#### DLN: 93491215007116

OMB No 1545-0052

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

Open to Public Inspection

Department of the Treasury ▶ Do not enter social security numbers on this form as it may be made public. Internal Revenue Service ▶ Information about Form 990-PF and its instructions is at  $\underline{www.irs.gov/form990pf}$ .

For	calen	ıdar year :	2015, or tax y	, aı	and ending 12-31-2015						
	e of found TTY LINDI	ndation ONER FOUNDATIO	ON IMA				A Employer id	entification numb	er		
Num	her and c	street (or P.O. h	eav number if mail is	not delivered to street address)	Room/suite		<b>B</b> Telephone nur	mber (see instruction	ns)		
		GOMERY RD	OX HUITIDEL II HIGH IS	not delivered to street address,	ROOM/ Suite		(216) 257-4714	· •			
		state or province OH 45212	e, country, and ZIP o	or foreign postal code	1		<b>C</b> If exemption	application is pendin	ng, check here 🕨 🦵		
<b>G</b> Ch	neck all		Initial return	Initial return of a fo	rmer public charity		<b>D.1</b> . Foreign or	rganizations, check h	ere 🕨 🗀		
			Final return	A mended return ge Name change				rganizations, check in	the 95%		
	1. 4		<u> </u>		*		test, chec	k here and attach co undation status was t	omputation 📮 📗		
				n 501(c)(3) exempt private ble trust				n 507(b)(1)(A), chec			
			assets at end	JAccounting method					h termination		
of y	year <i>(fr</i> o	om Part II, col		Other (specify)  (Part I, column (d) must b	no on cach hacis )			n 507(b)(1)(B), chec	. —		
		\$ 845,975		1	)e OII Casii Dasis.)			,			
Pai	rt I	(The total of a	amounts in columns i qual the amounts in c	and Expenses (b), (c), and (d) may not column (a) (see	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) Income	Disbursements for charitable purposes (d) (cash basis only)		
	1		•	etc , received (attach							
		schedule)									
	2	Check ► 🔽	if the foundation	ıs <b>not</b> required to attach							
		Sch B .									
	3	Interest on	savings and tem	porary cash investments							
	4	Dividends a	and interest from s	securities	17,433		17,433				
	5a	Gross rents		[							
	ь	Net rental ır	ncome or (loss) _								
<u>ф</u>	6a	Net gain or (	(loss) from sale (	of assets not on line 10	3,470						
Revenue	ь	Gross sales	s price for all asse 20,602	ets on line 6a							
<u>ن</u> ا	7	Capıtal gaın	ı net ıncome (fror	m Part IV, line 2)			3,470				
	8	Net short-te	erm capital gain					0			
	9	Income mod	difications								
	10a	allowances	less returns and								
	Ь		of goods sold .								
	С			nschedule)	o <del>5</del> 57						
	11			· L	741						
	12				21,644		20,903				
	13			rectors, trustees, etc					ļ		
_	14			d wages			0	0			
ěş.	15	·		nefits			0	0	0		
en.	16a								<u> </u>		
Expenses	b			edule)			2.215		ļ		
	С			ach schedule)	9,215		9,215		0		
Admını strative	17				-57				0		
īş	18	· ·			648		80		0		
	19			ile) and depletion	0		0				
됩	20	•									
and #	21		•	etings	101		0	0			
	22				191		0	0			
ju:	23				<b>%</b> 204		4		200		
Operating	24	-	_	trative expenses.	10,258		9,299	C	391		
<del>ဂ</del> ါ	25		_	paid	40,000		<del>-</del> ,		40,000		
	26			ments.Add lines 24 and	,						
		25	ses and dispurser	nents.Add lines 24 and	50,258		9,299	0	40,391		
	27		e 26 from line 12		20.614						
	a		-	enses and disbursements	-28,614		11.604				
	b		-	egative, enter - 0 - ) tive, enter - 0 - )			11,604				
	C	Aujusteu ne	st income(ii nega	tive, enter -0-)				<u> </u>	<u>'</u>		

