,803.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				6,605.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable			·	
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line			- "	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				120,607.
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)	0.			
8 Excess distributions carryover from 2010	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.	_			
Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

523581 11-24-15

Form **990-PF** (2015)

	CY O'REILLY				337183 Page 10
Part XIV Private Operating F	 			N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective for		•	▶		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(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	-				
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets			<u> </u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public			·		
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					-
an exempt organization					
(4) Gross investment income				<u> </u>	
Part XV Supplementary Information at any time during the supplementary in the supplementary i	rmation (Comple he vear-see instr	te this part only ructions.)	if the foundation	had \$5,000 or mo	ore in assets
1 Information Regarding Foundation					
a List any managers of the foundation who	•	than 2% of the total con	tributions received by the	foundation before the clo	co of any tay
year (but only if they have contributed m			andutions received by the	Touridation before the cio	Se of ally lax
NONE					
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation	(or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation has			(or an equally large perm	or and difficulty of a p	arthoromp of
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
			organizations and does n	ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc. (
a The name, address, and telephone numb	per or e-mail address of t	he person to whom app	ications should be addres	sed:	
b The form in which applications should be	e submitted and informat	ion and materials they s	hould include:		
c Any submission deadlines:	·				
d Any restrictions or limitations on awards	such as by geographics	al areas, charitable fields	kinds of institutions, or o	other factors:	
,	, as 5, goograpinot	a. sao, onamadio notos	, 01 1110110110110, 01 (And lautoro.	
					- 000 DE

Total

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded b	by section 512, 513, or 514	(a)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
	0000				
ab			<u> </u>		- ·
С					
d	1 1				
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					_
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	24,734.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property	-				
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					0 220
than inventory			+ +-		<8,330
9 Net income or (loss) from special events0 Gross profit or (loss) from sales of inventory			1		
1 Other revenue:			+ +		
b	l l				
c					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0_		24,734.	
3 Total Add line 12, columns (b), (d), and (e)				13	16,404
See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activition	es to the Accom	<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Explain below how each activity for which the foundation's exempt purposes (other			A contributed	importantly to the accomp	olishment of

Phone no. 312-255-5490

Form **990-PF** (2015)

Part)	KVII Information Re Exempt Organ		ınsfers To a	and Transactions a	and Relations	ships With No	ncharitable	е	
1 Did	the organization directly or indir	· · · · · · · · · · · · · · · · · · ·	ny of the following	no with any other organization	on described in sect	tion 501(c) of		Yes	No
	Code (other than section 501(c)								<u> </u>
	nsfers from the reporting founda	.,							ĺ
	Cash		•	•			1a(1)		х
	Other assets						1a(2)		Х
	er transactions:								
(1)	Sales of assets to a noncharital	ble exempt organı	zation				1b(1)		X
(2)	Purchases of assets from a nor	ncharitable exemp	t organization				1b(2)		Х
(3)	Rental of facilities, equipment,	or other assets					1b(3)		Х
(4)	Reimbursement arrangements						1b(4)		Х
(5)	Loans or loan guarantees						1b(5)		X
(6)	Performance of services or me	mbership or fundr	raising solicitatio	ons			1b(6)		X
c Sha	ring of facilities, equipment, mai	ılıng lısts, other as	sets, or paid em	ployees			1c		X
d If th	e answer to any of the above is	"Yes," complete th	e following sche	edule. Column (b) should al	ways show the fair i	market value of the g	goods, other ass	sets,	
or s	ervices given by the reporting fo	oundation. If the fo	oundation receiv	ed less than fair market valu	ue in any transaction	n or sharing arrange	ment, show in		
colu	ımn (d) the value of the goods, o	· · · · · · · · · · · · · · · · · · ·							
(a) Line no	(b) Amount involved	(c) Name		e exempt organization	(d) Description	n of transfers, transaction	ons, and sharing ar	rangeme	nts
			N/A						
									
