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# Form 990-PF Department of the Treasury

Name of foundation

For calendar year 2015 or tax year beginning

EXTENDED TO AUGUST 15, 2016
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 separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>

and ending

OMB No 1545-0052 2015

A Employer identification number

BRUCE AND LESLIE LANE FOUNDATION, INC. 20-8835161 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 351 CRESCENT DRIVE 561-512-3731 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here PALM BEACH, FL 33480 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization; E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: | X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 589,240. (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)) (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net expenses per books income ıncome 52,309. N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3,452. 3,452 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 39,268 68 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 80,822. 39,268. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 95,029. 42.720. 12 Total. Add lines 1 through 11 SCANNED JUL 0. 0. 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 3,100. 1,550. 0. STMT 2 **b** Accounting fees c Other professional fees 17 Interest
18 Taxes
19 Depreciation and depletion
20 Occupancy
21 Travel, conferences, and meetings 915. í<del>−</del> 3. Ō. STMT 3 くっこっし ひ JUN 23 ZUID 22 Printing and publications 23 Other expenses 24 Total operating and administrative 4,015. 1,553 0. expenses. Add lines 13 through 23 50,000. 50,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 50,000. 54,015. 1,553 Add lines 24 and 25 27 Subtract line 26 from line 12:

41,014.

41,167.

N/A

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

8. Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Form 990-PF (2015) BRUCE AND LESLIE LANE FOUNDATION, INC. Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 3,403. 6,170. 6,170. 2 Savings and temporary cash investments 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 7 Other notes and loans receivable 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 439,878. 478,085. STMT 5 577,155. b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 6 5,875. 5,915. 5,915. 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 449,156. 490,170. 589,240. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 11,762. 11,762. 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe > \_\_\_ 11,762. 11,762. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ► X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. þ 27 Capital stock, trust principal, or current funds 0. 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 478,408. 437,394. STATEMENT 29 Retained earnings, accumulated income, endowment, or other funds 437,394. 478,408. 30 Total net assets or fund balances 449,156. 490,170 31 Total liabilities and net assets/fund balances 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 30 437,394 (must agree with end-of-year figure reported on prior year's return) 41,014. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 4 5 Decreases not included in line 2 (itemize) 478,408. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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578,809. 87,265. 5 5 Multiply line 4 by line 3 412. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 87,677. 7 7 Add lines 5 and 6 50,000. 8 Enter qualifying distributions from Part XII, line 4 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. Form 990-PF (2015) 523521 11-24-15

	rt VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	8835		tions	Page 4	
_		Jee III	ou uc	COLIS	<u>'</u>	
18	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)	ļ			2.2	
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	<del> </del>			23.	
	of Part I, line 27b	ļ				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				0.	
_	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<del> </del>		0	$\frac{0.}{23.}$	
3	Add lines 1 and 2	├			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<del> </del>		0	$\frac{0.}{23.}$	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<del> </del>		- 0.	23.	
6	Credits/Payments:					
	2015 estimated tax payments and 2014 overpayment credited to 2015  6a				ŀ	
	Exempt foreign organizations - tax withheld at source  Toward with contraction for extension of time to file (Form 1986)				į Į	
	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  66  66	1			į	
	· · · · · · · · · · · · · · · · · · ·	ļ			0.	
_	Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	<del> </del>			20.	
8	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<del>                                     </del>			43.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<del>                                     </del>			<u> </u>	
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	<del>                                     </del>				
	rt VII-A   Statements Regarding Activities	.l				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No	
	any political campaign?		1a		X	
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?					
Ī	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				$\neg$	
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?		1c		X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$				1	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				i	
	managers. ▶ \$ 0 .				]	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X	
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_	4a		<u> </u>	
b	b If "Yes," has it filed a tax return on Form 990-T for this year?					
5	5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?					
	If "Yes," attach the statement required by General Instruction T.		-			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				i	
	By language in the governing instrument, or			- 1	1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			X		
_	remain in the governing instrument?	:	6			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV			Х		
0.	Enter the states to which the foundation reports or with which it is registered (see instructions)	ļ		i		
οa	MD				!	
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
Ü	of each state as required by General Instruction G? If "No," attach explanation		8b	$\overline{\mathbf{x}}$		
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					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		$\frac{x}{x}$	
			- 000	)-PF	(0015)	