Pa	rt 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 o  (b) Book Value	f year (c) Fair Market Value					
	1	Cash—non-interest-bearing	(a) Book Value	(D) DOOK Value	(c) i dii Plarket value					
	2	Savings and temporary cash investments	19,853	15,372	15,372					
	3	Accounts receivable -	13,000	10,0.12	10,0.12					
	3	Less allowance for doubtful accounts		0	0					
	4	Pledges receivable		0						
	4	Less allowance for doubtful accounts -								
	_	Grants receivable								
	5	Receivables due from officers, directors, trustees, and other								
	6	disqualified persons (attach schedule) (see instructions)								
	_									
	7	Other notes and loans receivable (attach schedule)								
ع	_	Less allowance for doubtful accounts 0								
	8	Inventories for sale or use								
Assets	9	Prepaid expenses and deferred charges								
Ą	10a	Investments—U S and state government obligations (attach schedule)								
	b	Investments—corporate stock (attach schedule)	150,080	369,826	<u> </u>					
	С	Investments—corporate bonds (attach schedule)	386,958	150,080	148,620					
	11	Investments—land, buildings, and equipment basis 🕨								
		Less accumulated depreciation (attach schedule) -								
	12	Investments—mortgage loans								
	13	Investments—other (attach schedule)			0					
	14	Land, buildings, and equipment basis 🕨								
		Less accumulated depreciation (attach schedule) 🟲								
	15	Other assets (describe 🟲)								
	16	<b>Total assets</b> (to be completed by all filers—see the								
		ınstructions Also, see page 1, item I)	556,891	535,278	845,975					
	17	Accounts payable and accrued expenses								
	18	Grants payable								
abilities	19	Deferred revenue								
틀	20	Loans from officers, directors, trustees, and other disqualified persons								
Liat	21	Mortgages and other notes payable (attach schedule)								
_	22	Other liabilities (describe 🟲)								
	23	Total liabilities(add lines 17 through 22)		0						
		Foundations that follow SFAS 117, check here 🕨 🦵								
Balances		and complete lines 24 through 26 and lines 30 and 31.								
ang	24	Unrestricted								
8	25	Temporarily restricted								
Ξ	26	Permanently restricted								
ΞĮ		Foundations that do not follow SFAS 117, check here 🕨 🔽								
or Fund		and complete lines 27 through 31.								
	27	Capital stock, trust principal, or current funds	556,891	535,278						
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund								
ď	29	Retained earnings, accumulated income, endowment, or other funds								
Net	30	Total net assets or fund balances(see instructions)	556,891	535,278						
-	31	Total liabilities and net assets/fund balances(see instructions)	556,891	535,278						
Pa	rt 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 agr	ee I I						
-		with end-of-year figure reported on prior year's return)			556,891					
2		Enter amount from Part I, line 27a			-28,614					
3		Other increases not included in line 2 (itemize)		<u>€</u> 3	7,001					
4		Add lines 1, 2, and 3		- <del>-</del>	535,278					
5		Decreases not included in line 2 (itemize)		5	0					
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P		-	535,278					

7

Add lines 5 and 6. . . . . . . . . . . . . . . .

