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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2015

Open to Public Inspection

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

Name of foundation CENTIMARK FOUNDATION		A Employer identification number 20-8911858	
Number and street (or P O box number if mail is not delivered to street address) 12 GRANDVIEW CIRCLE		B Telephone number (see instructions) (724) 743-7747	
City or town, state or province, country, and ZIP or foreign postal code CANONSBURG, PA 15317		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 155,247		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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)	1,600,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	286	286	286	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . .				
	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	1,600,286	286	286	
	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).	2,470			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	51			
	24 Total operating and administrative expenses. Add lines 13 through 23	2,521	0		0
	25 Contributions, gifts, grants paid	1,615,971			1,615,971
	26 Total expenses and disbursements.Add lines 24 and 25	1,618,492	0		1,615,971
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-18,206			
	b Net investment income (if negative, enter -0-)		286		
	c Adjusted net income(if negative, enter -0-) . . .			286	

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	3,490	2,524	2,524
	2	Savings and temporary cash investments	169,963	152,723	152,723
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans.			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	173,453	155,247	155,247	
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 ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> 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	173,453	155,247	
	30	Total net assets or fund balances(see instructions)	173,453	155,247	
31	Total liabilities and net assets/fund balances(see instructions)	173,453	155,247		

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	173,453	
2	Enter amount from Part I, line 27a	2	-18,206	
3	Other increases not included in line 2 (itemize) ▶ _____	3		
4	Add lines 1, 2, and 3	4	155,247	
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	155,247	

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)
1a				
b				
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			
b			
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			
b			
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	
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	1,577,009	149,650	10 537982
2013	1,459,397	151,996	9 601549
2012	1,672,545	262,483	6 372013
2011	1,844,098	264,330	6 976499
2010	1,661,985	351,016	4 734784

2	Total of line 1, column (d).	2	38 222827
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	7 644565
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	207,714
5	Multiply line 4 by line 3.	5	1,587,883
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	3
7	Add lines 5 and 6.	7	1,587,886
8	Enter qualifying distributions from Part XII, line 4.	8	1,615,971

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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	3
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-)	2	
3	Add lines 1 and 2.	3	3
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	3
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	90
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868).	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	90
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed <input checked="" type="checkbox"/>	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . <input checked="" type="checkbox"/>	10	87
11	Enter the amount of line 10 to be Credited to 2015 estimated tax <input checked="" type="checkbox"/> 87 Refunded <input checked="" type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
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)? <i>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.</i>	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? <i>If "Yes," attach a detailed description of the activities.</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	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? <i>If "Yes," attach the statement required by General Instruction T.</i>	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? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► PA _____		
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? <i>If "No," attach explanation.</i>	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)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶N/A	13	Yes	
14	The books are in care of ▶EDWARD B DUNLAP JR Located at ▶12 GRANDVIEW CIRCLE CANONSBURG PA Telephone no ▶(724) 743-7747 ZIP+4 ▶15317			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	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? <input type="checkbox"/>	1c		
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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>) <input type="checkbox"/>	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)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

☐

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes

☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes

☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes

☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

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

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	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
See Additional Data Table				

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
NONE		

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	0
b	Average of monthly cash balances.	1b	210,877
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	210,877
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	210,877
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	3,163
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	207,714
6	Minimum investment return.Enter 5% of line 5.	6	10,386

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	10,386
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	3
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	3
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	10,383
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	10,383
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	10,383

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	1,615,971
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	1,615,971
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	3
6	Adjusted qualifying distributions.Subtract line 5 from line 4.	6	1,615,968

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				10,383
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.	1,644,464			
b From 2011.	1,830,895			
c From 2012.	1,659,431			
d From 2013.	1,451,803			
e From 2014.	1,569,528			
f Total of lines 3a through e.	8,156,121			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 1,615,971				
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.				10,383
e Remaining amount distributed out of corpus	1,605,588			
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	9,761,709			
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).	1,644,464			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	8,117,245			
10 Analysis of line 9				
a Excess from 2011.	1,830,895			
b Excess from 2012.	1,659,431			
c Excess from 2013.	1,451,803			
d Excess from 2014.	1,569,528			
e Excess from 2015.	1,605,588			

