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### DLN: 93491224007376

OMB No 1545-0052

Department of the Treasury

Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	caler	ndar year 2015, or tax yea	r beginning 01-0	1-2015	, and ending 1	2-31-2015	
	e of four				A Employer ide	entification numbe	r
		MEMORIAL INC A SACCO TREASURER			25-1072140		
Num	her and	street (or P O box number if mail is not de	alivered to street address)	Poom/suite	<b>B</b> Telephone nun	nber (see instructions	s)
		ORATE DRIVE NO 800	envered to street address)	Room/ suite	(412) 348-3106		
City	or town	state or province, country, and ZIP or fore	ugn nostal sodo			application is pending	s check here. ► C
		PA 152375851	egn postal code		C ii exemption	аррисацон із ренціні	g, check here
<b>G</b> Cl	neck all	11 / /	Initial return of a fo	rmer public charity	<b>D 1.</b> Foreign or	ganizations, check he	re 🕨 🖵
		Final return Address change	Amended return Name change			ganizations meeting	
H Ch	ieck tvi	pe of organization	<u>-</u>	foundation	E If private fou	c here and attach cor ndation status was to	erminated
		947(a)(1) nonexempt charitable ti	rust 「Other taxable	private foundation		507(b)(1)(A), chec	k here ► □
of	ear <i>(fr</i>	rom Part II, col. (c),	ccounting method     Other (specify) art I, column (d) must	· 	F II the lounda	tion is in a 60-month i 507(b)(1)(B), chec	. —
Pa	rt I	Analysis of Revenue and		Revenue and			Disbursements
		(The total of amounts in columns (b), ( necessarily equal the amounts in columi instructions))	n (a) (see	expenses per (a) books	Net investment (b) income	Adjusted net (c) income	for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc ,	·				
	_	schedule)		9,620			
	2	Check F if the foundation is no	ot required to attach				
	_	Sch B		12 522	12 522	12 522	
	3	Interest on savings and temporar Dividends and interest from secu	· .	12,532 31,824	12,532 31,824	12,532 31,824	
	5a	Gross rents		31,021	31,021	31,021	
	b Net rental income or (loss)						
Φ	6a	Net gain or (loss) from sale of ass		813,907			
Revenue	ь	Gross sales price for all assets o	n line 6a				
Æ	7	1,933,089  Capital gain net income (from Par	tIV line 2)		813,907		
	8	Net short-term capital gain			325,631		
	9	Income modifications					
	10a	Gross sales less returns and					
		allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach scho	•	<b>95</b> 1 0.000	0.000	0.000	
	11	Other income (attach schedule)		8,898	, , , , , , , , , , , , , , , , , , ,	8,898	
	12	Total.Add lines 1 through 11 .		876,781 18,721	867,161	53,254	0
	13 14	Compensation of officers, directo Other employee salaries and wag		10,721	0	0	
w	15	Pension plans, employee benefits	ŀ				
ф 2	16a	Legal fees (attach schedule).	ŀ				
Expenses	b	Accounting fees (attach schedule		1,400	1,400	0	0
	c	Other professional fees (attach s		<b>%</b> 30,716	30,716	0	0
Administrative	17	Interest	· .				
trat	18	Taxes (attach schedule) (see ins	ŀ	22,040	2,681	0	0
<u>S</u>	19	Depreciation (attach schedule) ai	· · · · · · · · · · · · · · · · · · ·				
를	20	Occupancy					
₹	21	Travel, conferences, and meeting	s				
and	22	Printing and publications	[				
E	23	Other expenses (attach schedule	)	<b>%</b> 596	596	0	0
rati	24	Total operating and administrativ	e expenses.				
Operating		Add lines 13 through 23	ŀ	73,473	•	0	0
0	25	Contributions, gifts, grants paid		283,220			283,220
	26	<b>Total expenses and disbursement</b> 25	<b>s.</b> Add lines 24 and	356,693	35,393	0	283,220
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses		520,088			
	ь	Net investment income (if negative	,		831,768		
	С	Adjusted net income(if negative,	enter-0-)			53,254	

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	888		(c) Full Planket Value
	2	Savings and temporary cash investments	28,577	10,549	10,549
	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			
	O	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	,	Less allowance for doubtful accounts	108,700	0	0
		Inventories for sale or use	100,700		
왍	8	Prepaid expenses and deferred charges			
Assets	9		615,012	<b>95.</b> 216,209	216,210
Ā	10a	Investments—U S and state government obligations (attach schedule)	013,012	210,209	210,210
	b	Investments—corporate stock (attach schedule)	1,109,254	1,849,169	23,099,950
	c	Investments—corporate bonds (attach schedule)	203,250	203,250	221,904
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) 🟲			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	25,584	332,176	383,093
	14	Land, buildings, and equipment basis 🕨285,302			
		Less accumulated depreciation (attach schedule)	285,302	285,302	0
	15	O ther assets (describe 🟲)	170,137	168,689	<b>%</b> 0
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	2,546,704	3,065,344	23,931,706
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
_	21	Mortgages and other notes payable (attach schedule)			
	22	O ther liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
_		Foundations that follow SFAS 117, check here 🕨 🦵			
ě		and complete lines 24 through 26 and lines 30 and 31.			
ang	24	Unrestricted			
89	25	Temporarily restricted			
⊒	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here 🕨 🔽			
<u>-</u>		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	2,172,184	2,690,824	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	294,520	294,520	
	29	Retained earnings, accumulated income, endowment, or other funds	80,000	80,000	
Net	30	Total net assets or fund balances(see instructions)	2,546,704	3,065,344	
-	31	Total liabilities and net assets/fund balances(see instructions)	2,546,704	3,065,344	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	L	l	
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree	
		with end-of-year figure reported on prior year's return)		1	2,546,704
2		Enter amount from Part I, line 27a		2	520,088
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		4	3,066,792
5		Decreases not included in line 2 (itemize) ▶			1,448
6		Total net assets or fund balances at end of year (line 4 minus line 5)—		ıne 30 <b>. 6</b>	3,065,344

