



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

Name of foundation THE ROBERT AND ANGELA ORTENZIO FAMILY FOUNDATION		<b>A Employer identification number</b>  25-6843186	
Number and street (or P O box number if mail is not delivered to street address) 4718 GETTYSBURG ROAD - STE 405		Room/suite	<b>B</b> Telephone number (see instructions)  (717) 972-1300
City or town, state or province, country, and ZIP or foreign postal code MECHANICSBURG, PA 17055		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/>  <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>H</b> 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		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$</b> 5,051,341		<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input 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	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .	959,856			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities . . . . .	90,600	89,787		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	391,407			
	<b>b</b> Gross sales price for all assets on line 6a 2,686,271				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . .		391,407		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .	1,372	1,372		
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	1,443,235	482,566		
	<b>13</b> Compensation of officers, directors, trustees, etc				
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule). . . . .	3,900	1,300		2,600
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . .	135			
	<b>19</b> Depreciation (attach schedule) and depletion . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	13,342	13,093		15
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	17,377	14,393		2,615
	<b>25</b> Contributions, gifts, grants paid . . . . .	372,500			372,500
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	389,877	14,393		375,115
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	1,053,358			
	<b>b Net investment income</b> (if negative, enter -0-)		468,173		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .		207	2,424	2,424
	2	Savings and temporary cash investments . . . . .		76,411	272,210	272,210
	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)		70,904	193,953	189,726
	b	Investments—corporate stock (attach schedule) . . . . .		1,227,656	811,949	3,339,929
	c	Investments—corporate bonds (attach schedule) . . . . .		330,086	1,373,647	1,246,928
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12	Investments—mortgage loans . . . . .				
	13	Investments—other (attach schedule) . . . . .		22,818		
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
15	Other assets (describe ▶ _____)		1,695	124	124	
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)		1,729,777	2,654,307	5,051,341	
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	<b>Total liabilities</b> (add lines 17 through 22) . . . . .			0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>					
	24	Unrestricted . . . . .				
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>					
	27	Capital stock, trust principal, or current funds . . . . .		1,729,777	2,654,307	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .		1,729,777	2,654,307		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .		1,729,777	2,654,307		

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	1,729,777
2	Enter amount from Part I, line 27a . . . . .	2	1,053,358
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	2,783,135
5	Decreases not included in line 2 (itemize) ▶ _____	5	128,828
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	2,654,307

Part IV

Capital Gains and Losses for Tax on Investment Income

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

<b>(e)</b> Gross sales price	Depreciation allowed <b>(f)</b> (or allowable)	Cost or other basis <b>(g)</b> plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
<b>a</b>	See Additional Data Table		
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

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 Losses (from col (h)) <b>(l)</b>
<b>(i)</b> F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col (i) <b>(k)</b> over col (j), if any	
<b>a</b>	See Additional Data Table		
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b>	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	<b>2</b>	391,407
<b>3</b>	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		<b>3</b>	-3,836

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

<b>(a)</b> Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use assets	<b>(d)</b> Distribution ratio (col (b) divided by col (c))
2014	440,915	3,438,212	0 128240
2013	1,040,177	2,681,232	0 387947
2012	1,246,151	2,605,713	0 478238
2011	1,482,806	3,052,230	0 485811
2010	826,085	4,067,754	0 203081

<b>2</b>	Total of line 1, column (d).	<b>2</b>	1 683317
<b>3</b>	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	<b>3</b>	0 336663
<b>4</b>	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	<b>4</b>	4,672,173
<b>5</b>	Multiply line 4 by line 3.	<b>5</b>	1,572,948
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b).	<b>6</b>	4,682
<b>7</b>	Add lines 5 and 6.	<b>7</b>	1,577,630
<b>8</b>	Enter qualifying distributions from Part XII, line 4.	<b>8</b>	375,115

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 VIIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a

Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1  
Date of ruling or determination letter \_\_\_\_\_  
(attach copy of letter if necessary—see instructions)

2

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

3

Add lines 1 and 2.

4

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

5

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

6

Credits/Payments

6a

2015 estimated tax payments and 2014 overpayment credited to 2015

1,970

6b

Exempt foreign organizations—tax withheld at source

6c

Tax paid with application for extension of time to file (Form 8868).

10,000

6d

Backup withholding erroneously withheld

7

Total credits and payments Add lines 6a through 6d.

