

Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

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

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation ANNABELLE FOUNDATION		A Employer identification number 20-5184989	
Number and street (or P O box number if mail is not delivered to street address) 1901 SAINT ANTOINE ST FLOOR 6		B Telephone number (see instructions) (313) 393-7552	
City or town, state or province, country, and ZIP or foreign postal code DETROIT, MI 48226		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐	
Initial return of a former public charity ☐ Amended return ☐ Name change ☐		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 7,358,855		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))		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	250,000			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	193,025	193,025		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	173,503			
	b Gross sales price for all assets on line 6a 2,327,172				
	7 Capital gain net income (from Part IV, line 2) . . .		173,503		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total.Add lines 1 through 11	616,528	366,528		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	3,675	1,838		
	c Other professional fees (attach schedule)	70,756	70,756		
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	2,135	2,135		
	19 Depreciation (attach schedule) and depletion . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	484			
	24 Total operating and administrative expenses. Add lines 13 through 23	77,050	74,729		0
	25 Contributions, gifts, grants paid	392,875			392,875
	26 Total expenses and disbursements.Add lines 24 and 25	469,925	74,729		392,875
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	146,603			
	b Net investment income (if negative, enter -0-)		291,799		
	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	7,102	7,754	7,754
	2	Savings and temporary cash investments	268,414	423,318	423,318
	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)	1,920,438	2,253,554	4,051,142
	c	Investments—corporate bonds (attach schedule)	2,464,224	2,524,740	2,454,446
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans.			
	13	Investments—other (attach schedule)	827,100	425,000	419,530
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)	3,150	2,665	2,665	
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	5,490,428	5,637,031	7,358,855	
Liabilities	17	Accounts payable and accrued expenses			
	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)		0	
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	5,490,428	5,637,031	
	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)	5,490,428	5,637,031	
	31	Total liabilities and net assets/fund balances(see instructions)	5,490,428	5,637,031	

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)	1	5,490,428
2	Enter amount from Part I, line 27a	2	146,603
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	5,637,031
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	5,637,031

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	PUBLICLY TRADED SECURITIES	P		
b	PUBLICLY TRADED SECURITES	P		
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 749,265		796,354	-47,089
b 1,502,448		1,357,315	145,133
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			-47,089
b			145,133
c			
d			
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	173,503
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))
2014	233,075	7,295,119	0 031949
2013	363,200	7,117,584	0 051029
2012	69,850	6,632,677	0 010531
2011	169,926	6,092,590	0 027891
2010	120,454	1,643,220	0 073304

2	Total of line 1, column (d).	2	0 194704
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 038941
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	7,415,753
5	Multiply line 4 by line 3.	5	288,777
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	2,918
7	Add lines 5 and 6.	7	291,695
8	Enter qualifying distributions from Part XII, line 4.	8	392,875

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
Date of ruling or determination letter _____
(attach copy of letter if necessary—see instructions)

b

Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b

c

All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).

3

Add lines 1 and 2.

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).

5

Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

20,327

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.

8

Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.

9

Tax due. If the total of lines 5 and 8 is more than line 7, enter **amount owed**

10

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**.

11

Enter the amount of line 10 to be **Credited to 2015 estimated tax** ☒ 17,409 **Refunded** ☒

1	2,918
2	
3	2,918
4	
5	2,918
6	
7	20,327
8	
9	
10	17,409
11	

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)?
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.

1b

No

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 ☒ \$ _____ (2) On foundation managers ☒ \$ _____

e

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☒ \$ _____

2

Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

2

No

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?
If "Yes," attach the statement required by General Instruction T.

5

No

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):
☒ MI _____

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 2015 or the taxable year beginning in 2015 (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

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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? Website address ▶N/A	13	Yes	
14	The books are in care of ▶ANTHONY CRACCHIOLO Telephone no ▶(313) 393-7552 Located at ▶1901 ST ANTOINE 6TH FLOOR DETROIT MI ZIP+4 ▶48226			
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 2015, 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? 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 ▶	16	Yes	No

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 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))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? ☐ 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 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</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 2015?	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)?