Part XIV

b Check box to indicate whether the organization is a private operating foundation described in section 170(c)(2)(B)(i) or 170(c)(2)(B)(ii): ☐ 170(c)(2)(B)(i) or ☐ 170(c)(2)(B)(ii)

b 85% of line 2a

d Amounts included in line 2c not used directly for active conduct of exempt activities

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter

(1) Value of all assets

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

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

c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV

1 Information Regarding Foundation Managers:

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

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

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

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

a The name, address, and telephone number or 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	1,615,971
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						286
4 Dividends and interest from securities. . . .						
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						
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). . .						286
13 Total. Add line 12, columns (b), (d), and (e).						286

[illegible]

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
EDWARD B DUNLAP JR	TRUSTEE/PRES 1 00	0	0	0
12 GRANDVIEW CIRCLE CANONSBURG, PA 15317				
TIMOTHY M DUNLAP	TRUSTEE/VP 0 50	0	0	0
12 GRANDVIEW CIRCLE CANONSBURG, PA 15317				
THOR D DICESARE	SECRETARY 0 50	0	0	0
12 GRANDVIEW CIRCLE CANONSBURG, PA 15317				
JOHN A RUDZIK	TRUSTEE/TRES 10 00	0	0	0
12 GRANDVIEW CIRCLE CANONSBURG, PA 15317				
JOHN L HEISEY	TRUSTEE 0 50	0	0	0
12 GRANDVIEW CIRCLE CANONSBURG, PA 15317				

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>				
A CHILD'S PLACE AT MERCY HOSPITAL 1515 LOCUST AVE STE 302 PITTSBURGH,PA 15219	N/A	PUBLIC	OPERATING EXPENSES	2,500
ALLEGHENY COUNTY CASA 564 FORBES AVE STE 902 PITTSBURGH,PA 15219	N/A	PUBLIC	OPERATING EXPENSES	5,000
ALLEGHENY COUNTY HUMAN SERVICES ONE SMITHFIELD STREET PITTSBURGH,PA 15222	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
ALLEGHENY VALLEY SCHOOL 1996 EWINGS MILL ROAD CORAOPOLIS,PA 15108	N/A	PUBLIC	OPERATING EXPENSES	5,000
ANGEL'S PLACE 2538 WOODSTOCK AVENUE PITTSBURGH,PA 15218	N/A	PUBLIC	OPERATING EXPENSES	2,500
ANGEL'S PLACE 2538 WOODSTOCK AVENUE PITTSBURGH,PA 15218	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	2,000
AUBERLE HOME 1101 HARTMAN STREET MCKEESPORT,PA 15132	N/A	PUBLIC	OPERATING EXPENSES	5,000
BEST OF THE BATCH FOUNDATION 2000 WEST STREET MUNHALL,PA 15120	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	1,000
BETHLEHEM HAVEN 905 WATSON STREET PITTSBURGH,PA 15219	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
BLACKBURN CENTER PO BOX 398 GREENSBURG,PA 15601	N/A	PUBLIC	OPERATING EXPENSES	5,000
BLESSINGS IN A BACKPACK 4121 SHELBYVILLE ROAD LOUISVILLE,KY 40207	N/A	PUBLIC	WASHINGTON PARK ELEMENTARY	31,680
BLESSINGS IN A BACKPACK 4121 SHELBYVILLE ROAD LOUISVILLE,KY 40207	N/A	PUBLIC	FIRST STREET ELEMENTARY	2,880
BLESSINGS IN A BACKPACK 4121 SHELBYVILLE ROAD LOUISVILLE,KY 40207	N/A	PUBLIC	FORT CHERRY SCHOOL DIST	8,856
BOUNTIFUL BLESSINGS PO BOX 299 MECHANICSBURG,PA 17055	N/A	PUBLIC	OPERATING EXPENSES	6,000
CATHOLIC HOSPICE 2605 NICKOLSON RD STE 3 SEWICKLEY,PA 15143	N/A	PUBLIC	OPERATING EXPENSES	10,000
Total			3a	1,615,971