Part IV Capital Gains	and Losses for Tax on Inv	estment Income	2		
	e the kınd(s) of property sold (e g , rehouse, or common stock, 200 sh		How acquired P—Purchase (b) D—Donation	Date acqui	red Date sold yr) (d) (mo , day, yr)
<b>1a</b> See Additional Data	Table				
b					
С					
d					
e					
(e) Gross sales price	Depreciation allow (f) (or allowable)		t or other basis expense of sale		Gain or (loss) Dlus (f) minus (g)
<b>a</b> See Additional Data	Table				
b					
С					
d					
<u> </u>					
	showing gain in column (h) and ow	ned by the foundation	n on 12/31/69	Gaine (	Col (h) gaın mınus
	A drusted basis		cess of col (ı)		t not less than -0-) <b>or</b>
(i) F M V as of 12/31/69	(j) as of 12/31/69	(k) ove	rcol (j), if any	(I) Loss	es (from col (h))
<b>a</b> See Additional Data	Table				
b					
С					
d					
e					
3 Net short-term capit	tal gain or (loss) as defined in sect Part I, line 8, column (c) (see inst		)	2	813,907
	Under Section 4940(e) for	Reduced Tax or	Net Investme	nt Income	87,237
	private foundations subject to the				
	he section 4942 tax on the distribi not qualify under section 4940(e)			eriod?	Γ Yes <b>Γ</b> No
$oldsymbol{1}$ Enter the appropriate amo	ount in each column for each year,	see instructions befo	ore makıng any ent	ries	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncha			(d) oution ratio yided by col (c))
2014	126,586	5	3,698,426		0 034227
2013	196,709	)	3,415,073		0 057600
2012	164,457	7	3,109,243		0 052893
2011	160,619	)	3,260,146		0 049267
2010	84,200	)	2,922,002		0 028816
2 Totalof line 1, colum	nn (d)			2	0 222803
the number of years	n ratio for the 5-year base period—o the foundation has been in existen	ce if less than 5 yea	rs	3	0 044561
	of noncharitable-use assets for 20	· ·	<u> </u>	4	3,076,369
5 Multiply line 4 by lin	ne 3			5	137,086
6 Enter 1% of net inve	estment income (1% of Part I, line	27b)		6	8,318
7 Add lines 5 and 6.			[	7	145,404

the Part VI instructions

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

283,220

ĽŒL	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	<del>54</del> 0(€),	UI 4940—See	= page	= 10 OL	the ms	LIUCLIO	115)			
1a		· ┌		1							
	and enter "N/A" on line 1  Date of ruling or determination letter			Į							
	(attach copy of letter if necessary-see instructions)			(							
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			ļ	1			8	3,318		
	here ▶ 🔽 and enter 1% of Part I, line 27b			. ′							
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	ations e	enter 4% of								
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	ndation	s only Other	s	2		0				
3	3 Add lines 1 and 2										
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Other	rs	4				0		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - 0		•	5			- {	3,318		
6	Credits/Payments										
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	9	,300							
b	Exempt foreign organizations—tax withheld at source	6b									
С	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				9,300		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 🔽 if Form 2	2220 is	attached 🕏	]	8						
9	$\textbf{Tax}\ \textbf{due.} If the total of lines 5 and 8 is more than line 7, enter \textbf{amount}\ \textbf{owed}\ \textbf{.}$			•	9						
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun	t overp	oaid	•	10				982		
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	982	Refunded	•	11				0		
Pai	t VII-A Statements Regarding Activities										
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislation	or di	d			Yes	No		
	it participate or intervene in any political campaign?						1a		No		
b	Did it spend more than \$100 during the year (either directly or indirectly) for p			ee In	structi	ons					
	for definition)?					•	1b		No		
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any m	ateria	ls						
	published or distributed by the foundation in connection with the activities.										
	Did the foundation file <b>Form 1120-POL</b> for this year?										
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos										
	(1) On the foundation $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			0							
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	itical e	xpenditure ta	x imp	osed						
_	on foundation managers 🕨 \$0										
2	Has the foundation engaged in any activities that have not previously been rep	ported	to the IRS?		• •		2		No		
_	If "Yes," attach a detailed description of the activities.										
3	Has the foundation made any changes, not previously reported to the IRS, in it	_	_	-		6			NI-		
4-	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confu						3	\	No		
4a	Did the foundation have unrelated business gross income of \$1,000 or more d						4a	Yes			
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b 5	Yes	No		
5	Was there a liquidation, termination, dissolution, or substantial contraction dul If "Yes," attach the statement required by General Instruction T.	ring the	e year		• •		3		NO		
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	45 \ c a	ticfied either								
Ü	By language in the governing instrument, or	7 <i>3 ) 3</i> a	cisiled either								
	<ul> <li>By state legislation that effectively amends the governing instrument so th</li> </ul>	at no n	nandatory dır	ectio	ns						
	that conflict with the state law remain in the governing instrument?						6	Yes			
7	Did the foundation have at least \$5,000 in assets at any time during the year?					),					
-	and Part XV.				• •	, 	7	Yes			
8a	Enter the states to which the foundation reports or with which it is registered (	see ins	tructions)								
	▶PA		<u> </u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attorn	ey							
	General (or designate) of each state as required by General Instruction G? If						8b	Yes			
9	Is the foundation claiming status as a private operating foundation within the r	meanın	g of section 4	1942	(၂)(3)						
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	ructions for F	art X	ΊV)?						
	If "Yes," complete Part XIV						9	igsqcut	No		
10	Did any persons become substantial contributors during the tax year? If "Yes,	" attach	a schedule li	stıng	their na	ames					
	and addresses.						10		No		