		<u> </u>							
		 		-	-				
					_				
									
		· · · · · · · · · · · · · · · · · · ·							
		<u> </u>	.						
			··········	_					
		`							
2a Isti	ne foundation directly or indirect	ly affiliated with .c	r related to, one	or more tax-exempt organi	zations described	· · ·			
	ection 501(c) of the Code (other						Yes	X	No
	es," complete the following sche		(-/(-//						-
	(a) Name of org			(b) Type of organization		(c) Description of re	lationship		
	N/A								
							=		
					<u> </u>				
Q:	Under penatties of perjury, I declare to and belief it is true, Oproct, and com						May the IRS o	discuss t	his
Sign Here		(1)					s <u>hown</u> below	(see inst	
11010	Support to at a tract or trustal	, John	ly_	5-2-16	• #	<u>sr</u>	_ X Yes		J No
	Signature of officer or trustee	ime L	Preparer's s	Date	Title Date	Check If	PTIN		
	Trinivity pe preparer 5 Ha	iiio	Poparei 3 3			self- employed	1 1114		
Paid	DERRICK AL	I.EN	123	52	1/4/10	oon omplojou	P01233	ρΩο	
Prepa			FINANCT	AL GROUP LLC		Firm's EIN ► 3			
Use C		MODATO	THATCL	THE CHOOL HILL	•	THIN SLIN P J	U =3174	20	
		0 NORTH	WABASH	AVENUE, SUIT	E 1650	1			

523622 11-24-15

CHICAGO, IL 60611

Part IV Capital Gains and Lo	sses for Tax on Investment Income									
	describe the kind(s) of property sol rick warehouse; or common stock, 2) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)					
1a SOLD 912.825 S	HS AQR SMALL CAP	MOMENTUM STYLE	FD	P	VARIOUS 03/23/15					
b SOLD 915.332 S	HS AQR SMALL CAP	MOMENTUM STYLE	FD	P	VARIOUS 04/23/15					
		UTURES STRATEGY		P	VARIOUS 04/23/15					
d SOLD 2,214.839 SHS EATON VANCE FLOATING RATE FD C P VARIOUS 04/23/15										
e SOLD 1,186.624 SHS DRIEHAUS SELECT CREDIT FD ON 0 P VARIOUS 04/23/15										
SOLD 7,297.238 SHS GUGGENHEIM MID CAP VALUE INST P VARIOUS 05/28/15										
		ES GLOBAL BOND F		P	VARIOUS 07/08/15					
		T ALL AUTHORITY		P	VARIOUS 08/06/15					
		G MARKETS DEBT C		P	VARIOUS 08/21/15					
SOLD 1,949.317		ON PARTNERS LONG		<u>P</u>	VARIOUS 08/21/15					
k SOLD 7,240.044		SSET ALL AUTHORI'		<u>P</u>	VARIOUS 09/18/15					
SOLD 8,124.469			CL	P	VARIOUS 09/23/15					
m SOLD 149.867 S		BAL BOND FUND AD		P	VARIOUS 09/28/15					
		<u>MENT NATL MORTGAG</u> ENT NATL MORTGAG		<u>Р</u> Р	VARIOUS 03/16/15					
o PAYMENT ON 531			E A		VARIOUS 03/16/15					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) blus (f) minus (g)					
a 20,000.		14,174.			5,826.					
b 20,000.		13,336.			6,664.					
c 10,000.		8,708.			1,292.					
d 20,000.		19,998.			2.					
e 11,000.		12,115.			<1,115.>					
f 83,480. g 92,175.		81,140.			2,340.					
0.000		99,694. 9,182.			<7,519.>					
1 31,148.		32,295.			<1,182.>					
30,000.		28,265.			<1,147.> 1,735.					
k 59,296.		71,475.			<12,179.>					
85,469.		88,387.			<2,918.>					
m 1,704.		1,825.		·	<121.>					
n 6.		6.			0.					
0 8.		8.			0.					
	g gain in column (h) and owned by t	the foundation on 12/31/69		(I) Los	sses (from col. (h))					
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (I) over col. (J), If any	(of col. (h) gain over col. (k), ot less than "-0-")					
a					5,826.					
b				_	6,664.					
С					1,292.					
d					<u> 2.</u>					
<u>e</u>					<u><1,115.</u> >					
<u>f</u>					2,340.					
9					<u> </u>					
<u>h</u>					<u><1,182.</u> >					
<u>.</u>					<1,147.>					
					1,735.					
K					<12,179.>					
- <u>I</u>					<2,918.> <121.>					
m n										
0					0.					
2 Capital gain net income or (net ca	nital loss) [If gain, also enter	in Part I, line 7_ \			<u></u>					
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) an	-" in Part I, line 7 /	2							
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8	column (c).	}	3							