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				
CHILDREN'S HOME & LEMIEUX FAMILY CE 5324 PENN AVENUE PITTSBURGH,PA 15224	N/A	PUBLIC	OPERATING EXPENSES	5,000
CHILDREN'S HOME & LEMIEUX FAMILY CE 5324 PENN AVENUE PITTSBURGH,PA 15224	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
CHOICES PREGNANCY CENTERS 626 5TH AVENUE CORAOPOLIS,PA 15108	N/A	PUBLIC	OPERATING EXPENSES	10,000
CITY RESCUE MISSION OF NEW CASTLE 319 S CROTON AVE PO BOX NEWCASTLE,PA 16103	N/A	PUBLIC	EASTER PROGRAM 2015	7,400
CITY RESCUE MISSION OF NEW CASTLE 319 S CROTON AVE PO BOX NEWCASTLE,PA 16103	N/A	PUBLIC	BACK TO SCHOOL 2015	10,000
CITY RESCUE MISSION OF NEW CASTLE 319 S CROTON AVE PO BOX NEWCASTLE,PA 16103	N/A	PUBLIC	OPERATING EXPENSES	10,000
CITY RESCUE MISSION OF NEW CASTLE 319 S CROTON AVE PO BOX NEWCASTLE,PA 16103	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
COMMUNITIES IN SCHOOLS OF PITTSBURG 6435 FRANKSTOWN AVE PITTSBURGH,PA 15206	N/A	PUBLIC	OPERATING EXPENSES	2,500
COMMUNITY HUMAN SERVICES 5001 CENTRE AVENUE PITTSBURGH,PA 15213	N/A	PUBLIC	OPERATING EXPENSES	2,500
COMMUNITY HUMAN SERVICES 5001 CENTRE AVENUE PITTSBURGH,PA 15213	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
DHS DONATION FUND ONE SMITHFIELD STREET PITTSBURGH,PA 15222	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
EARLY LEARNING INSTITUTE 2510 BALDWICK ROAD PITTSBURGH,PA 15205	N/A	PUBLIC	OPERATING EXPENSES	5,000
EAST END COOPERATIVE MINISTRY 250 N HIGHLAND AVENUE PITTSBURGH,PA 15206	N/A	PUBLIC	OPERATING EXPENSES	5,000
EAST END COOPERATIVE MINISTRY 250 N HIGHLAND AVENUE PITTSBURGH,PA 15206	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
EIGHTH AVENUE PLACE 811 WEST ST PO BOX 161 HOMESTEAD,PA 15120	N/A	PUBLIC	OPERATING EXPENSES	2,500
Total			3a	1,615,971

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				
FAITH IN ACTION 69 EAST BEAU STREET WASHINGTON,PA 15301	N/A	PUBLIC	OPERATING EXPENSES	5,000
FAMILY GUIDANCE 307 DUFF ROAD SEWICKLEY,PA 15143	N/A	PUBLIC	OPERATING EXPENSES	5,000
FAMILY HOSPICE AND PALLIATIVE CARE 50 MOFFET STREET PITTSBURGH,PA 15243	N/A	PUBLIC	OPERATING EXPENSES	5,000
FAMILY HOUSE - FAMILY ASSISTANCE FU 5001 BAUM BLVD STE 545 PITTSBURGH,PA 15213	N/A	PUBLIC	OPERATING EXPENSES	5,000
FAMILY PROMISE OF SOUTHWESTERN PA 297 EAST BEAU STREET WASHINGTON,PA 15301	N/A	PUBLIC	OPERATING EXPENSES	10,000
FAMILY SERVICES OF WESTERN PA 3230 WILLIAM PENN WAY PITTSBURGH,PA 15238	N/A	PUBLIC	OPERATING EXPENSES	5,000
FIRST LOVE CHRISTIAN ACADEMY 150 SUNSET BLVD WASHINGTON,PA 15301	N/A	PUBLIC	BACK TO SCHOOL 2015	7,500
FIRST LOVE CHRISTIAN ACADEMY 150 SUNSET BLVD WASHINGTON,PA 15301	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	2,500
FOCUS ON RENEWAL 701 CHARTIERS AVENUE MCKEES ROCKS,PA 15136	N/A	PUBLIC	OPERATING EXPENSES	10,000
GENESIS OF PITTSBURGH 550 CALIFORNIA AVENUE PITTSBURGH,PA 15202	N/A	PUBLIC	OPERATING EXPENSES	10,000
GIRLS HOPE 1005 BEAVER GRADE RD STE CORAOPOLIS,PA 15108	N/A	PUBLIC	OPERATING EXPENSES	5,000
GLADE RUN FOUNDATION 70 W BEAVER STREET ZELIENOPLE,PA 15063	N/A	PUBLIC	OPERATING EXPENSES	2,500
GREATER PITTSBURGH COMMUNITY FOOD B 1 NORTH LINDEN STREET DUQUESNE,PA 15110	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
GREATER PITTSBURGH LITERACY COUNCIL 411 SEVENTH AVE STE 550 PITTSBURGH,PA 15219	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	2,500
GREATER WASHINGTON COUNTY FOOD BANK 909 NATIONAL PIKE WEST BROWNSVILLE,PA 15417	N/A	PUBLIC	CHALLENGE GRANT	50,000
Total				1,615,971