Form	1990-PF (2015) BRUCE AND LESLIE LANE FOUNDATION, INC. 20-883	<u> 5161</u>		Page 5
Pa	art VII-A   Statements Regarding Activities (continued)			
	,		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	ĺ	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		Х
13	and a second of the second of	13	X	
	Website address ► N/A			
14	The books are in care of ▶ BRUCE S. LANE  Telephone no. ▶ 301-73	18-0	800	
	Located at ▶ 351 CRESCENT DRIVE, PALM BEACH, FL ZIP+4 ▶3			
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	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	İ	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			<del></del>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	$T^{}$	Yes	No
4.	· · · · · · · · · · · · · · · · · · ·	-		
18	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 X No	1 1		1
		1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
				1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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)?			
	(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	1		
	termination of government service, if terminating within 90 days.)	1 1	i	
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)?	<u>1b</u>		<del></del>
	Organizations relying on a current notice regarding disaster assistance check here	1	•	
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			1
	before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		
	defined in section 4942(j)(3) or 4942(j)(5)):			
8	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			<b> </b>
	before 2015?			
	If "Yes," list the years $\blacktriangleright$ ,,,			i
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			İ
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			اد ا
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	'		ļ
	<b>&gt;</b>	j		1
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		'	1
	during the year?	ļ.,	ļ ,	
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	1		1
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			'
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	_		
	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	3b_		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48		X
	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	<u></u>	_X_
	Fi	orm 990	0-PF	(2015)

orm 990-PF (2015) BRUCE AND LESLIE LANE FOL			<u> 20-88351</u>	<u>.61</u>	Page €
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be Re	equired <sub>(contin</sub>	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) ,Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es X No	1	1
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire	ctly,		l	- 1
any voter registration drive?		Ye	es X No	ŀ	!
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Ye	es X No		·
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or			
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?	•	N/A	5b	_
Organizations relying on a current notice regarding disaster assistance check hi	ere		▶□□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned			
expenditure responsibility for the grant?			es No		
If "Yes," attach the statement required by Regulations section 53 4945		,		- 1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j	• •				
a personal benefit contract?	, a, p	□ v	es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b	x
If "Yes" to 6b. file Form 8870	orbonal bonom commune				<del> </del> -
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No	- 1	i
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu		٠٠ ســــا	N/A	7b	
Part VIII Information About Officers, Directors, Truste		agers. Highly	-17 +- 1		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their of	compensation.	• • • • • • • • • • • • • • • • • • • •			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(6	Expense count, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acc	illowances
BRUCE S. LANE	PRESIDENT/DIR	ECTOR			
351 CRESCENT DRIVE				1	
PALM BEACH, FL 33480	2.00	0.	0.		0.
F. LESLIE BROWN	SECRETARY/TRE	ASURER/DI	RECT		
351 CRESCENT DRIVE					
PALM BEACH, FL 33480	2.00	0.	0.	1	0.
		<u> </u>		l	
2 Compensation of five highest-paid employees (other than those incl	<del>                                     </del>	enter "NONE."	(d) Contabutant	<del></del>	. \
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acc	e) Expense count, other
	devoted to position	(o) componication	compensation	a	llowances
NONE					
<del></del>				ļ	
				1	
				1	
	-	-		╀	
		ļ		┼	
······································				1	
		<u> </u>			0
Total number of other employees paid over \$50,000					U

Form 990-PF (2015) BRUCE AND LESLIE LANE FOUNDATION,	INC. 20	)-8835161 Page 7
Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del></del>		<del></del>
Total number of others receiving over \$50,000 for professional services		▶ 0
PartilX=A* Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1 N/A		
		$\dashv$
2		_
		-
3		
4		-
Dest Web I a		
Part IX <sup>a</sup> B' Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on line	c 1 and 2	Amount
1 N/A	S I allu Z.	Amount
11/11		
2		
All other program-related investments. See instructions.		
3		_
Total, Add lines 1 through 3		▶   0.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 50,000. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 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) 3Ь 50,000. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6