- 41-1-1 Oupital damo and E00003 for Tax on investmen	it moonic	
, (a) List and describe the kind(s) of pri 2-story brick warehouse; or commo		(c) Date acquired P - Purchase (mo., day, yr.) (d) Date sold (mo., day, yr.)
		D-Donation
1a PAYMENT ON 1,199.74 UNITS	GOVERNMENT NATL MORTGA	AG P VARIOUS 03/16/15
b PAYMENT ON 625.445 UNITS F	FEDERAL NATIONAL MORTGA	AG P VARIOUS 03/25/15
c PAYMENT ON 252.07 UNITS GC	VERNMENT NATL MORTGAGE	P VARIOUS 04/15/15
	VERNMENT NATL MORTGAGE	
	GOVERNMENT NATL MORTGA	
f PAYMENT ON 607.065 UNITS F	FEDERAL NATIONAL MORTGA	AG P VARIOUS 04/27/15
g PAYMENT ON 244.73 UNITS GO	VERNMENT NATL MORTGAGE	P VARIOUS 05/15/15
	VERNMENT NATL MORTGAGE	
		
	<u>'EDERAL NATIONAL MORTGA</u>	
k PAYMENT ON 237.64 UNITS GO	VERNMENT NATL MORTGAGE	E P VARIOUS 06/15/15
I PAYMENT ON 507.47 UNITS GO	VERNMENT NATL MORTGAGE	P VARIOUS 06/15/15
	GOVERNMENT NATL MORTGA	
	EDERAL NATIONAL MORTGA	
o PAYMENT ON 230.52 UNITS GO	VERNMENT NATL MORTGAGE	E P VARIOUS 07/15/15
(e) Gross sales price (f) Depreciation allow		(h) Gain or (loss)
(or allowable)	plus expense of sale	(e) plus (f) minus (g)
a 3.	3.	0.
*		
<u>b</u> 18.	18.	0.
c 7.	8.	<1.>
d 4.	4.	0.
e 4.	4.	0.
19.	19.	0.
	7.	0.
*		
h 12.	12.	0.
3.	4.	<u> </u>
19.	19.	0.
k 7.	7.	0.
15.	15.	0.
m 3.	4.	<1.>
n 19.	19.	0.
	6.	0.
Complete only for assets showing gain in column (h) and o		(I) Losses (from col. (h))
(i) F.M.V. as of 12/31/69 (j) Adjusted basis		Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(i) F.M.V. as of 12/31/69 as of 12/31/69	over col. (j), if any	—
a		0.
b		0.
C		<1.>
d		0.
e		<u> </u>
f		0.
9		0.
h		0.
		<1.>
1		
k		0.
		0.
m		<u> </u>
n		0.
0		0.
<u>, </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>
2 Capital gain net income or (net capital loss) { If gain, If (loss)	also enter in Part I, line 7	,
), cittor o iii r arri, iii c /)	
3 Net short-term capital gain or (loss) as defined in sections 1	222(5) and (6):	1
If gain, also enter in Part I, line 8, column (c).	}	
If (loss), enter "-0-" in Part I, line 8		3_

		describe the kind(s) of property solution describe the kind(s) of property solution stock, 20		<u> </u>		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr)
1a	PAYMENT ON 492	UNITS GOVERNMEN	T NATL MO	RTGAGE	ASS	P	VARIOUS	07/15/15
		85.78 UNITS GOVE	RNMENT NA	TL MORT	GAG	P		07/15/15
c	PAYMENT ON 551	.205 UNITS FEDER	AL NATION	AL MORT	GAG	P	VARIOUS	07/27/15
d	PAYMENT ON 224	.58 UNITS GOVERN	MENT NATL	MORTGA	GE	P		08/17/15
e	PAYMENT ON 487	.53 UNITS GOVERN	MENT NATL	MORTGA	GE	P	VARIOUS	08/17/15
f	PAYMENT ON 1,1	82.32 UNITS GOVE	RNMENT NA	TL MORT	GAG	P	VARIOUS	08/17/15
g	PAYMENT ON 532	.345 UNITS FEDER	AL NATION	AL MORT	GAG	P	VARIOUS	08/25/15
h	PAYMENT ON 218	.61 UNITS GOVERN	MENT NATL	MORTGA	GE	P	VARIOUS	09/15/15
1	PAYMENT ON 476	.02 UNITS GOVERN	MENT NATL	MORTGA	GE	_	VARIOUS	09/15/15
	PAYMENT ON 1,1	78.84 UNITS GOVE	RNMENT NA	TL MORT	GAG	P	VARIOUS	09/15/15
k	PAYMENT ON 513	.365 UNITS FEDER	AL NATION	AL MORT	GAG			09/25/15
)							
n								
0								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or ot plus expense				Gain or (loss) lus (f) minus (g)	
a	4.			4.				0.
b	3.			4.				<1.>
c	19.			20.				<1.>
d	6.			6.				0.
<u>—</u>	12.			12.				0.
f	3.			4.				<1.>
g	19.			20.				<1.>
h	6.			6.		,		0.
<u></u>	12.			12.				0.
I	4.			4.				0.
k	19.			20.				<1.>
1_								
m								
n								
0								_
	Complete only for assets showing	ig gain in column (h) and owned by t	he foundation on 12	/31/69		(I) Los	ses (from col. (h))	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess o over col. (j)			Gains (excess o	f col. (h) gain over ot less than "-0-")	col. (k),
<u>а</u>			· · · · · · · · · · · · · · · · · · ·					0.
b								<1.>
<u>-</u>						*		<1.>
d	· · · ·							0.
e							•	0.
f								<1.>
g								_ <1.>
h								0.
								0.
								0.
k							 -	<1.>
1								
m								
n								
0						·		<u>.</u>
		. If nam also enter	in Part I, line 7					
2	Capital gain net income or (net ca	pital loss) { If gain, also enter "-0	-" in Part I, line 7		2			<u><8,330.</u> >
3		ss) as defined in sections 1222(5) an	d (6):)				
	If gain, also enter in Part I, line 8,			 				
	If (loss), enter "-0-" in Part I, line 8	3		ノ	3		N/A	