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				
GREATER WASHINGTON COUNTY FOOD BANK 909 NATIONAL PIKE WEST BROWNSVILLE,PA 15417	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
HEARTH 3724 MOUNT ROYAL BLVD GLENSHAW,PA 15116	N/A	PUBLIC	OPERATING EXPENSES	10,000
HEARTH 3724 MOUNT ROYAL BLVD GLENSHAW,PA 15116	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	3,000
HOLY FAMILY - SNAP PROGRAM 19 MAY AVENUE MCKEES ROCKS,PA 15136	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	1,000
HOLY FAMILY CATHOLIC CHURCH 444 EAST MAIN STREET DANVILLE,IL 61832	N/A	PUBLIC	OPERATING EXPENSES	1,000
HOLY FAMILY FOUNDATION 8235 OHIO RIVER BLVD PITTSBURGH,PA 15202	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
JEREMIAH'S PLACE 6435 FRANKSTOWN AVENUE PITTSBURGH,PA 15206	N/A	PUBLIC	OPERATING EXPENSES	2,500
JEREMIAH'S PLACE 6435 FRANKSTOWN AVENUE PITTSBURGH,PA 15206	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	1,000
JOHN PAUL PLAZA 1005 HERRON AVENUE PITTSBURGH,PA 15219	N/A	PUBLIC	OPERATING EXPENSES	5,000
JUBILEE SOUP KITCHEN 2005 WYANDOTTE STREET PITTSBURGH,PA 15219	N/A	PUBLIC	OPERATING EXPENSES	10,000
JUBILEE SOUP KITCHEN 2005 WYANDOTTE STREET PITTSBURGH,PA 15219	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
KIDS VOICE 437 GRANT ST STE 700 PITTSBURGH,PA 15219	N/A	PUBLIC	OPERATING EXPENSES	2,500
LEMOYNE COMMUNITY CENTER 200 FORREST AVE PO BOX 1 WASHINGTON,PA 15301	N/A	PUBLIC	OPERATING EXPENSES	5,000
LEMOYNE COMMUNITY CENTER 200 FORREST AVE PO BOX 1 WASHINGTON,PA 15301	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
LIGHT OF LIFE MISSION 913 WESTERN AVENUE PITTSBURGH,PA 15233	N/A	PUBLIC	OPERATING EXPENSES	10,000
Total 3a				1,615,971