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,	·	•		20 117
line 7				28,117.
2 Undistributed income, if any, as of the end of 2015			0.	
a Enter amount for 2014 only			U •	
b Total for prior years:		0.		' :
3 Excess distributions carryover, if any, to 2015:				
a From 2010 77, 348.				
b From 2011 64,819.				
c From 2012 68,161.				
d From 2013 34,656.				]
e From 2014 49,543.				
f Total of lines 3a through e	294,527.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 50,000 .				
a Applied to 2014, but not more than line 2a			- 0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				28,117.
e Remaining amount distributed out of corpus	21,883.			
5 Excess distributions carryover applied to 2015	0.		· · · · · · · · · · · · · · · · · · ·	0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	316,410.			
<b>b</b> Prior years' undistributed income. Subtract				-
line 4b from line 2b		0.		!
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				0.
7 Amounts treated as distributions out of			,	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010	77 240			
not applied on line 5 or line 7	77,348.			
9 Excess distributions carryover to 2016.	239,062.			
Subtract lines 7 and 8 from line 6a	433,004.	· · · · · · · · · · · · · · · · · · ·		
10 Analysis of line 9: a Excess from 2011 64,819.				
b Excess from 2012 c Excess from 2013 68,161.				
d Excess from 2014 49,543.				
e Excess from 2015 21,883.				
523581 11-24-15				Form 990-PF (2015)

		ND LESLIE LA			20-88	35161 Page 10
	rt XIV Private Operating Fo			A, question 9)	N/A	<del> </del>
1 a	If the foundation has received a ruling of					
	foundation, and the ruling is effective for			▶ └		
b	Check box to indicate whether the found		g foundation described in		4942(j)(3) or 49	42(j)( <u>5)</u>
2 a	Enter the lesser of the adjusted net	Tax year	41.0044	Prior 3 years	1 (4) 0010	(a) Takal
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for					
	each year listed					<del></del>
b	85% of line 2a					
C	Qualifying distributions from Part XII,		-			
	line 4 for each year listed					
d	Amounts included in line 2c not					
	used directly for active conduct of					
	exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
3	Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test - enter:					<del></del>
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test - enter:				ì	
	(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				105.000	
Pa	nrt XV Supplementary Info at any time during t			the foundation i	nad \$5,000 or mor	e in assets
1 8 NO	Information Regarding Foundation List any managers of the foundation wh year (but only if they have contributed in NE.	o have contributed more	than 2% of the total contr ection 507(d)(2).)	ibutions received by the t	foundation before the clos	e of any tax
	List any managers of the foundation who ther entity) of which the foundation ha			or an equally large portio	n of the ownership of a pa	rtnership or
NO	NE					
2	Information Regarding Contribution Check here ► X if the foundation of	only makes contributions	to preselected charitable (	organizations and does n	ot accept unsolicited requi	ests for funds. If
	the foundation makes gifts, grants, etc.	<del></del>				d.
8	The name, address, and telephone num	ber or e-mail address of t	he person to whom applic	cations should be address	sed:	
_	The form in which applications should t	oe submitted and informa	tion and materials they sh	ould include:		
	Any submission deadlines;					
	I Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or c	other factors:	

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Total

Part XVI-A Analysis of Income-Producing Activities	Part XVI-A	· Analys	is of Incon	ne-Producina	<b>Activities</b>
--	------------	----------	-------------	--------------	-------------------

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Exclud	ed by section 512, 513, or 514	(0)
Litter gross arrounds unless otherwise moleated.	(a) Business	(b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue;	code	Amount	code	Amount	function income
a			1		
b			1 1	<u></u>	<del></del> -
C					<del></del>
· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>		1 1		
			<del>  </del>		
f			1 1		<del></del>
g Fees and contracts from government agencies	<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·	+ +		<del> </del>
	<u> </u>		+-+		
2 Membership dues and assessments	h		╁──┼		
3 Interest on savings and temporary cash					
Investments	<del> </del>		14	2 452	<del></del>
4 Dividends and interest from securities	<del>                                     </del>		14	3,452.	
5 Net rental income or (loss) from real estate:	}		<del>├</del>		
a Debt-financed property		<del></del>	╁╼╍╌╁╴		
b Not debt-financed property			<del>├ -                                   </del>		<del>"</del>
6 Net rental income or (loss) from personal			1 1		
property	ļļ.		$\vdash$		
7 Other investment income	<b></b>		<b>├</b>		
8 Gain or (loss) from sales of assets other					
than inventory			18	39,268.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1				
a			<u> </u>		
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		42,720.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	4 4 4 4 4
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Accon	nnlishment of Eve	amnt l	Durnosas	
Telationship of Activities to	the Accon	iipiisiiiiieiit Qi Exe	empt r	- ui poses	
Line No. Explain below how each activity for which incom	ne is reported in	column (e) of Part XVI-A	contribu	ted importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than b	y providing fund	ls for such purposes).			
					<u> </u>
		•			· · · · · · · · · · · · · · · · · · ·
		·		<del></del>	
				<del></del>	
523821 11-24-15					Form <b>990-PF</b> (2015)

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?