Pal	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►TODD A SACCO Telephone no ►(412	348	-3106	
	Located at ▶5700 CORPORATE DRIVE SUITE 800 PITTSBURGH PA ZIP+4 ▶1523758			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مما	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			l
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1</b> a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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 termination of government service, if terminating within 90 days )			
ь	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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?			
	If "Yes," list the years 🕨 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>▶</b> 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	No
ча b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	Ta		140
J	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pel	Lt ATT-B	Statements Rega	arding Activities to	r vvr	iich Form 4/20	мау	, ве кедигеа ( <i>com</i>	inue	1)	
5a	During the	year did the foundation	n pay or incur any amoui	nt to						
	<b>(1)</b> Carry	on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (sectıon 49	45(e	)) <sup>?</sup>	No		
	(2) Influer	nce the outcome of any	specific public election	(see	section 4955), or to	car	ry			
	on, dir	ectly or indirectly, any	voter registration drive?				\ Yes \	No No		
	(3) Provid	e a grant to an individu	ıal for travel, study, or ot	hers	ımılar purposes?		┌ Yes ┡	No No		
	(4) Provid	e a grant to an organiza	ation other than a charita	able,	etc , organization de	scrib	ped			
	ın sect	tion 4945(d)(4)(A)? (se	ee instructions)				\ \ Yes \	√ No		
	(5) Provid	e for any purpose other	r than religious, charitab	le, sc	ientific, literary, or					
	educat	tional purposes, or for t	the prevention of cruelty	to ch	ıldren or anımals?.		Г Yes <b>Г</b>	√ No		
b	If any ans	werıs "Yes" to 5a(1)–(	(5), did <b>any</b> of the transac	tions	s fail to qualify under	r the	exceptions described in			
	Regulation	ns section 53 4945 or i	ın a current notice regar	ding o	disaster assistance	(see	instructions)?		5b	
	O rganızatı	ions relying on a curren	nt notice regarding disas	teras	ssistance check her	e		-		
С	If the ansv	wer is "Yes" to questior	n 5a(4), does the founda	tion c	laım exemption fron	n the				
	tax becaus	se it maintained expend	diture responsibility for t	he gr	ant?		<b>T</b> Yes 「	- No		
	If "Yes," at	tach the statement requ	ured by Regulations section	on 53.	.4945-5(d).					
6a	Did the fou	undation, during the yea	ar, receive any funds, dir	ectly	or indirectly, to pay	prer	miums on			
	a personal	l benefit contract?					Yes	√ No		
b	Did the fou	undation, during the yea	ar, pay premiums, direct	y or i	ndirectly, on a perso	onal	benefit contract?		6b	No
	If "Yes" to	6b, file Form 8870.								
7a	At any tım	e during the tax year, v	was the foundation a part	y to a	a prohibited tax shel	lter t	ransaction?   Yes	- No		
b	If yes, dıd	the foundation receive	any proceeds or have a	ny ne	t income attributabl	e to t	the transaction?		7b	
_		Information Abou	t Officers, Director	s, T	rustees, Founda	atio	n Managers, Highly	Paid	Emp	loyees,
		and Contractors	-		-					
1	List all offi	cers, directors, trustee	s, foundation managers	and t	heir compensation (	see i		I		
			Title, and average	(c)	Compensation( <b>If</b>		<b>(d)</b> Contributions to		ynens	e account,
	(a) Nam	ne and address	hours per week (b) devoted to position		not paid, enter -0-)	е	mployee benefit plans			llowances
			(b) devoted to position	<u> </u>	<del>-0-)</del>	and	deferred compensation			
See	Additional E	Data Table								
2	Compensat	ion of five highest-paid	d employees (other than	thos	e included on line 1-	-see	instructions). If none, e	nter "N	IONE."	
		(a)	Title, and ave	rane			Contributions to			
Nar	ne and addr	ress of each employee ;			(c) Compensation	on	employee benefit plans and deferred		•	e account,
	more	e than \$50,000	(b) devoted to pos	ition			(d) compensation	(e) (	otner a	llowances
NON	IE									
								<u> </u>		
Int-	I number of	other amployage haid o	AVAR & EA AAA					1		^

and Contractors (continued)  3 Five highest-paid independent contractors for professional service	es (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	(b) Type of Service	(c) compensation
NONE		
<b>Fotal</b> number of others receiving over \$50,000 for professional service		0
	:5	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include		Expenses
organizations and other beneficiaries served, conferences convened, research papers p	,	Lxpelises
1 LAUGHLIN MEMORIAL FREE LIBRARY, AMBRIDGE, PA GENERA	,	100 220
TRAVEL CONFERENCES, MEETINGS, INSURANCE, REPAIRS A		199,320
2SINCE 1928 LAUGHLIN MEMORIAL HAS PROVIDED FUNDS FO MEMORIAL FREE LIBRARY IN AMBRIDGE PA ALL INCOME IS		
EXCESS FUNDS ARE CONTRIBUTED TO VARIOUS CHARITABLE		
SEWICKLEY AND THE SURROUNDING AREAS		0
3		
4		
Part IX-B Summary of Program-Related Investment	s (see instructions)	
Describe the two largest program-related investments made by the foundation duri	ing the tax year on lines 1 and 2	A mount
1 N/A		0
2		
All abbours was was a salabad in contrast of the contrast of t		
All other program-related investments See instructions 3 📆		_
<del>-</del>		0
<b>Fotal.</b> Add lines 1 through 3		0