☐ Yes ☒ No

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?

☐ Yes ☒ 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?

5b

6b

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	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
ANTHONY P CRACCHIOLO 1901 ST ANTOINE ST FLR 6 DETROIT, MI 48226	PRES-SEC-TRE 1 00	0	0	0
JAY B COLVIN 1901 ST ANTOINE FLR 6 DETROIT, MI 48226	PRES-SEC-TRE 1 00	0	0	0
ROBERT W FISHER 2275 STATE ROUTE 59 KENT, OH 44240	DIRECTOR 1 00	0	0	0
SANDRA K CAMPBELL 27400 NORTHWESTERN HWY SOUTHFIELD, MI 48037	DIRECTOR 1 00	0	0	0

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	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000.

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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
PLANTE MORAN TRUST	INVESTMENT MGT	70,756
27400 NORTHWESTERN HWY		
SOUTHFIELD,MI 48034		
Total number of others receiving over \$50,000 for professional services.		

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	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 the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3.	

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	7,400,850
b	Average of monthly cash balances.	1b	124,926
c	Fair market value of all other assets (see instructions).	1c	2,907
d	Total (add lines 1a, b, and c).	1d	7,528,683
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	7,528,683
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	112,930
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	7,415,753
6	Minimum investment return. Enter 5% of line 5.	6	370,788

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	370,788
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	2,918
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	2,918
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	367,870
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	367,870
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	367,870

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	392,875
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	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	392,875
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	2,918
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	389,957

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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				367,870
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010. 4,941				
b From 2011.				
c From 2012.				
d From 2013. 17,502				
e From 2014.				
f Total of lines 3a through e.	22,443			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 392,875				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				367,870
e Remaining amount distributed out of corpus	25,005			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	47,448			
b Prior years' undistributed income Subtract line 4b from line 2b.				
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.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .	4,941			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	42,507			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013. 17,502				
d Excess from 2014.				
e Excess from 2015. 25,005				

Part XIV

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . ▶

Check box to indicate whether the organization is a private operating foundation described in section 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

• 85% of line 2a

Qualifying distributions from Part XII,
line 4 for each year listed

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

"Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying
under section 4942(j)(3)(B)(i)

• "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

(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

[illegible]

Part XV **Supplementary 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:

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))

• 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 email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

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	392,875
b Approved for future payment				
Total			3b	

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments.					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities. . . .			14	193,025	
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory			18	173,503	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e). . .				366,528	
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13		366,528

[illegible]

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?

(1) Cash.

(2) Other assets.

- (1)** Sales of assets to a noncharitable exempt organization.
- (2)** Purchases of assets from a noncharitable exempt organization.
- (3)** Rental of facilities, equipment, or other assets.
- (4)** Reimbursement arrangements.
- (5)** Loans or loan guarantees.
- (6)** Performance of services or membership or fundraising solicitations.

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.

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

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

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.

***** 2016-08-15 *****

Signature of officer or trustee Date Title

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

Print/Type preparer's name ROBERT W FISHER CPA	Preparer's Signature	Date 2016-10-12	Check if self-employed ☒	PTIN P00358676
Firm's name ☒ SCHLABIG & ASSOCIATES LTD			Firm's EIN ☒	34-0876435
Firm's address ☒ 2275 STATE ROUTE 59 KENT, OH 442407143			Phone no ☒	(330) 678-5203

