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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 11-01-2014 , and ending 10-31-2015

Name of foundation BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN		A Employer identification number 65-0230453	
Number and street (or P O box number if mail is not delivered to street address) 1795 BROOKWOOD DR		B Telephone number (see instructions) (330) 867-2490	
City or town, state or province, country, and ZIP or foreign postal code AKRON, OH 44313		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ☒ \$ 12,017,658		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,282,262			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	17,860	17,860		
	4 Dividends and interest from securities.	282,366	282,366		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-10,529			
	b Gross sales price for all assets on line 6a 361,336				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	6,051	5,223		
	12 Total. Add lines 1 through 11	1,578,010	305,449		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	65,045	6,505		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	22,497	19,122		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	5,247	13		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	23,711	13,923		0
	24 Total operating and administrative expenses. Add lines 13 through 23	116,500	39,563		0
	25 Contributions, gifts, grants paid	721,492			721,492
	26 Total expenses and disbursements. Add lines 24 and 25	837,992	39,563		721,492
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	740,018			
	b Net investment income (if negative, enter -0-)		265,886		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	2,024,440	1,897,830	1,897,830
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule).			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	9,541,648	9,976,481	10,119,828
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	11,566,088	11,874,311	12,017,658	
Liabilities	17	Accounts payable and accrued expenses	248	241	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	248	241	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	11,565,840	11,874,070	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	11,565,840	11,874,070	
	31	Total liabilities and net assets/fund balances (see instructions) . . .	11,566,088	11,874,311	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	11,565,840
2	Enter amount from Part I, line 27a	740,018
3	Other increases not included in line 2 (itemize) ▶ _____	15,403
4	Add lines 1, 2, and 3	12,321,261
5	Decreases not included in line 2 (itemize) ▶ _____	447,191
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	11,874,070

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	CAPITAL GAIN FROM LANDMARK EQUITY PARTNERS	P	2014-11-01	2015-10-31
b	CAPITAL GAIN FROM LANDMARK EQUITY PARTNERS	P	2013-01-01	2015-10-31
c	CAPITAL LOSS FROM SCHWAB ACCOUNT #0992	P	2014-06-16	2014-12-30
d	CAPITAL GAINS DIVIDENDS	P		
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 323			323
b 9,824			9,824
c 298,598		371,865	-73,267
d 52,591			52,591
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			323
b			9,824
c			-73,267
d			52,591
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-10,529
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	775,008	11,058,780	0 070081
2012	736,361	9,731,235	0 075670
2011	561,451	8,528,576	0 065832
2010	540,701	7,811,008	0 069223
2009	546,738	7,038,580	0 077677

2	Total of line 1, column (d).	2	0 358483
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 071697
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	12,464,117
5	Multiply line 4 by line 3.	5	893,640
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	2,659
7	Add lines 5 and 6.	7	896,299
8	Enter qualifying distributions from Part XII, line 4.	8	721,492

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b		15,318	
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-)		0	
3		Add lines 1 and 2.		5,318	
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5,318	
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014		6a	7,898
b		Exempt foreign organizations—tax withheld at source		6b	
c		Tax paid with application for extension of time to file (Form 8868)		6c	
d		Backup withholding erroneously withheld		6d	
7		Total credits and payments. Add lines 6a through 6d.		7,898	
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	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		2,580	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax ☐ 2,580 Refunded ☐		110	

Part 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 intervene in any political campaign?		1a		No
b		Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?		1b		No
		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.				
c		Did the foundation file Form 1120-POL for this year?		1c		No
d		Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ 0 (2) On foundation managers ☐ \$ 0				
e		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		No
		If "Yes," attach a detailed description of the activities.				
3		Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		No
4a		Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		No
b		If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5		Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		No
		If "Yes," attach the statement required by General Instruction T.				
6		Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
		• By language in the governing instrument, or				
		• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	Yes	
7		Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.		7	Yes	
8a		Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ FL ☐ 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	Yes	
9		Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		No
10		Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.		10		No

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address ▶N/A				
14	The books are in care of ▶JUDI ROMAN Telephone no ▶(330) 867-2490 Located at ▶1795 BROOKWOOD DRIVE AKRON OH ZIP +4 ▶44313			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶ CJ			Yes	

Part 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.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. ☐ Yes ☒ No (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 ☒ No (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)?. ☐ Yes ☒ No (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). ☐ Yes ☒ No			
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)? ☐ Organizations relying on a current notice regarding disaster assistance check here. ▶ ☐	1b		
c	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?.	1c		No
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))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?. ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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).	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 ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i>).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	☐ Yes ☒ 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?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	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 maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	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?	☐ Yes ☒ 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, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(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) Expense account, other allowances
MADLINE BERLIN	PRESIDENT	0	0	0
1795 BROOKWOOD DRIVE AKRON, OH 44313	5 00			
ROBIN BERLIN KANE	VICE PRESIDENT	65,045	0	0
1795 BROOKWOOD DRIVE AKRON, OH 44313	40 00			
ROBERT BERLIN	ASSISTANT SECRETARY	0	0	0
1795 BROOKWOOD DRIVE AKRON, OH 44313	5 00			
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(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	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	0
2	
3	
4	