FOITH 990-PF (20	13) BRUCE AND	THAT TINGER	FOUNDATION,	INC.	20-0033101
Part XVII	Information Regarding	ig Transfers To an	d Transactions an	d Relationships	With Noncharitable
	Exempt Organization	S		•	

a Transfe	ers from the reporting founda	ation to a noncharitable exempt or	ganization of:				1 :		
(1) Ca	· -	·				1a(1)	X		
(2) Ot	her assets					1a(2)	X		
<b>b</b> Other t	ransactions;								
(1) Sa	ales of assets to a noncharital	les of assets to a noncharitable exempt organization							
(2) Pu	ırchases of assets from a nor	ncharitable exempt organization				1b(2)	X		
(3) Re	(3) Rental of facilities, equipment, or other assets								
(4) Re	eimbursement arrangements					16(4)	X		
• •	oans or loan guarantees					1b(5)	X		
		embership or fundraising solicitation				1b(6)	X		
		uling lists, other assets, or paid en				1c	X		
		"Yes," complete the following scho							
		oundation. If the foundation receiv		in any transaction	or sharing arrangement, she	w in			
	(b) Amount involved	other assets, or services received.		1 (4)					
(a) Line no	(b) Amount involved	(c) Name of noncharitabl	e exempt organization	(0) Description	of transfers, transactions, and sh	aring arrangeme	nts		
		N/A	<del></del> -	ļ					
_			<del></del>	···-					
			<del>-</del>	<del> </del>	<del></del>				
				<u> </u>	<del> </del>				
					<del></del>				
				<del>                                     </del>					
<del></del>				<del>                                     </del>	<del> </del>				
				+	·				
	· - · · · · · · · · · · · · · · · · · ·								
		···	<del></del>	1	<del>,</del>	<del></del>			
2a Is the f	oundation directly or indirect	tly affiliated with, or related to, one	e or more tax-exempt organiza	itions described					
		than section 501(c)(3)) or in sect				Yes 🔀	No		
b If "Yes,"	complete the following sche								
	(a) Name of org	anization	(b) Type of organization		(c) Description of relationship	p			
	N/A		ļ						
					-				
					<del>-</del>				
	<del></del>				<del>. ,</del>				
Sign	der penalities of penury, I deciare to d belief, it is the correct, and com	hat I have examined this return, including plets. Declaration of preparer (other than	g accompanying achedules and stati i taxpayer) is baself on all liftormatio	ements, and to the bes in of which preparer ha	may	he IRS discuss with the prepa	this		
Here	1)1100	. 1_	16/13/16		show	n below (see in:	ttr )?		
P	ignature of officer or trustee	m	0110110	PRESID	ENT.	」Yes	J No I		
1	Print/Type preparer's na	me Preparer's s	Date	Title Date	Check If PTIN				
	Time type preparer 5 flat	Tricpardi S S		13 08:23:22	self- employed				
Paid	LAWRENCE KI	I.TNR			· · ·	179370			
Prepare		RRY BEKAERT LLP			Firm's EIN ► 56 – 05				
Use Onl		WIT DRIVERS TO DUE			Film Sem > 30-03	, 3333			
		BETHESDA METRO	ርጥጽ. ያጥጽ 600						
	•	THESDA, MD 2081	-		Phone no. 301-95	1-3636			
			-			m 990-PF			
					1 01	·	,,,		

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#### Schedule B

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 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

Employer identification number

BF	RUCE AND LESLIE LANE FOUNDATION, INC.	20-8835161				
Organization type (check o	one)·					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
•	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule.	See instructions.				
General Rule						
	in filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $\$$ one contributor. Complete Parts I and II. See instructions for determining a contributor's t					
Special Rules						
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount 2, line 1. Complete Parts I and II.	16b, and that received from				
year, total contribu	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.					
year, contributions is checked, enter to purpose. Do not c	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					
but it must answer "No" on	that is not covered by the General Rule and/or the Special Rules does not file Schedule B (In Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its For the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					
LHA For Paperwork Redu	uction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B	(Form 990, 990-EZ, or 990-PF) (2015)				

Name of organization

Employer identification number

BRUCE	AND	LESLIE	LANE	FOUNDATION.	INC.