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				
ADOPT A PLATOON ADOPT A PLATOON PO BOX 5038 PO BOX 5038 HAGERSTOWN,MD 217415038	NONE	PC	GRANT TO SUPPORT TROOPS	5,000
ADRIAN COLLEGE ENDOW FUND ADRIAN COLLEGE ENDOW FUNE 110 SOUTH MADISON 110 SOUTH MADISON ADRIAN,MI 49221	NONE	PC	CHRIS MOMEY FUND FOR SPEC ASSISTANCE	100,000
AFS INTERCULTURAL PROGRAMS AFS INTERCULTURAL PROGRAMS ONE WHITEHALL ST 2ND FLR ONE WHITEHALL S 2ND FL NEW YORK,NY 10004	NONE	PC	SUPPORT OF DIVERSITY	1,000
AKRON CHILDREN'S HOSPITAL FOUNDATIO AKRON CHILDREN'S HOSPITAL FOUNDATION ONE PERKINS SQUARE ONE PERKINS SQUARE AKRON,OH 443986176	NONE	PC	SUPPORT CHILDREN SERVICES	500
AKRON WOMAN'S CITY CLUB AKRON WOMAN'S CITY CLUB 732 WEST EXCHANGE ST 732 WEST EXCHANGE ST AKRON,OH 44302	NONE	PC	LASTING IMPACT FUND	100,000
ALICE LLOYD COLLEGE ALICE LLOYD COLLEGE 100 PURPOSE ROAD 100 PURPOSE ROAD PIPPA PASSES,KY 41844	NONE	PC	COLLEGE FUND	5,000
ALZHEIMER'S ASSOCIATION ALZHEIMER'S ASSOCIATION 70 W STREETSBORO ST 70 W STREETSBORO ST HUDSON,OH 44236	NONE	PC	GENERAL SUPPORT	50
AMERICAN CANCER SOCIETY AMERICAN CANCER SOCIETY 3500 EMBASSY PKY 150 3500 EMBASSY PKY 150 FAIRLAWN,OH 44333	NONE	PC	AKRON DRIVE	50
AMERICAN HEALTH ASST FOUNDATION AMERICAN HEALTH ASST FOUNDATION 22512 GATEWAY CENTER DR 22512 GATEWAY CENTER DR CLARKSBURG,MD 20871	NONE	PC	MACULAR DEGENERATION RESEARCH	500
AMERICAN INDIAN COLLEGE FUND AMERICAN INDIAN COLLEGE FUND 8333 GREENWOOD BLVD 8333 GREENWOOD BLVD DENVER,CO 80221	NONE	PC	GENERAL FUND FOR SCHOLARSHIPS	1,500
AMERICAN INDIAN EDUCATION FOUN AMERICAN INDIAN EDUCATION FOUNDATION PO BOX 27491 PO BOX 27491 ALBUQUERQUE,NM 871259847	NONE	PC	EDUCATION ADVANCEMENT	1,000
AMERICAN KIDNEY FUND AMERICAN KIDNEY FUND 11921 ROCKVILLE PIKE 11921 ROCKVILLE PIKE ROCKVILLE,MD 20852	NONE	PC	MEDICAL RESEARCH	250
AMERICAN LEGION AMERICAN LEGION PO BOX 21016 PO BOX 21016 TULSA,OK 741211016	NONE	PC	SUPPORT WOUNDED/DISABLED VETERANS	100
ASPCA ASPCA PO BOX 96929 PO BOX 96929 WASHINGTON,DC 200906929	NONE	PC	GENERAL FUND	100
BATH TOWNSHIP HISTORICAL SOCIETY BATH TOWNSHIP HISTORICAL SOCIETY 1241 N CLEVE-MASS RD 1241 N CLEVE-MASS RD AKRON,OH 44333	NONE	PC	PRESERVATION OF HISTORY	250
Total  3a				392,875