Part IX-B

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
1 N/A	0
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	10,130,789
b	Average of monthly cash balances.	1b	2,066,279
c	Fair market value of all other assets (see instructions).	1c	456,858
d	Total (add lines 1a, b, and c).	1d	12,653,926
e	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	12,653,926
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	189,809
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	12,464,117
6	Minimum investment return. Enter 5% of line 5.	6	623,206

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	623,206
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	5,318
b	Income tax for 2014 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	5,318
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	617,888
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	617,888
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	617,888

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	721,492
b	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		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	721,492
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	721,492

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				617,888
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009.	195,636			
b From 2010.	155,536			
c From 2011.	143,337			
d From 2012.	263,703			
e From 2013.	228,171			
f Total of lines 3a through e.	986,383			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 721,492				
a Applied to 2013, but not more than line 2a			0	
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 2014 distributable amount.				617,888
e Remaining amount distributed out of corpus	103,604			
5 Excess distributions carryover applied to 2014 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,089,987			
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 2013 Subtract line 4a from line 2a Taxable amount—see instructions			0	
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).	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . .	195,636			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	894,351			
10 Analysis of line 9				
a Excess from 2010. . . .	155,536			
b Excess from 2011. . . .	143,337			
c Excess from 2012. . . .	263,703			
d Excess from 2013. . . .	228,171			
e Excess from 2014. . . .	103,604			

Part XIVPrivate Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
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					
	(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					

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

ROBIN BERLIN KANE
1795 BROOKWOOD DRIVE
AKRON, OH 44313
(330) 867-2490

b

The form in which applications should be submitted and information and materials they should include

NARRATIVE

c

Any submission deadlines

NO DEADLINES

d

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

NO RESTRICTIONS

Form 990-PF (2014)

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	721,492
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

Part XVII

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	***** _____ Signature of officer or trustee	2016-03-08 _____ Date	***** _____ Title

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name RICHARD C FEDOROVICH	Preparer's Signature	Date	Check if self-employed ☒	PTIN P00403148
	Firm's name ☒ BOBER MARKEY FEDOROVICH & COMPANY			Firm's EIN ☒ 34-1523030	
	Firm's address ☒ 3421 RIDGEWOOD ROAD SUITE 300 AKRON, OH 44333			Phone no (330) 762-9785	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AKRON ART MUSEUM ONE SOUTH HIGH AKRON,OH 44308	NONE	PC	ARTS	1,000
AKRON CHILDREN'S HOSPITAL ONE PERKINS SQUARE AKRON,OH 44308	NONE	PC	PROMISE CAMPAIGN	83,334
AKRON COMMUNITY FOUNDATION 345 W CEDAR STREET AKRON,OH 443072407	NONE	PUBLIC	HUMANITARIAN	500
AKRON GENERAL VISITING NURSE SERVICE 1 HOME CARE PLACE AKRON,OH 44320	NONE	PC	HOSPICE CARE	100
AKRON-CANTON REGIONAL FOOD BANK PO BOX 1580 AKRON,OH 44309	NONE	PC	COMMUNITY SERVICE	500
BOYS HOPE GIRLS HOPE 9619 GARFIELD BLVD GARFIELD HEIGHTS,OH 44125	NONE	PC	COMMUNITY SERVICE	5,000
CHABAD OF AKRON 599 PEBBLE BEACH DRIVE AKRON,OH 44333	NONE	PC	JEWISH COMMUNITY CAMP SCHOLARSHIPS	25,000
CITY OF AKRON HOLOCAUST MEMORIAL TRUST 166 S HIGH STREET RM 200 AKRON,OH 44308	NONE	PC	EDUCATION	500
CUYAHOGA COMMUNITY COLLEGE FOUNDATION 700 CARNEGIE AVENUE CLEVELAND,OH 44115	NONE	PC	HEALTH CARE	5,000
DOLPHINS CYCLING CHALLENGE V UNIVERSITY OF MIAMI HEALTH SYSTEM 200 S BISCAYNE BLVD 6TH FLOOR MIAMI,FL 331315310	NONE	PC	CANCER RESEARCH	1,000
FAMILY PROMISE OF SUMMIT COUNTY 111 EAST VORIS STREET STE A AKRON,OH 44311	NONE	PC	ASSIST HOMELESS FAMILIES	25,000
FISHER ISLAND PHILANTHROPIC FUND 3250 SW THIRD AVE MIAMI,FL 33129	NONE	PC	COMMUNITY SERVICE	70,000
FRACTURED ATLAS 248 WEST 35TH ST 10TH FLOOR NEW YORK,NY 10001	NONE	PC	ARTS - LIFE CUBE SCHOLARSHIP	500
GIRLS ON THE RUN 750 WHITE POND DRIVE AKRON,OH 44320	NONE	PC	COMMUNITY SERVICE	2,100
HELP MALAWI C/O RAVENCREST PRIVATE RESERVES BENEFIT 1836 W 25TH STREET SUITE 3B CLEVELAND,OH 44113	NONE	PC	COMMUNITY SERVICE	2,000
Total  3a				721,492