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>				
LITTLE SISTERS OF THE POOR 1028 BENTON AVENUE PITTSBURGH,PA 15212	N/A	PUBLIC	OPERATING EXPENSES	20,000
LITTLE SISTERS OF THE POOR 1028 BENTON AVENUE PITTSBURGH,PA 15212	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
MCGUIRE MEMORIAL FOUNDATION 2119 MERCER RD PO BOX 48 NEW BRIGHTON,PA 15066	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	1,000
MEALS ON WHEELS - PETERS TWP 245 E MCMURRAY RD STE MCMURRAY,PA 15317	N/A	PUBLIC	OPERATING EXPENSES	240,000
METRO PITTSBURGH YOUTH FOR CHRIST 6314 LIBRARY ROAD SOUTH PARK,PA 15129	N/A	PUBLIC	OPERATING EXPENSES	2,500
MICHAEL'S PLACE 501 NORTH NEGLEY DRIVE PITTSBURGH,PA 15206	N/A	PUBLIC	OPERATING EXPENSES	10,000
MS SOCIETY - UTILITY ASSIST 1501 REEDSDALE ST STE 1 PITTSBURGH,PA 15233	N/A	PUBLIC	OPERATING EXPENSES	1,000
NAZARETH HOUSING SERVICES 301 NAZARETH WAY PITTSBURGH,PA 15229	N/A	PUBLIC	OPERATING EXPENSES	10,000
NETWORK OF HOPE 2326 DUNCAN AVENUE ALLISON PARK,PA 15101	N/A	PUBLIC	OPERATING EXPENSES	1,000
NOAH ANGELICI HOPE FOUNDATION 262 SCOTT LANE VENETIA,PA 15367	N/A	PUBLIC	OPERATING EXPENSES	5,000
NORTH HILLS COMMUNITY OUTREACH 1975 FERGUSON ROAD ALLISON PARK,PA 15101	N/A	PUBLIC	EASTER PROGRAM 2015	7,400
NORTH HILLS COMMUNITY OUTREACH 1975 FERGUSON ROAD ALLISON PARK,PA 15101	N/A	PUBLIC	BACK TO SCHOOL 2015	8,000
NORTH HILLS COMMUNITY OUTREACH 1975 FERGUSON ROAD ALLISON PARK,PA 15101	N/A	PUBLIC	OPERATING EXPENSES	5,000
NORTH HILLS COMMUNITY OUTREACH 1975 FERGUSON ROAD ALLISON PARK,PA 15101	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
NORTH SIDE CHRISTIAN HEALTH CENTER 816 MIDDLE STREET PITTSBURGH,PA 15212	N/A	PUBLIC	OPERATING EXPENSES	5,000
Total  3a				1,615,971

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				
OPERATION BACKPACK PO BOX 91 PRESTO,PA 15142	N/A	PUBLIC	OPERATING EXPENSES	1,000
OUR LADY OF THE ANGELS FOOD PANTRY 204 37TH STREET PITTSBURGH,PA 15201	N/A	PUBLIC	OPERATING EXPENSES	2,500
PA WOMEN WORK 650 SMITHFIELD ST STE 5 PITTSBURGH,PA 15222	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	1,000
PENNIES FROM HEAVEN 4401 PENN AVE-CENTRAL PLA PITTSBURGH,PA 15224	N/A	PUBLIC	OPERATING EXPENSES	5,000
PREGNANCY RESOURCE CENTER 1000 S CARAWAY STE 112 JONESBORO,AR 72401	N/A	PUBLIC	OPERATING EXPENSES	5,000
PREGNANCY RESOURCE CENTER OF SH 101 DRAKE RD STE A PITTSBURGH,PA 15241	N/A	PUBLIC	OPERATING EXPENSES	15,000
PROJECT BUNDLE UP-SALVATION ARMY 700 NORTH BELL AVE PO BO CARNEGIE,PA 15106	N/A	PUBLIC	OPERATING EXPENSES	2,500
RED DOOR - ST MARYS PITTSBURGH 202 STANWIX STREET PITTSBURGH,PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000
RONALD MCDONALD HOUSE OF PITTSBURGH 451 44TH STREET PITTSBURGH,PA 15201	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
SACRED HEART CONFERENCE 508 WEST PHILADELPHIA ROA JONESBORO,AR 72401	N/A	PUBLIC	OPERATING EXPENSES	5,000
SECOND HARVEST FOOD BANK 8014 MARINE WAY IRVINE,CA 92618	N/A	PUBLIC	OPERATING EXP - VOID CHECK	-500
SCHOOL SISTERS OF ST FRANCIS 934 FOREST AVENUE PITTSBURGH,PA 15202	N/A	PUBLIC	CHALLENGE GRANT	20,000
SHEPHERD'S HEART FELLOWSHIP 13 PRIDE STREET PITTSBURGH,PA 15219	N/A	PUBLIC	OPERATING EXPENSES	7,500
SISTERS OF ST FRANCIS 146 HAWTHORNE ROAD PITTSBURGH,PA 15209	N/A	PUBLIC	OPERATING EXPENSES	10,000
SISTERS OF ST JOSEPH 1020 STATE STREET BADEN,PA 15005	N/A	PUBLIC	OPERATING EXPENSES	5,000
Total				1,615,971