the Part VI instructions

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

Part IV Capital Gains and Losses for Tax on Investment Income

	List and describe th  (a) 2-story brick wareho		How acquired P—Purchase (b) D—Donation	(6)	Date acquired mo , day, yr )			
1 a	200 THE JPMORGAN	ALERIAN	MLP INDEX ETN			_	11-08-17	2015-12-17
	300 LEGGETT & PLAT	TINC				20	13-03-26	2015-12-17
	CAPITAL GAIN DIVID	ENDS			Р			
d								
е								
	e) Gross sales price				or other basis expense of sale		n or (loss) (f) minus (g)	
а	4	,990			7,23	8		-2,248
b	13	,116			9,89	4		3,222
								2,496
d								
е								
Со	mplete only for assets sho	wing gain	ın column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gain minus
	FMV as of 12/31/69		Adjusted basis (j) as of 12/31/69	Exc	cess of col (ı) r col (ı), ıf any	(1)	ol (k), but no	ot less than -0-) <b>or</b> (from col (h))
a			(J) as of 12/31/03	(K) OVE	COI (J), II ally	1.,		-2,248
<u> </u>						+		3,222
								5,222
d e						-		
3	Net short-term capital (  If gain, also enter in Pain Part I, line 8	gaın or (los	ss) as defined in section		) ,	3		3,470
Part	V Oualification Un	der Sec	tion 4940(e) for R	educed Tax on	Net Investme		 ncome	
(For opt If section Was the If "Yes,	cional use by domestic privion 4940(d)(2) applies, lead to foundation liable for the solution does not	vate found ve this pa section 49 qualify und	ations subject to the sert blank 42 tax on the distributation section 4940(e)	ection 4940(a) tax able amount of any o not complete this	on net investment year in the base p part	: incom	ne )	┌ Yes ┌ No
1 E n	ter the appropriate amoun	t in each c	olumn for each year, se	ee instructions befo	ore making any en	tries		
	(a) period years Calendar or tax year beginning in)	Adjusted o	<b>(b)</b> Jualifying distributions	(c) Net value of nonchai	ritable-use assets		(d) Distribution (col (b) divided	n ratio
	2014		44,414		873,001			0 050875
	2013		39,883		788,356			0 05059
	2012		35,322		713,375			0 049514
	2011		32,813		693,767			0 047297
	Z010	47	25,355		654,906	<u>,                                    </u>		0 038715
2	Totalof line 1, column (					2		0 236991
3	A verage distribution rat the number of years the					3		0 047398
4	Enter the net value of n			•		4		888,913
5	Multiply line 4 by line 3					5		42,133
6	Enter 1% of net investr				<b> -</b>	6		116

Form **990-PF** (2015)

42,249

40,391

ĽŒL	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	74U(E),	UI 4340—SE	e page	= 10 OL	the ins	LIUCLIO	115)				
1a	Exempt operating foundations described in section 4940(d)(2), check here $ ightharpoonup$ and enter "N/A" on line 1	· [		)								
	Date of ruling or determination letter			ļ								
	(attach copy of letter if necessary-see instructions)			(								
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			J	1				232			
	here ► Tand enter 1% of Part I, line 27b			•								
С	All other domestic foundations enter $2\%$ of line $27b$ Exempt foreign organiza Part I, line $12$ , col (b)	itions e	enter 4% of									
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	idation	s only Othe	rs	2							
3												
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Othe	ers	4				0			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, en	nter - 0			5				232			
6	C redits/P ayments											
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		710								
b	Exempt foreign organizations—tax withheld at source	6b										
С	Tax paid with application for extension of time to file (Form 8868)	6c		0								
d	Backup withholding erroneously withheld	6d										
7	Total credits and payments Add lines 6a through 6d				7				710			
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here if Form 2	220 is	attached		8				0			
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	t overp	oaid	F	10				478			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	116	Refunded	F	11				362			
Pai	t VII-A Statements Regarding Activities											
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislatio	n or dı	d			Yes	No			
	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 p	olitica	l purposes (	see In	structi	ons						
	for definition)?					•	1b		No			
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any n	nateria	ls							
	published or distributed by the foundation in connection with the activities.											
	Did the foundation file <b>Form 1120-POL</b> for this year?					•	1c		No			
d	Enter the amount (If any) of tax on political expenditures (section 4955) impos			•								
	(1) On the foundation  \$\bigs\\$ (2) On foundation managers											
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	itical e	xpenditure t	ax ımp	osed							
_	on foundation managers 🕨 \$											
2	Has the foundation engaged in any activities that have not previously been rep	ported	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 it	_	_	-		5	_		Na			
4-	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo						3		No			
4a	Did the foundation have unrelated business gross income of \$1,000 or more did If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	_					4a 4b		No			
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction dui						5		No			
3	If "Yes," attach the statement required by General Instruction T.	ing the	e year				3		NO			
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45)ca	ticfied eithe	r								
•	By language in the governing instrument, or	73 / 3u	cisiica citiic	•								
	By state legislation that effectively amends the governing instrument so the	at no n	nandatory di	rectio	ns							
	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?					),						
	and Part XV.						7	Yes				
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)									
	<b>▶</b> ОН											
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attorr	ney								
	General (or designate) of each state as required by General Instruction G? $\it If$ '	"No," at	tach explana	tion .			8b	Yes				
9	Is the foundation claiming status as a private operating foundation within the n		-									
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (see	ee inst	ructions for	Part X	(IV)?							
	If "Yes," complete Part XIV						9		No			
10	Did any persons become substantial contributors during the tax year? If "Yes,"			_								
	and addresses.						10		No			