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				
BLINDED VETERANS ASSOC BLINDED VETERANS ASSOC 477 H STREET NW 477 H STREET NW WASHINGTON,DC 20001	NONE	PC	HELPING DISABLED VETERANS	500
BRAILLE INSTITUTE BRAILLE INSTITUTE 741 NORTH VERMONT AVE 741 NORTH VERMONT AVE LOS ANGELES,CA 900299988	NONE	PC	GENERAL SUPPORT	250
CAL FARLEY'S CAL FARLEY'S 600 W 11TH 600 W 11TH AMARILLO,TX 791013228	NONE	PC	PROMOTE FAMILY SERVICES	2,200
COALITION TO SALUTE AMERICA HEROS COALITION TO SALUTE AMERICA HEROS PO BOX 96440 PO BOX 96440 WASHINGTON,DC 200906440	NONE	PC	TO HONOR VETERANS	4,000
COLONIAL WILLIAMSBURG COLONIAL WILLIAMSBURG FOUNDATION PO BOX 1776 PO BOX 1776 WILLIAMSBURG,VA 23187	NONE	PC	HISTORICAL PRESERVATION	1,000
CONCERNED WOMEN FOR AMERICA CONCERNED WOMEN FOR AMERICA PO BOX 6115 PO BOX 6115 PUEBLO,CO 810087002	NONE	PC	GENERAL FUND	200
CULVER-STOCKTON COLLEGE CULVER-STOCKTON COLLEGE 1 COLLEGE HILL 1 COLLEGE HILL CANTON,MO 63435	NONE	PC	WOMEN'S EDUCATION	100,000
COUNCIL OF INDIAN NATIONS COUNCIL OF INDIAN NATIONS PO BOX 1800 PO BOX 1800 APACHE JUNCTION,AZ 851179981	NONE	PC	GENERAL FUND	3,000
DISABLED VETERANS NATL FOUND DISABLE VETERANS NATL FOUND 1634 EYE ST NW STE 750 1634 EYE ST NW STE 750 WASHINGTON,DC 20006	NONE	PC	TO SUPPORT WAR VETERANS	600
DOCTORS WITHOUT BORDERS DOCTORS WITHOUT BORDERS PO BOX 5022 PO BOX 5022 HAGERSTOWN,MD 21741	NONE	PC	MEDICAL HELP	1,000
GEORGE WASHINGTON MT VERN GEORGE WASHINGTON MT VERNON PO BOX 1594 PO BOX 1594 MERRIFIELD,VA 22116	NONE	PC	HISTORICAL PRESERVATION	4,000
GUIDE DOG FOUNDATION FOR THE BLIND GUIDE DOG FOUNDATION FOR THE BLIND 371 E JERICHO TURNPIKE 371 E JERICHO TURNPIKE SMITHTOWN,NY 11787	NONE	PC	TRAIN DOGS FOR THE BLIND	1,000
GUIDEPOSTS FOUNDATION GUIDEPOSTS FOUNDATION 39 OLD RIDGEBURY RD 39 OLD RIDGEBURY RD DANBURY,CT 06810	NONE	PC	GENERAL FUND	100
GUIDING EYES FOR THE BLIND GUIDING EYES FOR THE BLIND 611 GRANITE SPRINGS RD 611 GRANITE SPRINGS RD YORKTOWN HGTS,NY 10598	NONE	PC	TO HELP VISUALLY IMPAIRED	2,500
HELEN KELLER INTERNATIONAL HELEN KELLER INTERNATIONAL 352 PARK AVE SOUTH 12FL 352 PARK AVE SOUTH 12F NEW YORK,NY 10010	NONE	PC	HELP FOR DISABLED	1,200
Total  3a				392,875