#### Part X Minimum Investment Return

PG	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	3,094,020
b	Average of monthly cash balances	1b	29,197
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	3,123,217
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	3,123,217
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	46,848
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,076,369
6	Minimum investment return. Enter 5% of line 5	6	153,818
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	153,818
2a	Tax on investment income for 2015 from Part VI, line 5   2a   8,318		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b 1,768		
С	Add lines 2a and 2b	2c	10,086
3	Distributable amount before adjustments Subtract line 2c from line 1	3	143,732
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	143,732
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	143,732
	Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1-	202.220
	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	283,220
	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
_	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	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	283,220
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	2.515
_	income Enter 1% of Part I, line 27b (see instructions)	5	8,318
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	274,902
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	ertne	ioundation qualifies for

P	art XIII Undistributed I	<b>Income</b> (see instr	uctions)			
			<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2014	<b>(c)</b> 2014	( <b>d</b> ) 2015
1	Distributable amount for 2015 f	rom Part XI, line 7				143,732
2	Undistributed income, if any, as	of the end of 2015				
	Enter amount for 2014 only				0	
b	Total for prior years 20	, 20, 20		0		
	Excess distributions carryover,					
	From 2010					
b	From 2011	6,844				
c	From 2012	19,018				
d	From 2013	42,106				
	From 2014					
	<b>Total</b> of lines 3a through e		67,968			
4	Qualifying distributions for 2015					
	XII, line 4 🕨 \$					
	Applied to 2014, but not more to				0	
Ь	Applied to undistributed income (Election required—see instruction)			0		
C	Treated as distributions out of c		0			
	required—see instructions)					143,732
	Applied to 2015 distributable as Remaining amount distributed or		139,488			143,732
	Excess distributions carryover	· •	0			0
,	(If an amount appears in column i		Ů			
	same amount must be show	' ''				
6	Enter the net total of each colu	mn as				
	indicated below:		207.456			
	Corpus Add lines 3f, 4c, and 4e		207,456			
b	Prior years' undistributed income			0		
_	Inne 4b from line 2b					
٠	income for which a notice of defi					
	been issued, or on which the sec	•				
	tax has been previously assesse	ed		0		
d	Subtract line 6c from line 6b Ta			0		
	—see instructions			0		
е	Undistributed income for 2014 4a from line 2a Taxable amount					
	instructions				0	
f	Undistributed income for 2016	Subtract				
-	lines 4d and 5 from line 1 This a					_
	be distributed in 2015					0
7	Amounts treated as distributions					
	corpus to satisfy requirements in section 170(b)(1)(F) or 4942(g)					
	be required - see instructions).		0			
8	Excess distributions carryover f	The state of the s	_			
	applied on line 5 or line 7 (see in		0			
9	Excess distributions carryover to		207,456			
	Subtract lines 7 and 8 from line	6a	207,456			
	Analysis of line 9	C 044				
	Excess from 2011	6,844 19,018				
	Excess from 2012	42,106				
	Excess from 2013 Excess from 2014	42,100				
	Excess from 2014 Excess from 2015	139,488				
e	LVC622	133,700				

For	m 990-PF (2015)					Page <b>10</b>
F	Part XIV Private Operating Foundat	ions (see instri	uctions and Part	VII-A, question	ו 9)	
1a	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,					
b	Check box to indicate whether the organization	ıs a private opera	tıng foundatıon des	scribed in section	「 4942(j)(3) or	「 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	( <b>d)</b> 2012	(-)
	year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
d	line 4 for each year listed A mounts included in line 2c not used					
u	directly for active conduct of exempt					
e	Qualifying distributions made directly					
	for active conduct of exempt activities					
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)		ļ			
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					
Pa	rt XV Supplementary Information (	Complete this	part only if the	e organizatio	n had \$5,000 o	r more in
_	assets at any time during the Information Regarding Foundation Managers:	<u>year—see ins</u>	tructions.)			
1 a	List any managers of the foundation who have c	ontributed more tl	nan 2% of the tota	l contributions re	ceived by the found	ation
_	before the close of any tax year (but only if they					
Ь	List any managers of the foundation who own 10 ownership of a partnership or other entity) of wh				/ large portion of th	e
	ownership of a partnership of other entity) of wi	iicii tile loulluatioi	illas a 10 % or gre	ater interest		
<del></del>	Information Regarding Contribution, Grant, Gif	t. Loan. Scholarsh	ip. etc Programs:			
	Check here ► rif the foundation only makes co	•			nd does not accept	
	unsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and c	I				
а	The name, address, and telephone number or e	-mail address of t	he person to whom	applications sho	uld be addressed	
	TODD A SACCO					
	5700 CORPORATE DRIVE SUITE 800					
	PITTSBURGH,PA 152375851 (412)348-3106					
_		uttad and	ion and materials !	hov charlet I		
D	The form in which applications should be subm	icceu and informat	ion and materials t	ney snoula includ	le	
_	WRITTEN SOLICITATION FOR GRANTS					
C	Any submission deadlines					
	NOVEMBER 15TH OF EACH YEAR					
d	Any restrictions or limitations on awards, such	as by geographic	al areas, charitable	e fields, kinds of i	nstitutions, or othe	r

RESTRICTED TO LIBRARIES AND NON-SECTARIAN HOSPITALS OPERATING IN AMBRIDGE, PENNSYLVANIA OR IT'S VICINITY IN ADDITION TO OTHER WELFARE, CIVIC AND EDUCATIONAL ORGANIZATIONS THAT PROVIDE BENEFITS TO

AMBRIDGE RESIDENTS

Form **990-PF** (2015)

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 283,220 **b** Approved for future payment