Par	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 ▶			
14	The books are in care of ▶PNC BANK NA Telephone no ▶(216	1257	-4714	
	Located at ▶PO BOX 94651 CLEVELAND OH ZIP+4 ▶4410146		.,	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here	• •		
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	i	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		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 🟲			
Par	t 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 V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes \( \backslash \) Yes			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? $ extstyle  ex$			
	(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 )			
Ь	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	41		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
_	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1.0		No
_	that were not corrected before the first day of the tax year beginning in 2015?	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 $4942(j)(5)$ )			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
u	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20			
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>▶</b> 20, 20, 20			
За	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.).	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 2015?	4b		No

Fel	Lt ATT-B	Statements Rega	arding Activities to	or wr	iich Form 4/20	мау	Be Required (Cont	inuea	)	
5a	During the	year did the foundation	n pay or incur any amo	unt to						
	<b>(1)</b> Carry	on propaganda, or othe	rwise attempt to influe	nce leg	ıslatıon (sectıon 49	45(e	)) <sup>?</sup>	√ No		
	(2) Influer	nce the outcome of any	specific public electio	n (see	section 4955), or to	car	ry			
	on, dir	ectly or indirectly, any	voter registration drive	≥?			\ Yes \	√ No		
	(3) Provid	e a grant to an individu	ial for travel, study, or (	others	ımılar purposes?		☐ Yes Ϝ	√ No		
	(4) Provid	e a grant to an organiza	ation other than a char	table,	etc , organızatıon de	scrib	ped			
	ın sect	tion 4945(d)(4)(A)? (se	ee instructions)				\ \ Yes \	√ No		
	(5) Provid	e for any purpose other	r than religious, charita	ble, sc	ientific, literary, or					
	educat	tional purposes, or for t	the prevention of cruelt	y to ch	ıldren or anımals?.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	√ No		
b	If any ans	werıs "Yes" to 5a(1)–(	(5), dıd <b>any</b> of the trans	actions	fail to qualify under	r the	exceptions described in			
	Regulation	ns section 53 4945 or i	ın a current notice rega	rding o	disaster assistance	(see	instructions)?	[	5b	
	O rganızatı	ions relying on a curren	nt notice regarding disa	steras	ssistance check her	e		-		
С	If the ansv	wer is "Yes" to questior	n 5a(4), does the found	ation c	laım exemption fron	n the				
	tax becaus	se it maintained expend	diture responsibility for	the gr	ant?		<b>T</b> Yes 「	- No		
	If "Yes," at	tach the statement requ	ured by Regulations sec	tion 53.	4945-5(d).					
6a	Did the fou	undation, during the yea	ar, receive any funds, d	ırectly	or indirectly, to pay	prer	miums on			
	a personal	l benefit contract?					Yes	√ No		
b	•						benefit contract?	. [	6b	No
	If "Yes" to	6b, file Form 8870.								
7a	At any tım	e during the tax year, v	was the foundation a pa	rty to a	a prohibited tax shel	lter t	ransaction?   Yes	√ No		
b	If yes, dıd	the foundation receive	any proceeds or have	any ne	t income attributable	e to t	the transaction?	. [	7b	
_		Information Abou	t Officers, Directo	rs, T	rustees, Founda	atio	n Managers, Highly	Paid	Empl	oyees,
		and Contractors			•					
1	List all offi	cers, directors, trustee	s, foundation manager	s and t	heir compensation (	see i		I		
			Title, and averag		Compensation( <b>If</b>		<b>(d)</b> Contributions to	F	vnense	account,
	(a) Nam	ne and address	hours per week (b) devoted to position		not paid, enter -0-)	е	mployee benefit plans			owances
			(b) devoted to position	"	-0-)	and	deferred compensation			
See	Additional E	Data Table								
			]							
			1							
2	Compensat	ion of five highest-paid	d employees (other tha	n thos	e included on line 1-	-see	instructions). If none, e	nter "N	ONE."	
		(a)	Title, and av	erade			Contributions to			
Nar	ne and addr	ress of each employee ;			(c) Compensation	on	employee benefit plans and deferred		•	account,
	more	e than \$50,000	(b) devoted to po	osition			(d) compensation	(e) <sup>0</sup>	ther an	lowances
NON	IE									
			<del> </del>							
Int-	I number of	other amployage haid o	AVAR & EA AAA					1		^