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>				
HELP ME SEE HELP ME SEE 20 WEST 36TH ST FLR 4 20 WEST 36TH ST FLR 4 NEW YORK,NY 10018	NONE	PC	TO HELP THE BLIND	500
HOSPICE SUPPORT FUND HOSPICE SUPPORT FUND 403 MURFREESBORO PIKE 403 MURFREESBORO PIKE NASHVILLE,TN 37210	NONE	PC	GENERAL SUPPORT	100
HUMANE SOCIETY OF THE UNITED STATES HUMANE SOCIETY OF THE UNITED STATES 2100 L ST NW 2100 L ST NW WASHINGTON,DC 20037	NONE	PC	SUPPORT OF ANIMALS	100
HUMANE SOCIETY OF GREATER AKRON HUMANE SOCIETY OF GREATER AKRON 7996 DARROW ROAD 7996 DARROW ROAD TWINSBURG,OH 44087	NONE	PC	GENERAL FUND	200
INTERNATIONAL EYE FOUNDATION INTERNATIONAL EYE FOUNDATION 10801 CONNECTICUT AVE 10801 CONNECTICUT AVE KENSINGTON,MD 20895	NONE	PC	TO HELP THE BLIND	500
JANE GOODALL INTL INSTITUTE JANE GOODALL INTL INSTITUTE PO BOX 620429 PO BOX 620429 ATLANTA,GA 303622429	NONE	PC	PRESERVATION OF ANIMALS AND HABITATS	2,000
KIDS WISH NETWORK KIDS WISH NETWORK 4060 LOUIS AVE 4060 LOUIS AVE HOLIDAY,FL 34691	NONE	PC	SUPPORT FOR ILL CHILDREN	100
LEAGUE OF WOMEN VOTERS LEAGUE OF WOMEN VOTERS PO BOX 98050 PO BOX 98050 WASHINGTON,DC 200908050	NONE	PC	EDUCATION FUND	100
LIGHTHOUSE INTERNATIONAL LIGHTHOUSE INTERNATIONAL PO BOX 17 PO BOX 17 NEW YORK,NY 102750430	NONE	PC	SUPPORT FOR THE BLIND	450
MACULAR DEGENERATION ASSOC MACULAR DEGENERATION ASSOC 5969 CATTLERIDGE BLVD 5969 CATTLERIDGE BLVD SARASOTA,FL 34232	NONE	PC	GENERAL RESEARCH FUND	500
MADD MADD PO BOX 758521 PO BOX 758521 TOPEKA,KS 66675	NONE	PC	SUPPORT FOR VICTIMS OF DRUNK DRIVERS	200
MAKE-A-WISH FOUNDATION OF OH KY MAKE-A-WISH FOUNDATION OF OH KY PO BOX 97104 PO BOX 97104 WASHINGTON,DC 200907104	NONE	PC	TO SUPPORT TERMINALLY ILL	1,000
MARINE TOYS FOR TOTS FOUNDATION MARINE TOYS FOR TOTS FOUNDATION PO BOX 227 PO BOX 227 QUANTICO,VA 22134	NONE	PC	GENERAL FUND	500
MT ZWINGLI CHURCH MT ZWINGLI CHURCH 2172 S MEDINA LINE RD 2172 S MEDINA LINE RD WADSWORTH,OH 44281	NONE	PC	DR HUDSON FUND/BLDG FUND	5,000
NATIONAL AUDUBON SOCIETY NATIONAL AUDUBON SOCIETY 225 VARICK ST 225 VARICK ST NEW YORK,NY 10014	NONE	PC	TO SUPPORT WILDLIFE	100
Total			3a	392,875