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HIRAM HOUSE 33775 HIRAM TRAIL CHAGRIN FALLS, OH 44022	NONE	PC	CAMPERSHIP PROGRAM	1,500
JACK THE BIKEMAN PO BOX 17565 WEST PALM BEACH, FL 33416	NONE	PC	COMMUNITY SERVICE	500
JEWISH COMMUNITY BOARD OF AKRON 750 WHITE POND DRIVE AKRON, OH 44320	NONE	PC	JEWISH COMMUNITY ASSISTANCE	200,000
JEWISH FAMILY SERVICES 750 WHITE POND DRIVE STE 550 AKRON, OH 44320	NONE	RELIGIOUS	JEWISH COMMUNITY ASSISTANCE	500
LAUREL SCHOOL ONE LYMAN CIRCLE SHAKER HEIGHTS, OH 441229548	NONE	EDUCATION	NORTH STAR COLLABORATIVE/PRENTISS SOCIETY	1,000
MIAMI MUSIC PROJECT 2125 BISCAYNE BLVD STE 215 MIAMI, FL 33137	NONE	PC	ARTS	1,000
MICHAEL J FOX FOUNDATION PO BOX 5014 HAGERSTOWN, MD 217145014	NONE	PC	PARKINSON'S RESEARCH	500
MIRACLE FLIGHTS FOR KIDS 2764 N GREEN VALLEY PARKWAY 115 GREEN VALLEY, NV 890142120	NONE	PC	CHILDREN'S HOSPITAL	2,500
MOURNING FAMILY FOUNDATION 100 S BISCAYNE BLVD 3RD FLOOR MIAMI, FL 33131	NONE	PC	YOUTH DEVELOPMENT	2,000
MT SINAI MEDICAL CENTER FOUNDATION 4300 ALTON ROAD MIAMI BEACH, FL 33140	NONE	PC	FOUNDER'S CLUB	5,000
NATIONAL 911 MEMORIAL & MUSEUM PO BOX 96126 WASHINGTON, DC 200906126	NONE	PC	MEMORIAL	108
NORTH COAST COMMUNITY HOMES 14221 BROADWAY AVENUE CLEVELAND, OH 441251953	NONE	PUBLIC	COMMUNITY SERVICE	5,450
OHIO & ERIE CANALWAY COALITION 3800 EMBASS PARKWAY STE 300 AKRON, OH 44333	NONE	PC	TOWPATH TRAIL & CONNECTOR FUNDRAISER	100
OHIO FOUNDATION OF INDEPENDENT COLLEGES 250 E BROAD ST STE 1700 COLUMBUS, OH 432153722	NONE	PC	PROGRAMS AND SCHOLARSHIPS	500
PAN MASS CHALLENGE 50 GREEN PARK NEWTON, MA 02458	NONE	PC	RESEARCH	1,500
Total  3a				721,492