3 Grants and Contributions Paid During the Yo	T**	Τ		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient		
THE VICTIM CENTER INC		PUBLIC CHARITY	GENERAL OPERATIONS	
PRINGFIELD, MO 65802				2,50
INITED WAY OF SANTA BARBARA		DIIDI TO CUADITO	GENERAL OPERATIONS	
20 E GUTIERREZ ST		TOBBIC CHARTIT	GENERAL OFERATIONS	
SANTA BARBARA , CA 93101				2,50
CONVOY OF HOPE		PUBLIC CHARITY	GENERAL OPERATIONS	
30 S PATTERSON AVE PRINGFIELD, MO 65802				2,00
NUMANE SOCIETY OF SOUTHWEST MISSOURI		PUBLIC CHARITY	GENERAL OPERATIONS	
PRINGFIELD, MO 65803			-	12,50
IONTION OF HODE		DUDI TO CUADITAL		
CONVOY OF HOPE 330 S PATTERSON AVE		PUBLIC CHARITI	GENERAL OPERATIONS	
SPRINGFIELD, MO 65802				25,00
OOYS & GIRLS CLUB		PUBLIC CHARITY	GENERAL OPERATIONS	
L275 PEACHTREE STREET NE ATLANTA , GA 30309				13,33
THE SOVEREIGN MILITARY ORDER OF		PUBLIC CHARITY	GENERAL OPERATIONS	
ERUSALEM 5 REED RANCH ROAD				
FIBURON, CA 94920				1,00
ANTA BARBARA FOUNDATION		PUBLIC CHARITY	GENERAL OPERATIONS	
.111 CHAPALA ST #200 NANTA BARBARA . CA 93101				2,50
OUNDED WARRIOR PROJECT		PUBLIC CHARITY	GENERAL OPERATIONS	
899 BELFORT ROAD, SUITE 300 ACKSONVILLE , FL 32256				20
PREGNANCY CARE CENTER 1342 E. PRIMROSE, STE. C		PUBLIC CHARITY	GENERAL OPERATIONS	
SPRINGFIELD, MO 65804 Total from continuation sheets	<u> </u>	<u> </u>	<u> </u>	50 102_65