(a) (b) (c) (d) Related or exempt function income	Part XVI-A Analysis of Income-Produc	cing Activitie	S	Γ		Ι ,,
Business code Amount Exclusion code Amount (See instructions)  Business code Amount Exclusion code Amount (See instructions)  Business code Amount Exclusion code Amount (See instructions)  Business code Amount Exclusion code Amount instructions)  Business code Amount Exclusion code Amount (See instructions)  Business code Amount Exclusion code Amount instructions)  Business code Amount Exclusion code Amount instructions)  Business code Amount Exclusion code Amount instructions)  Business code Amount Exclusion code Instructions of Amount instructions)  Business code Amount Exclusion code Instructions of Amount instructions)  Business code Amount Exclusion code Instructions of Amount instructions)  Business code Amount Exclusion code Instructions of Amount instructions of I	Enter gross amounts unless otherwise indicated			,	1	
g Fees and contracts from government agencies  g Membership dues and assessments.  Interest on savings and temporary cash investments.  Investments.  Interest on savings and temporary cash investment income or (loss) from sealeste a Debt-financed property.  Interest on savings and temporary cash investment income or (loss) from sealeste a Debt-financed property.  Interest on savings and temporary cash investment income or (loss) from sealeste a Debt-financed property.  Interest on savings and temporary cash investment income investment income or (loss) from sealeste a Debt-financed property.  Interest on savings and temporary cash investment income investment i	1 Program service revenue	1 ' '	• •			,
g Fees and contracts from government agencies  g Membership dues and assessments.  3 Interest on savings and temporary cash investments.  4 Dividends and interest from securities.  5 Net rental income or (loss) from real estate  a 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.  1 Other revenue a  b  c  d  d  e  2 Subtotal Add columns (b), (d), and (e).  3 Total-Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations)  Port XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE						
d						
## Ges and contracts from government agencies ## Ges and contracts from government agencies ## Membership dues and assessments						
g Fees and contracts from government agencies 2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
Investments						
a Debt-financed property. b Not debt-financed property. c Net rental income or (loss) from personal property. c Other investment income. c Other investment				14	12,532	
a Debt-financed property				14	31,824	
b Not debt-financed property						
Other investment income	<b>b</b> Not debt-financed property					
Other investment income						
Inventory		523000	8,898			
Net income or (loss) from special events  Gross profit or (loss) from sales of inventory  Other revenue a  b  c  d  e  Subtotal Add columns (b), (d), and (e).  Subtotal Add columns (b), (d), and (e).  Subtotal Add line 12, columns (b), (d), and (e).  Subtotal Add line 12, columns (b), (d), and (e).  Total Add line 13 instructions to verify calculations)  art XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE				4.0	042.00	
Gross profit or (loss) from sales of inventory  Other revenue a				18	813,907	
b c d Subtotal Add columns (b), (d), and (e).  Subtotal Add line 12, columns (b), (d), and (e).  Subtotal Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculations )  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE	Gross profit or (loss) from sales of inventory					
d e Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations)  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE						
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  See worksheet in line 13 instructions to verify calculations )  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE						
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations)  Relationship of Activities to the Accomplishment of Exempt Purposes  ine No.  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE						
Total.Add line 12, columns (b), (d), and (e)						
(See worksheet in line 13 instructions to verify calculations)  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE						
Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE	(See worksheet in line 13 instructions to verify	calculations )				307,101
the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)  ALL INCOME PROVIDES FUNDS FOR THE MAINTENANCE OF THE LAUGHLIN MEMORIAL FREE LIBRARY IN AMBRIDGE						
	the accomplishment of the foundation' instructions )	's exempt purpos	es (other than by	providing funds fo	r such purposes) (	See
						IN AMBRIDGE

Par	t XVII	Information Re Noncharitable					sactions	and I	Relationships	With			
		rganization directly or ii 01(c) of the Code (othe	ndırectly e	engage i	n any of t	he following wi						Yes	No
or	ganızat	ions?											
<b>a</b> Tr	ansfers	from the reporting four	ndation to	a nonch	arıtable e	exempt organız	ation of						
(1	.) Cash	1									1a(1)		No
(2	2) Othe	erassets									1a(2)		No
<b>b</b> 0	ther tra	nsactions											
(1	.) Sale	s of assets to a noncha	rıtable exe	empt or	ganızatıoı	n					1b(1)		No
(2	2) Purc	hases of assets from a	noncharıt	able exe	empt orga	inization					1b(2)		No
(3	) Rent	al of facilities, equipme	nt, or othe	erasset	s						1b(3)		No
(4	l) Reim	nbursement arrangemen	its								1b(4)		No
(5	) Loan	s or loan guarantees.									1b(5)		No
		mance of services or m									1b(6)		No
		f facilities, equipment, i									1c		No
of	the goo any tra	wer to any of the above ods, other assets, or se insaction or sharing arrange (b) Amount involved	rvices giv angement	en by th , show 11	ne reporti n column	ng foundation	If the found of the good:	dation r s, other	eceived less thai	n fair marke ces receive	et value ed		nte
(a) Li	ic No	(b) Amount involved	(C) Name	OI HOHEIR	antable exe	inpt organization	(4) 50	.scription	or transfers, transact	tions, and she	illing arrai	igenien	11.5
de	escribed	indation directly or indi d in section 501(c) of th complete the following : (a) Name of organization	ne Code (c schedule		an sectioi		'ın section			ption of relation		s 🔽	No
								+					
Sign Here	the Info	ler penalties of perjury, best of my knowledge a rmation of which prepar *****	nd belief,	ıt ıs tru	e, correct		e Declarat			May ti return with ti	r) is bas he IRS dis he prepar	ed on scuss th	all
	<u></u>	Signature of officer or t	rustee			Date	, r	itle		below (see i	nstr )? 🔽	Yes N	10
		Print/Type preparer's JAMES P BERNACK		Prepar	er's Sıgn	ature	Date		Check if self- employed ►	PTIN P(	002871	31	
Paid Prep Use	parer	Firm's name FCARR & ASSOCIATE	S				•		Firm's EIN ► 2	0-222798	9		
Only	<b>/</b>	508 ALLEGHENY RIV PA 151391655		Phone no (412)828-6200									