8

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

9

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

10

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

11

Enter the amount of line 10 to be Credited to 2015 estimated tax 2,607 Refunded

1

9,363

9,363

11,970

2,607

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
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>			No
1b				
1c	Did the foundation file Form 1120-POL for this year?			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
4b	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			
8b	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

Form 990-PF (2015)

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	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). . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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) . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>ROBERT L NAUSE</u> Telephone no ► <u>(717) 972-1305</u> Located at ► <u>4718 GETTYSBURG ROAD SUITE 405 MECHANICSBURG PA</u> ZIP+4 ► <u>17055</u>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► <b>15</b>			
<b>16</b>	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 ►	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.			<b>Yes</b>	<b>No</b>
<b>1a</b>	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 checked="" type="checkbox"/> Yes <input 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? ( <b>Exception.</b> 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>b</b>	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)? . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>	<b>1b</b>		<b>No</b>
<b>c</b>	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? . . . . .	<b>1c</b>		
<b>2</b>	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))			
<b>a</b>	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>b</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 ). . . . .	<b>2b</b>		
<b>c</b>	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 ► 20____, 20____, 20____, 20____			
<b>3a</b>	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>b</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> ). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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?	<b>4b</b>		<b>No</b>

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
ROBERT A ORTENZIO 1716 OLMSTEAD WAY E CAMP HILL, PA 17011	TRUSTEE 5 00	0	0	0
ANGELA D ORTENZIO 1716 OLMSTEAD WAY E CAMP HILL, PA 17011	TRUSTEE 5 00	0	0	0

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

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

▶

**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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b> N/A	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	

Total. Add lines 1 through 3 . . . . . ▶



**Part X Minimum Investment Return**

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	4,666,976
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	76,347
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	4,743,323
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	4,743,323
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	71,150
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	4,672,173
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	233,609

**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.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	233,609
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	9,363
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	9,363
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	224,246
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	224,246
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	224,246

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	375,115
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	375,115
<b>5</b>	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). . . . .	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	375,115

**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				224,246
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. . . . .				625,623
b From 2011. . . . .				1,331,800
c From 2012. . . . .				1,122,793
d From 2013. . . . .				913,657
e From 2014. . . . .				270,969
f Total of lines 3a through e. . . . .	4,264,842			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 375,115				
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. . . . .				224,246
e Remaining amount distributed out of corpus	150,869			
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	4,415,711			
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). . .	625,623			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a. . . . .	3,790,088			
10 Analysis of line 9				
a Excess from 2011. . . .				1,331,800
b Excess from 2012. . . .				1,122,793
c Excess from 2013. . . .				913,657
d Excess from 2014. . . .				270,969
e Excess from 2015. . . .				150,869

## Part XIV

--

**b** Check box to indicate whether the organization

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

## Part XV

**1 Information Regarding Foundation Managers:**

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

ROBERT A. ORTENZIO

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.

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

ROBERT A ORTENZIO  
4718 GETTYSBURG ROAD  
SUITE 405  
MECHANICSBURG, PA 17055  
(717) 972-1305

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

A LETTER STATING REQUEST FOR FUNDS AND EXPLANATION OF NEED

Any submission deadlines

APPLICATIONS ARE ACCEPTED AT ANY TIME

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

GRANTS ARE PRIMARILY TO CHARITABLE ORGANIZATIONS SUPPORTING THE ARTS, PROVIDING HEALTHCARE, EDUCATION, OR IMPROVED QUALITY OF LIFE TO THOSE IN NEED, AND/OR SUPPORTING OTHER CHARITABLE OR EDUCATIONAL PURPOSES. THE FOUNDATION DOES NOT EXPECT TO MAKE GRANTS TO INDIVIDUALS.

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	372,500
b Approved for future payment BISHOP MCDEVITT HS 1 CRUSADER WAY HARRISBURG,PA 17111	N/A	PUBLIC	CONSTRUCT EDUCATIONAL FACILITY	200,000
Total . . . . .			▶ 3b	200,000

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)

## Part XVII

**1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a** Transfers from the reporting foundation to a noncharitable exempt organization of

**b Other transactions**

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
-------------	---------------------	---	--

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . .

☒ No

**b** If "Yes," complete the following schedule

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

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below

(see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use  
Only**

Print/Type preparer's name RICHARD A BLUIS CPA	Preparer's Signature	Date 2016-10-31	Check if self-employed <input type="checkbox"/>	PTIN P00486887
Firm's name <input type="checkbox"/> MARTIN M SACKS & ASSOCIATES			Firm's EIN <input type="checkbox"/>	23-1979781
Firm's address <input type="checkbox"/> 4775 LINGLESTOWN RD STE 100 HARRISBURG, PA 17112			Phone no <input type="checkbox"/>	(717) 657-1300

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

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 )	(d) Date sold (mo , day, yr )
LOSS FROM PASS THRU ENTITY	P	2014-01-01	2015-12-31
SEE ATTACHED JP MORGAN STMT 93081	P	2015-01-01	2015-12-31
SEE ATTACHED JP MORGAN STMT 93081	P	2014-12-01	2015-12-31
SEE ATTACHED JP MORGAN STMT 93081	P	2014-12-01	2015-12-31
SEE ATTACHED JP MORGAN STMT 09102	P	2015-01-01	2015-12-31
SEE ATTACHED JP MORGAN STMT 09102	P	2015-01-01	2015-12-31
SEE ATTACHED JP MORGAN STMT 09102	P	2014-12-01	2015-12-31
SEE ATTACHED JP MORGAN STMT 09102	P	2014-12-01	2015-12-31
SELECT STRATEGY PARTNERS, L P	P	2006-01-03	2015-12-31

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
		11,248	-11,248
245,486		249,674	-4,188
204,176		209,848	-5,672
14,335		14,566	-231
908,391		908,039	352
69,375		69,375	
918,881		614,614	304,267
323,026		217,500	105,526
2,523			2,523