Form 990-PF (2015)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Higl	hly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NONE	" <u>.                                    </u>
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
<b>Total</b> 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 rel organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1	,	
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	•	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>P</b>

#### Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	902,450
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	902,450
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	902,450
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	13,537
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	888,913
6	Minimum investment return. Enter 5% of line 5	6	44,446
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► ☐ and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	44,446
2a	Tax on investment income for 2015 from Part VI, line 5 2a 232		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
С	Add lines 2a and 2b	2c	232
3	Distributable amount before adjustments Subtract line 2c from line 1	3	44,214
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	44,214
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	44,214
	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	40,391
	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	0
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	40,391
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	40,391
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	toundation qualifies for

Ρ	art XIII Undistributed Income (see insti	ructions)			
		(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	<b>(d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7				44,214
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			30,983	
Ь	Total for prior years 2013, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010 0				
b	From 2011 0				
c	From 2012 0				
d	From 2013 0				
е	From 2014 0				
f	Total of lines 3a through e				
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 40,391				
а	Applied to 2014, but not more than line 2a			30,983	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
c	Treated as distributions out of corpus (Election required—see instructions)		D.		
Ч	Applied to 2015 distributable amount				9,408
	Remaining amount distributed out of corpus		0		2,122
	Excess distributions carryover applied to 2015		0		0
_	(If an amount appears in column (d), the				
6	same amount must be shown in column (a).)  Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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)		0		
	tax has been previously assessed		Ů		
d	Subtract line 6c from line 6b Taxable amount —see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
_	instructions			O	
t	Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				34,806
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a		o O		
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012 0				
	Excess from 2013 0				
d	Excess from 2014 0				
е	Excess from 2015 0				

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	
	year listed					
<b>b</b> 8	35% 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					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	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					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	<b>Information Regarding Foundation Managers:</b> List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 40,000 **b** Approved for future payment

er gross amounts unless otherwise indicated	Ing Activitie	isiness income	Excluded by section	1512 513 or 514	(e)
	(a)	(b)	(c)	(d)	Related or exem function incom (See
Program service revenue	Business code	A mount	Exclusion code	A mount	instructions )
a					
b					
С					
d					
e f					
<b>g</b> Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	17,433	
Net rental income or (loss) from real estate			14	17,433	
a Debt-financed property					
<b>b</b> Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
inventory			18	3,470	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
Other revenue <b>a</b> <u>PRIOR YEAR REFUND</u>			1	741	
b с					
d					
<b>u</b>					
e					
eSubtotal Add columns (b), (d), and (e)				21,644	
eSubtotal Add columns (b), (d), and (e)  Total.Add line 12, columns (b), (d), and (e)			1	21,644 . <b>3</b>	L
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify	calculations )			.3	L
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to Explain below how each activity for which is the substitute of the su	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,64 ntly to
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,64 ntly to
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,64 ntly to
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify a line XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,64
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify a line XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,64
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify int XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,64
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify of the total columns.  Relationship of Activities to the second columns.  Explain below how each activity for whith the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify of the Taxvi-B Relationship of Activities to the Activity for whith the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify of the Taxvi-B Relationship of Activities to the Activity for whith the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify of the total columns.  Relationship of Activities to the second columns.  Explain below how each activity for whith the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify of the Taxvi-B Relationship of Activities to the Activity for whith the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify of the total columns.  Relationship of Activities to the second columns.  Explain below how each activity for whith the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify int XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify int XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify int XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify of the total columns.  Relationship of Activities to the second columns.  Explain below how each activity for whith the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify a line XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify a line XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify int XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify int XVI-B Relationship of Activities to the accomplishment of the foundation's	calculations)  o the Accomplication of the income is re	plishment of I	Exempt Purpos (e) of Part XVI-A co	es	21,6