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)	(b) How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
2,000 SHRS EATON CORP	Р	2010-01-01	2015-02-09
1,500 SHRS ABERCROMBIE & FITCH	Р	2010-01-01	2015-02-09
400 SHRS CA RESOURCES CORP	Р	2010-01-01	2015-02-09
2,000 SHRS HALLIBURTON	Р	2010-01-01	2015-02-09
1,000 SHRS NATIONAL OILWELL VARCO	Р	2010-01-01	2015-02-09
1,000 SHRS OCCIDENTAL PETROLEUM	Р	2010-01-01	2015-03-17
1,000 SHRS QUALCOMM	Р	2010-01-01	2015-02-09
1,000 WISDOMTREE JAPAN HEDGED EQUITY	Р	2010-01-01	2015-02-09
1,000 SHRS MICHAEL KORS HOLDINGS	Р	2010-01-01	2015-04-16
1,000 SHRS ANADARKO PETROLEUM	Р	2010-01-01	2015-04-16

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
139,848		103,310	36,538
36,018		56,629	-20,611
2,597		3,037	-440
87,038		51,271	35,767
52,679		55,152	-2,473
72,600		84,073	-11,473
67,127		45,185	21,942
50,019		51,810	-1,791
63,638		46,954	16,684
94,519		6,933	87,586

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis <b>(j)</b> as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			36,538
			-20,611
			-440
			35,767
			-2,473
			-11,473
			21,942
			-1,791
			16,684
			87,586
			87,586

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 )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
930 SHRS ENTERPRISE PRODS PARTNERS	Р	2010-01-01	2015-04-16
930 SHRS ENTERPRISE PRODS PARTNERS 4797	Р	2015-01-01	2015-04-16
1,030 SHRS MAGELLAN MIDSTREAM PARTNERS	Р	2010-01-01	2015-04-16
1,030 SHRS MAGELLAN MIDSTREAM PARTNERS	Р	2015-01-01	2015-04-16
500 SHRS SCHLUMBERGER	Р	2010-01-01	2015-04-16
1,000 SHRS ANADARKO PETROLEUM	Р	2010-01-01	2015-05-08
1,500 SHRS CSX	Р	2010-01-01	2015-05-08
500 SHRS CANADIAN PACIFIC RAILWAY	Р	2010-01-01	2015-05-26
1,500 SHRS ENTERPRISE PRODS PARTNERS	Р	2010-01-01	2015-05-08
1,500 SHRS ENTERPRISE PRODS PARTNERS 4797	Р	2015-01-01	2015-05-08

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
31,713		9,537	21,409
12,955			12,955
82,986		16,011	60,438
11,917			11,917
45,474		7,024	38,450
88,194		6,933	81,261
55,218		37,019	18,199
87,129		31,324	55,805
49,880		15,382	33,606
20,975			20,975

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis <b>(j)</b> as of 12/31/69	Excess of col (1) (k) over col (j), If any	col (k), but not less than -0-) or (I) Losses (from col (h))
			21,409
			12,955
			60,438
			11,917
			38,450
			81,261
			18,199
			55,805
			33,606
			20,975

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 )	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr )	(d) Date sold (mo , day, yr )
500 SHRS MAGELLAN MIDSTREAM PARTNERS	Р	2010-01-01	2015-05-08
500 SHRS MAGELLAN MIDSTREAM PARTNERS	Р	2015-01-01	2015-05-08
1,000 SHRS SANOFI SPONSORED ADR	Р	2010-01-01	2015-05-08
630 ILLINOIS TOOL WORKS	Р	2010-01-01	2015-07-29
60 SHRS ALLERGAN	Р	2010-01-01	2015-09-23
50 SHRS LIBERTY LILAC GROUP	Р	2010-01-01	2015-08-28
1,500 SHRS MYLAN	Р	2010-01-01	2015-09-22
600 SHRS APPLE	Р	2010-01-01	2015-09-03
500 SHRS CANADIAN PACIFIC RAILWAY	Р	2010-01-01	2015-09-03
1,000 SHRS CAVIUM	Р	2010-01-01	2015-09-03

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
41,443		7,772	30,661
5,866			5,866
49,769		42,335	7,434
56,218		30,549	25,669
17,279		17,760	-481
1,699		2,242	-543
68,470		91,382	-22,912
66,459		21,547	44,912
69,629		31,324	38,305
68,777		30,029	38,748

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis <b>(j)</b> as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			30,661
			5,866
			7,434
			25,669
			-481
_			-543
			-22,912
			44,912
			38,305
			38,748

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 )	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
1,500 SHRS ENTERPRISE PRODS PARTNERS	Р	2010-01-01	2015-09-03
1,500 SHRS ENTERPRISE PRODS PARTNERS	Р	2015-01-01	2015-09-03
500 SHRS MAGELLAN MIDSTREAM PARTNERS	Р	2010-01-01	2015-09-03
500 SHRS MAGELLAN MIDSTREAM PARTNERS	Р	2015-01-01	2015-09-03
350 SHRS TJX COMPANIES	Р	2010-01-01	2015-09-15
760 SHRS APPLE	Р	2010-01-01	2015-10-23
730 SHRS MACY'S	Р	2010-01-01	2015-12-04
400 SHRS MCKESSON	Р	2010-01-01	2015-12-01
ENTERPRISE PRODUCTS PTNRS GAIN	Р	2010-01-01	2015-12-31
ENTERPRISE PRODUCTS PTNRS 1231	Р	2010-01-01	2015-12-31