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>				
NATIONAL GEOGRAPHIC SOCIETY NATIONAL GEOGRAPHIC SOCIETY 1145 17TH ST NW 1145 17TH ST NW WASHINGTON,DC 20090	NONE	PC	GENERAL FUND	100
NATIONAL GLAUCOMA RESEARCH NATIONAL GLAUCOMA RESEARCH 251 POST ST SUITE 600 251 POST ST SUITE 600 SAN FRANCISCO,CA 94108	NONE	PC	EYE DISEASE RESEARCH	100
NATL LAW ENFORC OFF MEMORIAL FUND NATL LAW ENFORC OFF MEMORIAL FUND 901 E ST NW STE 100 901 E ST NW STE 100 WASHINGTON,DC 200042025	NONE	PC	GENERAL FOR MEMORIALS	100
NATIVE AMERICAN AID NATIVE AMERICAN AID 16415 ADDISON ROAD 16415 ADDISON ROAD ADDISON,TX 75001	NONE	PC	GENERAL SUPPORT	250
NATIVE AMERICAN HERITAGE ASSOC NATIVE AMERICAN HERITAGE ASSOC 830-F JOHN MARSHALL HWY 830-F JOHN MARSHALL HWY FRONT ROYAL,VA 22630	NONE	PC	GENERAL SUPPORT	250
NAVAJO RELIEF FUND NAVAJO RELIEF FUND 16415 ADDISON ROAD 16415 ADDISON ROAD ADDISON,TX 75001	NONE	PC	GENERAL SUPPORT	200
OPERATION SMILE OPERATION SMILE PO BOX 5017 PO BOX 5017 HAGERSTOWN,MD 217419716	NONE	PC	GENERAL FUND	5,000
PARALYZED VETERANS OF AMERICA PARALYZED VETERANS OF AMERICA PO BOX 758532 PO BOX 758532 TOPEKA,KS 666759910	NONE	PC	TO HELP VETERANS	1,000
PROJECT HOPE PROJECT HOPE 255 CARTER HALL LANE 255 CARTER HALL LANE MILLWOOD,VA 226460255	NONE	PC	GENERAL FUND	600
READING IS FUNDAMENTAL READING IS FUNDAMENTAL 1730 RHODE ISLAND AVE NW 1730 RHODE ISLAND AVE NW WASHINGTON,DC 20036	NONE	PC	TO SUPPORT EDUCATION	250
SALVATION ARMY-SUMMIT SALVATION ARMY-SUMMIT PO BOX 1959 PO BOX 1959 AKRON,OH 44309	NONE	PC	COMMUNITY SUPPORT	5,000
SHRINERS HOSP FOR CHILDREN SHRINERS HOSPITAL FOR CHILDREN 3229 BURNET AVE 3229 BURNET AVE CINCINNATI,OH 45229	NONE	PC	CHILDRENS FUND	10,000
SIOUX NATION RELIEF FUND SIOUX NATION RELIEF FUND PO BOX 758513 PO BOX 758513 TOPEKA,KS 666759867	NONE	PC	GENERAL FUND	500
SOLDIER'S ANGELS SOLDIER'S ANGELS PO BOX 758513 PO BOX 758513 TOPEKA,KS 666759910	NONE	PC	TO SUPPORT VETERANS	1,000
SPCA INTERNATIONAL SPCA INTERNATIONAL PO BOX 92240 PO BOX 92240 WASHINGTON,DC 200902240	NONE	PC	GENERAL FUND	275
Total			3a	392,875

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>				
ST JOSEPH'S INDIAN SCHOOL ST JOSEPH'S INDIAN SCHOOL PO BOX 300 PO BOX 300 CHAMBERLAIN,SD 573250300	NONE	PC	PROMOTE EDUCATION	2,000
ST LABRE INDIAN SCHOOL ST LABRE INDIAN SCHOOL ST LABRE INDIAN SCHOOL ST LABRE INDIAN SCHOOL ASHLAND,MT 590041001	NONE	PC	EDUCATION	1,250
SW INDIAN RELIEF COUNCIL SW INDIAN RELIEF COUNCIL PO BOX 16777 PO BOX 16777 MESA,AZ 852119963	NONE	PC	COMMUNITY SUPPORT	500
THE USO THE USO PO BOX 96860 PO BOX 96860 WASHINGTON,DC 20077	NONE	PC	SUPPORT FOR AMERICAN TROOPS	5,000
UMRC HERITAGE FOUNDATION UMRC HERITAGE FOUNDATION 805 WEST MIDDLE ST 805 WEST MIDDLE ST CHELSEA,MI 48118	NONE	PC	CHELSEA RETIREMENT CENTER	5,000
US OLYMPIC COMMITTEE US OLYMPIC COMMITTEE PO BOX 7010 PO BOX 7010 ALBERT LEA,MN 56007	NONE	PC	SUPPORT US OLYMPIC ATHLETES	500
USA SHOOTING TEAM USA SHOOTING TEAM ONE OLYMPIC PLAZA ONE OLYMPIC PLAZA COLORADO SPRINGS,CO 80909	NONE	PC	TO SUPPORT OLYMPICS	100
VOLUNTEERS OF AMERICA GREATER OH VOLUNTEERS OF AMERICA GREATER OH PO BOX 5230 PO BOX 5230 CLEVELAND,OH 441010230	NONE	PC	GENERAL SUPPORT	100
WORLD WILDLIFE FUND WORLD WILDLIFE FUND 1250 TWENTY FOURTH ST NW 1250 TWENTY FOURTH ST NW WASHINGTON,DC 20077	NONE	PC	GENERAL SUPPORT FOR PRESERVATION	100
WOUNDED WARRIOR PROJECT WOUNDED WARRIOR PROJECT PO BOX 758516 PO BOX 758516 TOPEKA,KS 66675	NONE	PC	HELPING DISABLED VETERANS	5,000
WYCLIFFE ASSOCIATES WYCLIFFE ASSOCIATES PO BOX 620143 PO BOX 620143 ORLANDO,FL 32862	NONE	PC	GENERAL FUND	500
Total  3a				392,875