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
PEARLMAN MUSIC PROGRAM 19 WEST 69TH STREET STE 304 NEW YORK,NY 10023	NONE	PC	ARTS	500
PEREZ ART MUSEUM 1103 BISCAYNE BLVD MIAMI,FL 33130	NONE	PC	ARTS	1,000
PREGNANCY CARE 195 E TALLMADGE AVE AKRON,OH 44310	NONE	PC	COMMUNITY SERVICE	3,000
PROJECT MEDISHARE 8260 NE 2ND AVENUE MIAMI,FL 33138	NONE	MEDICAL	MEDICAL ASSISTANCE	25,000
REVERE ROAD SYNAGOGUE 646 N REVERE RD AKRON,OH 44333	NONE	PC	JEWISH COMMUNITY	1,800
SHAW JEWISH COMMUNITY CENTER 750 WHITE POND DRIVE AKRON,OH 44320	NONE	PC	JEWISH COMMUNITY	2,500
SMITHSONIAN AMERICAN ART MUSEUM (SAAM) 36 NE 1ST STREET SUITE 1046 MIAMI,FL 33132	NONE	PC	ARTS	1,000
STEPHEN A COMUNALE JR FAMILY CANCER FOUNDATION PO BOX 13805 AKRON,OH 44333	NONE	PC	CANCER SUPPORT	1,000
STEWART'S CARING PLACE 2955 W MARKET ST STE R AKRON,OH 44333	NONE	PC	CANCER SUPPORT	10,000
SUMMA HEALTH SYSTEM PO BOX 2090 AKRON,OH 44309	NONE	PC	MEDICAL SERVICES	25,000
SUSAN G KOMEN 3-DAY 732 DELAWARE AVENUE AKRON,OH 44303	NONE	PC	RESEARCH	2,000
TEMPLE ISRAEL 133 MERRIMAN RD AKRON,OH 44303	NONE	PC	JEWISH COMMUNITY	5,500
THE AMERICAN COMMITTEE WEIZMANN INSTITUE WEIZMANN INSTITUTE OF SCIENCE - 130 EAST 59TH ST NEW YORK,NY 10022	NONE	PC	CANCER RESEARCH	50,000
THE AMERICAN HEART ASSOCIATION C/O TOM LUCK LUCKY SHOES 2685 W MARKET STREET FAIRLAWN,OH 44333	NONE	PC	RESEARCH & EDUCATION	500
THE GATHERING PLACE 23300 COMMERCE PARK BEACHWOOD,OH 44122	NONE	PC	ANNUAL FUND, HEALTH & WELLNESS	65,500
Total  3a				721,492

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THEATRE ASPEN 110 E HALLAM ST STE 103 ASPEN,CO 81611	NONE	PC	ARTS	1,000
UNITED WAY OF SUMMIT COUNTY 90 N PROSPECT ST AKRON,OH 443091260	NONE	PC	COMMUNITY SERVICE	80,000
URBAN VISION PO BOX 1563 AKRON,OH 443091563	NONE	PUBLIC	COMMUNITY SERVICE	2,500
Total  3a				721,492

TY 2014 Accounting Fees Schedule

Name: BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN

EIN: 65-0230453

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,375	0		0
MANAGEMENT FEE - STRATEGIC PARTNERS	19,122	19,122		0

TY 2014 Investments - Other Schedule**Name:** BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN**EIN:** 65-0230453

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MORGAN STANLEY INVESTMENTS	FMV	9,351,143	9,351,143
LANDMARK PARTNERS INVESTMENT	FMV	271,356	257,232
STRATEGIC PARTNERS INVESTMENT	FMV	353,982	511,453

TY 2014 Other Decreases Schedule**Name:** BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN**EIN:** 65-0230453

Description	Amount
UNREALIZED GAIN (LOSS)	442,547
BOOK TO TAX DIFFERENCE - LANDMARK EQUITY INVESTMENT	4,644

TY 2014 Other Expenses Schedule**Name:** BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN**EIN:** 65-0230453

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DUES	350	0		0
INSURANCE	9,142	0		0
WORKERS COMPENSATION	237	0		0
POSTAGE & DELIVERY	25	0		0
INVESTMENT INTEREST EXPENSE (K-1)	2,361	2,361		0
OTHER INVESTMENT EXPENSES (K-1)	11,562	11,562		0
NONDEDUCTIBLE EXPENSES (K-1)	34	0		0

TY 2014 Other Income Schedule

Name: BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN

EIN: 65-0230453

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME FROM PASS-THROUGH ENTITIES	5,223	5,223	5,223
MISCELLANEOUS INCOME	828		828

TY 2014 Other Increases Schedule**Name:** BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN**EIN:** 65-0230453

Description	Amount
BOOK TO TAX DIFFERENCE - STRATEGIC PARTNERS INVESTMENT	15,403

TY 2014 Taxes Schedule**Name:** BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN**EIN:** 65-0230453

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE TAXES & FILING FEES	261	0		0
PAYROLL TAXES	4,973	0		0
FOREIGN TAX PAID	13	13		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.	OMB No 1545-0047 2014

Name of the organization BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN	Employer identification number 65-0230453
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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	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable 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 other 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 33¹/₃% 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number
65-0230453

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES BERLIN CHARITABLE LEAD ANNUIT 1795 BROOKWOOD DRIVE AKRON, OH 44313	\$ 1,282,262	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 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
		\$	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 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
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN	Employer identification number 65-0230453
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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
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____

Name of organization BERLIN FAMILY FOUNDATION INC CO JUDI ROMAN	Employer identification number 65-0230453
--	--

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		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, and 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, and 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, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	