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
41,222		15,382	24,933
19,891			19,891
35,317		7,772	24,122
6,491			6,491
24,837		23,650	1,187
89,874		27,293	62,581
28,173		36,108	-7,935
75,844		90,805	-14,961
188			188
		112	-112

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Excess of col (1) <b>(k)</b> over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			24,933
			19,891
			24,122
			6,491
			1,187
			62,581
			-7,935
			-14,961
			188
			-112

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 )	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr )	(d) Date sold (mo , day, yr )
THE OVERLOOK PARTNERS FUND	Р	2015-01-01	2015-12-31
THE OVERLOOK PARTNERS FUND	Р	2014-01-01	2015-12-31
CAPITAL GAINS DIVIDENDS	Р		

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

Torin 330rr rure 14 Cupic	Columnia C II		
(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
9,142			9,142
3,961			3,961
16			16

Form 990PF Part IV - Capital Gams and Losses for Tax on Investment Income - Columns I - I					
Complete only for assets show	Gains (Col (h) gain minus				
(i) F M V as of 12/31/69	A djusted basıs <b>(j)</b> as of 12/31/69	Excess of col (1) (k) over col (1), If any	col (k), but not less than -0-) <b>or</b> (l) Losses (from col (h))		
			9,142		
			3,961		
			16		

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ALEXANDER M LAUGHLIN	TRUSTEE	0	0	0
DELTEC ASSET MGMT 623 FIFTH AVENUE 28TH FLOOR NEW YORK,NY 10022	0 00			
DAVID W LAUGHLIN	TRUSTEE	0	0	0
29 OCEAN AVENUE EAST HAMPTON,NY 11937	0 00			
WILLIAM J SIMPSON	TRUSTEE	0	0	0
525 WILLIAM PENN PLACE SUITE 3901 PITTSBURGH,PA 15219	0 00			
JAMES F SCHELL	TRUSTEE	0	0	0
OHIO VALLEY LUMBER 328 FOURTEENTH STREET AMBRIDGE,PA 15003	0 00			
ROBERT E TAGGART	TRUSTEE	0	0	0
250 PARK STREET BEAVER,PA 15090	0 00			
JAMES P WETZEL JR	TRUSTEE	0	0	0
832 RIDGE ROAD AMBRIDGE,PA 15003	0 00			
TODD A SACCO	TRUSTEE	18,721	0	0
5700 CORPORATE DRIVE PITTSBURGH,PA 15237	10 00			
ALEXANDER M LAUGHLIN JR	TRUSTEE	0	0	0
54 GREENWICH HILLS DRIVE GREENWICH,CT 06831	0 00			
DOUG FLOREY	TRUSTEE	0	0	0
ONE OLD FARM ROAD ROSSLYN FARMS,PA 15106	0 00			

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ALLEGHENY VALLEY SCHOOL 1996 EWINGS MILL ROAD CORAOPOLIS,PA 15108		PUBLIC	OPERATING BUDGET	4,000
BADEN MEMORIAL LIBRARY 385 STATE STREET BADEN,PA 15005		PUBLIC	OPERATING BUDGET	3,000
CENTER FOR HOPE 740 PARK ROAD1 AMBRIDGE,PA 15003		PUBLIC	OPERATING BUDGET	15,000
CORNELL HIGH SCHOOL BOYS' BASKETBALL PROGRAM 1099 MAPLE STREET CORAOPOLIS,PA 15108		PUBLIC	OPERATING BUDGET	3,000
FRIENDS OF OLD ECONOMY 270 SIXTEENTH STREET AMBRIDGE,PA 15003		PUBLIC	OPERATING BUDGET	3,000
GIRLS HOPE OF PITTSBURGH INC 1020 STATE STREET BADEN,PA 15005		PUBLIC	OPERATING BUDGET	2,000
HABITAT FOR HUMANITY 121 HABITAT STREET AMERICUS,GA 31709		PUBLIC	OPERATING BUDGET	5,000
LAUGHLIN MEMORIAL FREE LIBRARY 99 ELEVENTH AVENUE AMBRIDGE,PA 15003		PUBLIC	OPERATING BUDGET	199,320
LIFESTEPS OF BEAVER COUNTY INC 138 FRIENDSHIP CIRCLE BEAVER,PA 15009		PUBLIC	OPERATING BUDGET	11,400
MARY & ALEXANDER LAUGHLIN CHILDREN'S CENTER 424 FREDERICK AVENUE SEWICKLEY,PA 15143		PUBLIC	OPERATING BUDGET	20,000
QUIGLEY CATHOLIC HIGH SCHOOL 200 QUIGLEY DRIVE BADEN,PA 15005		PUBLIC	OPERATING BUDGET	2,500
SEWICKLEY VALLEY YMCA 625 BLACKBURN ROAD SEWICKLEY,PA 15143		PUBLIC	OPERATING BUDGET	5,000
STAY OFF THE STREETS INC 1090 TUSCARAWAS ROAD BEAVER,PA 15009		PUBLIC	OPERATING BUDGET	1,000
VILLAGE THEATRE COMPANY 521 THORN STREET SEWICKLEY,PA 15143		PUBLIC	OPERATING BUDGET	5,000
WE CARE FOOD KITCHEN STATE DIPPOLD STREETS		PUBLIC	OPERATING BUDGET	1,000