Part XV | Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient HILL COUNTY YOUTH RANCH PUBLIC CHARITY GENERAL OPERATIONS P.O. BOX 67 INGRAM, TX 78025 200. CARE RESCUE LA PUBLIC CHARITY GENERAL OPERATIONS PO BOX 251936 LOS ANGELES, CA 90025 5,000. CONVOY OF HOPE PUBLIC CHARITY GENERAL OPERATIONS 330 S PATTERSON AVE SPRINGFIELD, MO 65802 500. HARVEST HOME PUBLIC CHARITY GENERAL OPERATIONS 2118 WILSHIRE BLVD SANTA MONICA, CA 90403 600. AMERICAN CANCER SOCIETY PUBLIC CHARITY GENERAL OPERATIONS 225 N MICHIGAN AVE #1210 CHICAGO IL 60601 250. CONVOY OF HOPE PUBLIC CHARITY GENERAL OPERATIONS 330 S PATTERSON AVE SPRINGFIELD MO 65802 5,000. CATHOLIC CHARITIES OF SOUTHERN PUBLIC CHARITY GENERAL OPERATIONS MISSOUI 424 E. MONASTERY ST. SPRINGFIELD, MO 65807 5,000. MARCH OF DIMES PUBLIC CHARITY GENERAL OPERATIONS 111 W JACKSON BLVD CHICAGO, IL 60604 2,500. BREAST CANCER FOUNDATION OF THE PUBLIC CHARITY GENERAL OPERATIONS OZARKS 330 N JEFFERSON AVE # B SPRINGFIELD, MO 65806 10,000. SPRINGFIELD BLACK TIE INC PUBLIC CHARITY GENERAL OPERATIONS P.O. BOX 2501-306 SPRINGFIELD, MO 65801 275. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient GREAT CIRCLE - SPRINGFIELD CAMPUS PUBLIC CHARITY GENERAL OPERATIONS 600 S. JEFFERSON AVENUE SPRINGFIELD MO 65806 250. GYN CANCERS ALLIANCE PUBLIC CHARITY GENERAL OPERATIONS 3023 S FORT AVE SPRINGFIELD, MO 65807 250. PUBLIC CHARITY GENERAL OPERATIONS UNITED MINISTRIES IN HIGHER EDUCATION 1515 S. NATIONAL AVENUE SPRINGFIELD MO 65804 10,000. SCOTTISH RITE CARE PUBLIC CHARITY GENERAL OPERATIONS 1330 LINWOOD BLVD KANSAS CITY, MO 64109 800. **Total from continuation sheets**

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-FZ, or 990-PE) a

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

2015

Employer identification number

NANCY O'REILLY FAMILY FOUNDATION 47-1837183 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 」 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

DR. NANCY O'REILLY FAMILY FOUNDATION

47-1837183

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LARRY & NANCY O'REILLY FAMILY FOUNDATION 2831 S INGRAM MILL RD SPRINGFIELD, MO 65804	\$ 3,350,502.	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 Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (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 noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
523452 10.2		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DR. NANCY O'REILLY FAMILY FOUNDATION

47-1837183

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	DIVERSIFIED PORTFOLIO OF SECURITIES, SEE ATTACHED		
		\$3,341,091.	02/27/15
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of orga	anization		Employer identification number
DR MA	NCY O'REILLY FAMILY FO	TINITA TIT ON	47-1837183
Part III	Exclusively religious, charitable, etc., contributor. Complete c completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additional	abutions to organizations described olumns (a) through (e) and the follow, charitable, etc., contributions of \$1,000 o	l in section 501(c)(7), (8), or (10) that total more than \$1,000 for
(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, an	d 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
	Transferee's name, address, an	(e) Transfer of gif	Relationship of transferor to transferee
-	Transfer of France, and Goog and		Treignstromp of Burister of to Burister ee
(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, an		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
	I	(e) Transfer of gif	t
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee

FORM 990-PF DIVIE	ENDS	AND INTER	EST	FROM SECUR	ITIES S	TATEMENT	1
GROS SOURCE AMOU		CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
CENTRAL TRUST 24,	734.		0.	24,734.	24,734.		_
TO PART I, LINE 4 24,	734.		0.	24,734.	24,734.		
FORM 990-PF		LEGAL	FE	ES	S	TATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LEGAL FEES		302.		0.			0.
TO FM 990-PF, PG 1, LN 16A	<u> </u>	302.		0.			0.
FORM 990-PF		ACCOUNTI	NG :	FEES	S	TATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
TAX ADVISORY FEES		2,768.		0.			0.
TO FORM 990-PF, PG 1, LN 1	.6B 	2,768.	_	0.		=	0.
FORM 990-PF	OTI	HER PROFES	SIO	NAL FEES	S	TATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
INVESTMENT ADVISORY FEES		10,189.		10,189.			0.

FORM 990-PF	KAT	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
FEDERAL TAX	3,286.		0.	0.
TO FORM 990-PF, PG 1, LN 18	3,286.		0.	0.
DESCRIPTION DIFFERENCE BETWEEN TAX BASIS CONTRIBUTIONS	AND FMV FOR	NON-CASH		AMOUNT 1 297 789
DIFFERENCE BETWEEN TAX BASIS CONTRIBUTIONS	AND FMV FOR	NON-CASH		1,297,789.
TOTAL TO FORM 990-PF, PART I	II, LINE 5			1,297,789.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 7
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE
CENTRAL TRUST - SECURITIES		COST	1,901,261.	3,513,999.
TOTAL TO FORM 990-PF, PART II	I, LINE 13		1,901,261.	3,513,999.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

LARRY & NANCY O'REILLY FAMILY FOUNDATION

2831 S INGRAM MILL RD

SPRINGFIELD, MO 65804