Part	XVI	Information Re Noncharitable					sactions	and F	Relationships	With			
		rganization directly or ii	ndırectly (	engage i	n any of t	the following wi						V	NI-
		01(c) of the Code (other	r than se	ction 50	1(c)(3) o	organizations)	or in sectio	n 527,	relating to politic	al		Yes	No
_		ions?	dation to		م اطمعیت		intion of						
		s from the reporting four า									1a(1)		No
		erassets								-	1a(1) 1a(2)		No
` '		nsactions									1a(2)		NO
		s of assets to a noncha	ritable ev	emnt ord	nanizatior	n					1h(1)		No
		hases of assets from a								<u> </u>	1b(2)		No
		al of facilities, equipme								-	1b(3)		No
		nbursement arrangemen								-	1b(4)		No
		s or loan guarantees.								-	1b(5)		No
		mance of services or m								<b>I</b> -	1b(6)		No
		of facilities, equipment, i								-	1c		No
	_	wer to any of the above	_							_		ue	
	ny tra	ods, other assets, or se insaction or sharing arra (b) Amount involved	angement	, show ir	n column		of the goods	s, other		ces received	d		nte
(a) Line	NO	(b) Amount involved	(C) Name	OI HOHCIA	antable exe	empt organization	(d) De	scription	or transiers, transact	ions, and shan	iliy alla	ilgerrier	11.5
<b>3</b> - 7- 4	l	d. b d bl d.			<u> </u>								
des	cribe	indation directly or indi d in section 501(c) of th complete the following : (a) Name of organization	ne Code (d schedule		an section		rın section			otion of relation	. ┌Ye	s F	No
Sign	the	der penalties of perjury, best of my knowledge a rmation of which prepar	nd belief,	ıt ıs tru	e, correct						ıs bas	ed on	all
Here		*****				2016-07-15	*	****		return with the			
		Signature of officer or t	rustee			Date	, ,	ıtle		below (see ins	str)?🗸	Yes T	10
		Print/Type preparer's JOHN R KULLANDE		Prepar	er's Sıgn	ature	Date 2016-0	7-15	Check if self- employed ►	PTIN PO	00473	35	
Paid Prepa Use	arer								Firm's EIN ► 2	2-1146430	)		
-		Firm's address ► 620 LIBERTY AVENU 152222705	E 10TH F	FLOORF	Pıttsburgl	h, PA			Phone no (216	)257-4714	4		

# Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

- Compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOLIE FOSTER-BERMAN	TRUSTEE	0		
4171 MARCASEL AVENUE LOS ANGELES, CA 90066	1			
PHYLLIS MCCOY	SECRETARY &	0		
3955 MONTGOMERY RD CINCINNATI,OH 45212	TRUSTEE 1			
JILL BOLDT	PRESIDENT & TRUSTEE	0		
132 WILDCAT LANE BOLDER,CO 80304				
TRISHA FLYNN	TRUSTEE	0		
778 LINDEN BOLDER,CO 80304	1			
ROBERT D LINDER III	TRUSTEE	0		
1624 HILDA AVENUE MISSOULA,MT 59801	1			
LEELA LINDER	TRUSTEE	0		
2418 3RD AVE APT A SANTA MONICA, CA 90405	1			

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

		<b>-</b>		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CONERSVATION INTERNATIONAL 2011 CRYSTAL DRIVE ARLINGTON,VA 22202	N/A	PUBLIC	GENERAL SUPPORT	275
AMERICAN HIMALAYAN FOUNDATION 909 MONTGOMERY ST SAN FRANCISCO,CA 94133	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
CORAL REEF ALLIANCE 351 CALIFORNIA ST SAN FRANCISCO,CA 94104	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
SIERRA CLUB FOUNDATION 85 SECOND ST SAN FRANCISCO,CA 94105	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
AMERICAN RED CROSS PO BOX 27243 WASHINGTON,DC 20013	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
HAWAII WILDLIFE FUND PO BOX 790637 PALA,HI 96779	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
EDUCATION OUTSIDE 135 VAN NESS AVE ROOM 408 SAN FRANCISCO,CA 94102	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
NATIONAL GEOGRAPHIC SOCIETY 1145 17TH STREET NW WASHINGTON,DC 20036	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
WORLD WILDLIFE FUND 1250 24TH STREET WASHINGTON,DC 20037	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
WILLIAM J CLINTON FOUNDATION 55 WEST 125TH ST NEW YORK,NY 10027	N/A	PUBLIC CHARITY	GENERAL SUPPORT	275
WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BLVD BRONX,CA 10460	N/A	PUBLIC CHARITY	GENERAL SUPPORT	250
PRO KIDS CINCINNATI 2605 BUMET AVENUE CINCINNATI,CA 45219	N/A	PUBLIC CHARITY	GENERAL SUPPORT	1,000
CINCINNATI THERAPEUTIC RIDING & HORSEMAN 1342 STATE ROUTE 50 MIDFORD,OH 45150	N/A	PUBLIC CHARITY	GENERAL SUPPORT	1,000
PLANNED PARENTHOOD OF S W OHIO 2314 AUBURN AVE CINCINNATI,OH 45219	N/A	PUBLIC CHARITY	GENERAL SUPPORT	1,000
INTER PARISH MINISTRY 3509 DETROIT ROAD CINCINNATI,OH 45244	N/A	PUBLIC CHARITY	GENERAL SUPPORT	1,500