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

Recipient	If recipient is an individual,		Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
WOMEN'S CENTER OF BEAVER COUNTY PO BOX 428 BEAVER,PA 15009		PUBLIC	OPERATING BUDGET	3,000
Total			▶ 3a	283,220

## **TY 2015 Accounting Fees Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,400	1,400	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491224007376

## TY 2015 All Other Program Related Investments Schedule

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Category	Amount	
N/A	0	l

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491224007376
·		

## **TY 2015 Investments Corporate Bonds Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Name of Bond	End of Year Book Value	End of Year Fair Market Value
PNC BANK TRUST - BONDS	203,250	221,904

	efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491224007376
'			

## **TY 2015 Investments Corporate Stock Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PNC BANK TRUST - STOCK	1,849,169	23,099,950

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## **TY 2015 Investments Government Obligations Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

0

**EIN:** 25-1072140

**US Government Securities - End of** 

Year Book Value: 216,209

**US Government Securities - End of** 

Year Fair Market Value: 216,210

State & Local Government Securities - End of Year Book

Value: 0

State & Local Government Securities - End of Year Fair

s - End of Year Fair Market Value:

arket value:

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491224007376

### **TY 2015 Investments - Other Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MAGELLAN MIDSTREAM PARTNERS, PL	AT COST	4,442	33,960
OVERLOOK FUND	AT COST	316,289	310,763
ENTERPRISE PRODUCTS PARTNERS	AT COST	11,445	38,370

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### **TY 2015 Other Assets Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
PNC BANK TRUST 4115-5 AT COST	170,137	168,689	0

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### **TY 2015 Other Decreases Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Description	Amount
TO ADJUST CARRYING VALUE ON IRREV PNC TRUST #4115-5	1,448

## **TY 2015 Other Expenses Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PASSTHROUGH EXPENSES	36	36	0	0
MEMORIAL PLAQUES	560	560	0	0

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

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ENTERPRISE PRODUCTS PARTNERS	5,768	5,768	5,768
MAGELLAN MIDSTREAM PARTNERS	3,070	3,070	3,070
PASSTHROUGH INCOME	60	60	60

### DLN: 93491224007376

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

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	29,603	29,603	0	0
PAYROLL FEES	987	987	0	0
OTHER INVESTMENT FEES	87	87	0	0
BANK FEES	39	39	0	0

### **TY 2015 Taxes Schedule**

Name: LAUGHLIN MEMORIAL INC

C/O TODD A SACCO TREASURER

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	1,556	1,556	0	0
FEDERAL EXCISE TAXES	19,359	0	0	0
FOREIGN TAXES	1,125	1,125	0	0

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As Filed Data -

DLN: 93491224007376

\_N. 93491224007370

OMB No 1545-0047

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### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

LAUGHLIN MEMORIAL INC

#### **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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2015

**Employer identification number** 

C/O TODD A SACCO TREAS	SURER	25-1072140
Organization type (check or	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	□ 501(c)( ) (enter number) organization	
	☐ 527 political organization	
Form 990-PF	√ 501(c)(3) exempt private foundation	
	501(c)(3) taxable private foundation	
, .	covered by the <b>General Rule</b> or a <b>Special Rule</b> . (), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule See instructions
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a	
Special Rules		
under sections 509(a) received from any one	escribed in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 B\%$ support (1) and $170(b)(1)(A)(v)$ , that checked Schedule A (Form 990 or 990-EZ), Part is contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that
during the year, total o	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions of more than \$1,000 exclusively for religious, charitable, scientific, cruelty to children or animals. Complete Parts I, II, and III	<del>-</del>
during the year, contri this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received butions exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excludete any of the parts unless the <b>General Rule</b> applies to this organization becatic, contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

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), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization LAUGHLIN MEMORIAL INC C/O TODD A SACCO TREASURER Employer identification number 25-1072140

art I	Contributors (see instructions) Use duplicate copies of Part I if additional	•	7.0	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
140.	PNC BANK CO CHRISTIAN SNYDER ACCOUNT MANAGER-IRR TRUST 411	Total contributions		
1	$\dashv$		Person	ਾ -
	620 LIBERTY AVENUE 2 PNC PLAZA	\$ 9,620	Payroll	<u> </u>
	PITTSBURGH, PA 15222		Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
			Payroll	Г
		<u>\$</u>	Noncash	Г
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
	-		Payroll	Г
			Noncash	Г
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
		\$	Payroll	Г
		_	Noncash	Г
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
		-	Payroll	Г
		<u>\$</u>	Noncash	Г
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
		-	Payroll	Г
	-	<u>\$</u>	Noncash	Г
			(Complete Part II f	or noncash

Name of organization **Employer identification number** LAUGHLIN MEMORIAL INC C/O TODD A SACCO TREASURER 25-1072140 Noncash Property Part II (see instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) Description of noncash property given No.from Part I Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) Description of noncash property given No.from Part I Date received (see instructions) (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions)

Page 4

Name of	organization	
.AUGHL	IN MEMORIAL INC	
C/O TOI	DD A SACCO TREASURE	R

Employer identification number

total more line entry. of \$1,000 or	religious, charitable, etc., contributhan \$1,000 for the year from any o	tions to organizations described ne contributor. Complete column II, enter the total of exclusively re mation once. See instructions.)	s (a) through (e) and the following ligious, charitable, etc., contributions
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =	Transferee's name, address, and	(e) Transfer of gift I ZIP4 Rel	ationship of transferor to transferee
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and	(e) Transfer of gift I ZIP4 Rel	ationship of transferor to transferee
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift I ZIP 4 Rel:	ationship of transferor to transferee
(a) lo.from Part I —	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and	(e) Transfer of gift I ZIP4 Rel	ationship of transferor to transferee
<del>-</del> -			