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				
SISTER'S PLACE 418 MITCHELL AVENUE CLAIRTON,PA 15025	N/A	PUBLIC	BACK TO SCHOOL 2015	5,000
SISTER'S PLACE 418 MITCHELL AVENUE CLAIRTON,PA 15025	N/A	PUBLIC	OPERATING EXPENSES	5,000
SISTER'S PLACE 418 MITCHELL AVENUE CLAIRTON,PA 15025	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	1,000
SOUTH HILLS INTERFAITH MINISTRIES 5301 PARK AVENUE BETHEL PARK,PA 15102	N/A	PUBLIC	EASTER PROGRAM 2015	8,600
SOUTH HILLS INTERFAITH MINISTRIES 5301 PARK AVENUE BETHEL PARK,PA 15102	N/A	PUBLIC	BACK TO SCHOOL 2015	5,000
SOUTH HILLS INTERFAITH MINISTRIES 5301 PARK AVENUE BETHEL PARK,PA 15102	N/A	PUBLIC	OPERATING EXPENSES	5,000
SOUTH HILLS INTERFAITH MINISTRIES 5301 PARK AVENUE BETHEL PARK,PA 15102	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
SOUTHWINDS 2101 GREENTREE RD STE A PITTSBURGH,PA 15220	N/A	PUBLIC	OPERATING EXPENSES	20,000
ST ANTHONY'S SCHOOL 2000 CORPORATE DR STE 5 WEXFORD,PA 15090	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	1,000
ST THOMAS MORE PARISH 126 FORT COUCH ROAD PITTSBURGH,PA 15241	N/A	PUBLIC	BACK TO SCHOOL 2015	270,000
ST THOMAS MORE PARISH 126 FORT COUCH ROAD PITTSBURGH,PA 15241	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	40,750
ST VINCENT DE PAUL SOCIETY 219 WEST LINCOLN AVENUE MCDONALD,PA 15057	N/A	PUBLIC	EMERGENCY	10,000
ST VINCENT DE PAUL SOCIETY 219 WEST LINCOLN AVENUE MCDONALD,PA 15057	N/A	PUBLIC	BACK TO SCHOOL 2015	20,000
ST VINCENT DE PAUL SOCIETY 219 WEST LINCOLN AVENUE MCDONALD,PA 15057	N/A	PUBLIC	OPERATING EXPENSES	20,000
ST VINCENT DE PAUL SOCIETY 219 WEST LINCOLN AVENUE MCDONALD,PA 15057	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	16,500
Total 3a				1,615,971

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				
THE CHILDREN'S INSTITUTE 1405 SHADY AVENUE PITTSBURGH,PA 15217	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
THE EDUCATIONAL PARTNERSHIP 281 CORLISS DRIVE PITTSBURGH,PA 15220	N/A	PUBLIC	BACK TO SCHOOL 2015	40,000
THE INTERSECTION 115 7TH STREET MCKEESPORT,PA 15132	N/A	PUBLIC	OPERATING EXPENSES	10,000
THE SALVATION ARMY 700 NORTH BELL AVE PO BO CARNEGIE,PA 15106	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
THE SCHOOL AT MCGUIRE MEMORIAL 2121 MERCER ROAD NEW BRIGHTON,PA 15066	N/A	PUBLIC	BACK TO SCHOOL 2015	5,000
THE VETERANS BREAKFAST CLUB 200 MAGNOLIA PLACE PITTSBURGH,PA 15228	N/A	PUBLIC	OPERATING EXPENSES	5,000
THE WATCHFUL SHEPHERD 1061 WATERDAM PLAZA DR S MCMURRAY,PA 15317	N/A	PUBLIC	OPERATING EXPENSES	5,000
TRAVELERS AID - MOBILE MOMS PROGRAM 103 SMITHFIELD STREET PITTSBURGH,PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000
VETERANS PLACE OF WASHINGTON BLVD 945 WASHINGTON BOULEVARD PITTSBURGH,PA 15206	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
VOLUNTEERS OF AMERICA 570 S 4TH STREET LOUISVILLE,KY 40202	N/A	PUBLIC	OPERATING EXP - VOID CHECK	-500
WARD HOME 2275 SWALLOW HILL RD BLD PITTSBURGH,PA 15220	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	1,000
WASHINGTON CHRISTIAN OUTREACH 119 HIGHLAND AVENUE WASHINGTON,PA 15301	N/A	PUBLIC	EASTER PROGRAM 2015	5,000
WASHINGTON CHRISTIAN OUTREACH 119 HIGHLAND AVENUE WASHINGTON,PA 15301	N/A	PUBLIC	BACK TO SCHOOL 2015	7,500
WASHINGTON CHRISTIAN OUTREACH 119 HIGHLAND AVENUE WASHINGTON,PA 15301	N/A	PUBLIC	OPERATING EXPENSES	20,000
WASHINGTON CHRISTIAN OUTREACH 119 HIGHLAND AVENUE WASHINGTON,PA 15301	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
Total 3a				1,615,971