#### 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	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BOYS AND GIRLS CLUB OF GREATER CINCINNA 600 DALTON AVENUE CINCINNATI,OH 45203	N/A	PUBLIC CHARITY	GENERAL SUPPORT	1,500
CLERMONT COUNTY HUMANE SOCIETY 4025 FILAGER ROAD BATAVIA,OH 45103	N/A	PUBLIC CHARITY	GENERAL SUPPORT	1,500
GLENDALE HUMANE SOCIETY 717 WIVY STREET GLENDALE,CA 91204	N/A	PUBLIC CHARITY	GENERAL SUPPORT	1,500
HBS FOUNDATION PO BOX 32446 WEST PALM BEACH,FL 33420	N/A	PUBLIC CHARITY	GENERAL SUPPORT	4,000
WORLD CONCERN PO BOX 33000 SEATTLE,WA 98133	N/A	PUBLIC CHARITY	GENERAL SUPPORT	2,000
ALZHEIMERS ASSOC OF GREATER CINCINNATI 644 LINN STREET SUITE 1026 CINCINNATI,OH 45203	N/A	PUBLIC CHARITY	GENERAL SUPPORT	2,000
NATURE CONSERVANCY OF OHIO 6375 RIVERSIDE DR SUITE 100 DUBLIN,OH 43017	N/A	PUBLIC CHARITY	GENERAL SUPPORT	2,000
CRAYONS TO COMPUTERS 1350 TENNESSEE AVENUE CINCINNATI,OH 45229	N/A	PUBLIC CHARITY	GENERAL SUPPORT	5,000
LITTLE MIAMI INC 6040 PRICE ROAD MIOFORD,OH 45150	N/A	PUBLIC CHARITY	GENERAL SUPPORT	2,000
CINCINNATI NATURE CENTER 4949 TEALTOWN ROAD MILFORD,OH 45150	N/A	PUBLIC CHARITY	GENERAL SUPPORT	2,000
HOSPICE OF CINCINNATI 4360 COOPER ROAD CINCINNATI,OH 45252	N/A	PUBLIC CHARITY	GENERAL SUPPORT	5,000
DELTA DELTA PO BOX 5987 ARLINGTON,TX 76005	N/A	PUBLIC CHARITY	GENERAL SUPPORT	1,000
TEEN CHALLENGE 1455 HIGHWAY 50 MILFORD,OH 45150	N/A	PUBLIC CHARITY	GENERAL SUPPORT	3,000

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### **TY 2015 Other Expenses Schedule**

Name: BETTY LINDNER FOUNDATION IMA

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEES	200	0		200
ADR SERVICE FEES	4	4		0

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#### **TY 2015 Other Income Schedule**

Name: BETTY LINDNER FOUNDATION IMA

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PRIOR YEAR REFUND	741	0	

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#### **TY 2015 Other Increases Schedule**

Name: BETTY LINDNER FOUNDATION IMA

Description	Amount
ROUNDING ADJUSTMENT	1
IN TRANSIT CURRENT YEAR	7,000

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#### **TY 2015 Other Professional Fees Schedule**

Name: BETTY LINDNER FOUNDATION IMA

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CUSTODIAN & MANAGEMENT FEES (A	9,215	9,215		

#### **TY 2015 Taxes Schedule**

Name: BETTY LINDNER FOUNDATION IMA

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	80	80		0
FEDERAL ESTIMATES - PRINCIPAL	568	0		0