20-8835161

BROCE	AND LESLIE LANE FOUNDATION, INC.	20	-8835161			
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	BRUCE LANE  351 CRESCENT DRIVE  PALM BEACH, FL 33480	\$52,309.	Person X Payroll  Noncash X (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 Oncash Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)			

Employer identification number

### BRUCE AND LESLIE LANE FOUNDATION, INC.

20-8835161

Part II	Noncash Property (see instructions) Use duplicate copies of Part I	I if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	238 SHS OF ISHARES CORE S&P 500 ETF		
		40.000	10/10/15
		\$ 49,209.	12/10/15
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I	Description of noncestry grown	(see instructions)	
		_	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<del></del>			
		_	
		\$	<del></del>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		s	
(a)	<u> </u>	(c)	
No. from Part I	(b)  Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		_	
—			
		\$	990, 990-EZ, or 990-PF) (

Name of orga	ınization	Employer identification number					
BRUCE	AND LESLIE LANE FOUNDAT	ION. INC.	20-8835161				
Part III	Exclusively religious, charitable, etc., contri the year from any one contributor. Complete co	butions to organizations described	d in section 501(c)(7), (8), or (10) that total more than \$1,000 for				
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or	or less for the year (Enter this info once) \$				
(a) No.	Use duplicate copies of Part III if additional	space is needed	<del>-</del>				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Faiti							
`							
$\vdash$		(e) Transfer of git	ife				
		(e) Hansier of gi					
_	Transferee's name, address, an	Relationship of transferor to transferee					
[ ]		<del></del> [ <del></del>					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(a) v an pool o v gine	(0) 200 0. 3					
'	<del></del>						
_							
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
Γ.							
}.							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) r ai pose oi giit	(c) Osc of gift	(a) Description of now girt is not				
ļ_							
	(e) Transfer of gift						
	Transferee's name, address, an	Relationship of transferor to transferee					
	<del> </del>						
] -		<del></del>					
(a) No. from Part I	(1) Diving a set of the	(a) Usa at mith	(d) Passarinking of hour wife in held				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		-					
<del></del>   ·							
L							
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	Transfere S name, address, am	W 6-11 T T	recommending of denoted to benefit to				
1.	<del></del>						
		L					

# FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

ame(s)				identifying Numb	
BRUCE AND L	ESLIE LANE FO	UNDATION, INC		20-8835	
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
Date	Alloun	-0-		, onary nate	
05/15/15	206.	206.	31	.000082192	
06/15/15	206.	412.	92	.000082192	
09/15/15	205.	617.	91	.000082192	
12/15/15	206.	823.	16	.000082192	
12/31/15	0.	823.	91	.000081967	
03/31/16	0.	823.	45	.000109290	
-					<del> </del>
			<u></u>		
		-			
					-
			-		
		_			
			<del></del>		
nalty Due (Sum of Colum	nn F).				2

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

GROSS	CAPITAL			
AMOUNT	GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	ADJUSTED
31,526	. 28,07	4. 3,452.	3,452.	
31,526	28,07	3,452.	3,452.	
	ACCOUNTI	NG FEES	Si	PATEMENT 2
				(D) CHARITABLE PURPOSES
	3,100.	1,550.		0.
, LN 16B	3,100.	1,550.		0.
	TAX	ES	Si	FATEMENT 3
		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
— END	912.	0.	<del>-</del>	0.
	3.	3.		0.
, LN 18	915.	3.		0.
	31,526	31,526. 28,07  ACCOUNTI  (A)  EXPENSES PER BOOKS  3,100.  TAX  (A)  EXPENSES PER BOOKS  912.  END  3.	31,526. 28,074. 3,452.  ACCOUNTING FEES  (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  3,100. 1,550.  TAXES  (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  912. 0. END 3. 3.	ACCOUNTING FEES  (A) (B) (C) ADJUSTED PER BOOKS MENT INCOME  3,100. 1,550.  (A) (B) (C) ADJUSTED NET INCOME  3,100. 1,550.  (A) (B) (C) ADJUSTED NET INCOME  TAXES  ST  (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  912. 0.  END  3. 3.

FORM 990-PF OTHER FUND	os	STATEMENT 4
DESCRIPTION	(A) BEGINNING OF YEAR	(B) END OF YEAR
RE OR ACCUMULATED INCOME	437,394.	478,408.
TOTAL TO FORM 990-PF, PART II, LINE 29	437,394.	478,408.

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
FIDELITY		478,085.	577,155.
TOTAL TO FORM 990-PF, PA	RT II, LINE 10B	478,085.	577,155.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 6
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ISRAEL BONDS DIVIDENDS RECEIVABLE	COST	5,875. 40.	5,875. 40.
TOTAL TO FORM 990-PF, PA	om tt itwe 12	5,915.	5,915.