TY 2015 Accounting Fees Schedule

Name: ANNABELLE FOUNDATION

EIN: 20-5184989

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,675	1,838		

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Amortization Schedule

Name: ANNABELLE FOUNDATION

EIN: 20-5184989

Description of Amortized Expenses	Date Acquired, Completed, or Expended	Amount Amortized	Deduction for Prior Years	Amortization Method	Current Year Amortization	Net Investment Income	Adjusted Net Income	Total Amount of Amortization
AMORTIZATION OF ORGANIZATION COSTS	2006-07-01	7,268	4,121	180 0000	484			4,605

TY 2015 Investments Corporate Bonds Schedule

Name: ANNABELLE FOUNDATION

EIN: 20-5184989

Name of Bond	End of Year Book Value	End of Year Fair Market Value
MUTUAL FIXED FUNDS	2,524,740	2,454,446

TY 2015 Investments Corporate Stock Schedule**Name:** ANNABELLE FOUNDATION**EIN:** 20-5184989

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MUTUAL FUND INTNL EQUITY	1,544,044	1,482,235
MUTUAL EQUITY FUNDS	680,710	960,797
COMMON STOCK	28,800	1,608,110

TY 2015 Investments - Other Schedule

Name: ANNABELLE FOUNDATION

EIN: 20-5184989

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS-ALTERNATIVE	AT COST	425,000	419,530

TY 2015 Other Assets Schedule

Name: ANNABELLE FOUNDATION

EIN: 20-5184989

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ORGANIZATION COST, NET	3,150	2,665	2,665

TY 2015 Other Professional Fees Schedule

Name: ANNABELLE FOUNDATION

EIN: 20-5184989

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PLANTE MORAN INVEST MGT FEES	70,756	70,756		

TY 2015 Taxes Schedule

Name: ANNABELLE FOUNDATION

EIN: 20-5184989

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX WITHHELD	2,135	2,135		
FEDERAL EXCISE TAX				

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 www.irs.gov/form990.	OMB No 1545-0047 2015
---	--	---

Name of the organization ANNABELLE FOUNDATION	Employer identification number 20-5184989
---	---

Organization type (check one)

Filers of: Form 990 or 990-EZ Form 990-PF	Section: ☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☒ 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)

Name of organization ANNABELLE FOUNDATION	Employer identification number 20-5184989
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Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person ☒
	BETTY GODARD 2637 N REVERE ROAD	\$ 250,000	Payroll ☐
	AKRON, OH 44333		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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person ☐
		\$	Payroll ☐
			Noncash ☐ (Complete Part II for noncash contributions)

Employer identification number
20-5184989

Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

[illegible]

20-5184989

Use duplicate copies of Part III if additional space is needed

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)