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>				
WASHINGTON CITY MISSION 382 WEST CHESTNUT ST STE WASHINGTON,PA 15301	N/A	PUBLIC	EASTER PROGRAM 2015	55,000
WASHINGTON CITY MISSION 382 WEST CHESTNUT ST STE WASHINGTON,PA 15301	N/A	PUBLIC	BACK TO SCHOOL 2015	144,405
WASHINGTON CITY MISSION 382 WEST CHESTNUT ST STE WASHINGTON,PA 15301	N/A	PUBLIC	OPERATING EXPENSES	20,000
WASHINGTON CITY MISSION 382 WEST CHESTNUT ST STE WASHINGTON,PA 15301	N/A	PUBLIC	CHRISTMAS PROGRAM 2015	5,000
WASHINGTON COUNTY CASA 30 EAST BEAU STREET WASHINGTON,PA 15301	N/A	PUBLIC	OPERATING EXPENSES	5,000
WASHINGTON COUNTY LITERACY COUNCIL 351 MONTGOMERY AVE PO BO WASHINGTON,PA 15301	N/A	PUBLIC	OPERATING EXPENSES	2,500
WASHINGTON WOMEN'S SHELTER INC 308 E MAIDEN STREET WASHINGTON,PA 15301	N/A	PUBLIC	OPERATING EXPENSES	5,000
WOMENS CENTER & SHELTER OF PGH PO BOX 9024 PITTSBURGH,PA 15224	N/A	PUBLIC	OPERATING EXPENSES	5,000
WOMEN'S CHOICE NETWORK PO BOX 15034 PITTSBURGH,PA 15237	N/A	PUBLIC	OPERATING EXPENSES	10,000
WORKING ORDERVOLUNTEERS OF AMERICA 1650 MAIN STREET SHARPSBURG,PA 15215	N/A	PUBLIC	OPERATING EXPENSES	5,000
YOUTH PLACES ORGANIZATION-MT WASHIN 2934 SMALLMAN STREET PITTSBURGH,PA 15201	N/A	PUBLIC	OPERATING EXPENSES	5,000
Total			3a	1,615,971

TY 2015 Accounting Fees Schedule

Name: CENTIMARK FOUNDATION

EIN: 20-8911858

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION FEE	2,470			

TY 2015 Other Expenses Schedule

Name: CENTIMARK FOUNDATION

EIN: 20-8911858

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK SERVICE CHARGES	51			

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.	OMB No 1545-0047
		2015

Name of the organization CENTIMARK FOUNDATION	Employer identification number 20-8911858
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 CENTIMARK FOUNDATION	Employer identification number 20-8911858
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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	CENTIMARK CORPORATION	\$ 1,600,000	Person <input checked="" type="checkbox"/>
	12 GRANDVIEW CIRCLE		Payroll <input type="checkbox"/>
	CANONSBURG, PA 15317		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization CENTIMARK FOUNDATION	Employer identification number 20-8911858
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Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

[illegible]

Name of organization CENTIMARK FOUNDATION	Employer identification number 20-8911858
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Part III

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

Use duplicate copies of Part III if additional space is needed

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