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-11,248
			-4,188
			-5,672
			-231
			352
			304,267
			105,526
			2,523

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)				
<b>a</b> <i>Paid during the year</i>				
ST THERESA PARISH 1300 BRIDGE STREET NEW CUMBERLAND,PA 17070	N/A	PUBLIC	ORGANIZATIONS EXEMPT PURPOSE	37,500
WEST SHORE FOUNDATION 507 FISHING CREEK ROAD NEW CUMBERLAND,PA 17070	N/A	PUBLIC	ORGANIZATIONS EXEMPT PURPOSE	5,000
BISHOP MCDEVITT HS 1 CRUSADER WAY HARRISBURG,PA 17111	N/A	PUBLIC	CONSTRUCT EDUCATIONAL FACILITY	200,000
UNIVERSITY OF NOTRE DAME 400 MAIN BUILDING NOTRE DAME,IN 46556	N/A	PUBLIC	ORGANIZATIONS EXEMPT PURPOSE	75,000
BISHOP MCDEVITT HS 1 CRUSADER WAY HARRISBURG,PA 17111	N/A	PUBLIC	ORGANIZATIONS EXEMPT PURPOSE	55,000
<b>Total . . . . . ▶ 3a</b>				372,500



**TY 2015 Accounting Fees Schedule**

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
MARTIN M SACKS & ASSOCIATES				
PREPARATION OF FORM 990-PF	3,900	1,300		2,600

# TY 2015 Investments Corporate Bonds Schedule

**Name:** THE ROBERT AND ANGELA ORTENZIO

FAMILY FOUNDATION

**EIN:** 25-6843186

Name of Bond	End of Year Book Value	End of Year Fair Market Value
OSTERWEIS STRATEGIC	38,673	35,600
VANGUARD S/T CORP BOND ETF	24,094	23,697
OPPENHEIMER SR	118,725	110,436
PIMCO INCOME FD - D	22,224	21,074
WELLS FARGO ADVANTAGE		
VANGUARD FI SEC SHRT BD	69,654	68,487
TOLL BROS FINANCE CORP 8.91	5,509	5,595
TOLL BROS FINANCE CORP 4.00	15,305	15,293
DELL INC	25,772	25,750
DISH DBS CORP	27,715	27,188
CHS/COMMUNITY HEALTH SYS	64,398	60,450
KINDER HEALTHCARE INC	46,355	42,075
TENET HEALTHCARE CORP	124,361	112,100
HCA INC	75,505	75,348
CONSOL ENERGY INC	82,887	60,000
CHS/COMMUNITY HEALTH SYS	105,727	99,625
HD SUPPLY INC	50,319	48,785
ICAHN ENTERPRISES/FIN	8,328	8,012
GOODYEAR TIRE & RUBBER	11,921	11,850
HDTFS INC	61,163	62,250

Name of Bond	End of Year Book Value	End of Year Fair Market Value
RANGE RESOURCES CORP	26,001	19,625
SELECT MEDICAL CORP	219,024	190,750
RITE AID CORP	37,085	36,750
DENBURY RESOURCES INC	38,900	14,300
PENN NATIONAL GAMING INC	45,846	43,875
HEALTHSOUTH CORP	28,156	28,013
JP MORGAN FLOAT RATE INCOME FD		
FIDELITY FLOATING RATE HIGH INCOME		
PUTNAM DIVERSIFIED INCOME TRUST		
RIVERNORTH FDS		

**TY 2015 Investments Corporate Stock Schedule**

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
SELECT MEDICAL CORP		2,382,000
APPLE INC	86,982	142,733
FPA CRESCENT FUND	113	106
GENERAL ELECTRIC CO	53,538	101,082
SPDR DOW JONES INDUSTRIAL	276,142	292,651
SPDR S&P 500 ETF TRUST	323,884	350,860
T ROWE PRICE CAPITAL APPREC	389	391
GREENSPRING FUND INC COM	423	373
KINDRED HEALTHCARE INC	70,478	69,733
MAINSTAY MARKETFIELD FUND - I		
MICROSOFT CORP		
JPM INCOME BUILDER FD - SEL		

## TY 2015 Investments Government Obligations Schedule

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

**US Government Securities - End of  
Year Book Value:**

193,953

**US Government Securities - End of  
Year Fair Market Value:**

189,726

**State & Local Government  
Securities - End of Year Book  
Value:**

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

**TY 2015 Investments - Other Schedule**

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
LIMITED PARTNERSHIP INTEREST IN			
INVESTMENT PARTNERSHIP:			
SELECT STRATEGY PARTNERS, L.P.	FMV		

**TY 2015 Other Assets Schedule**

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ACCRUED INTEREST PAID	1,373		
INCOME IN TRANSIT	322	124	124

**TY 2015 Other Decreases Schedule**

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

Description	Amount
ADJUST FMV OF NON-CASH CONTRIBUTION TO COST BASIS	128,828



**TY 2015 Other Expenses Schedule**

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
ASSET MGMT & CUSTODY FEES	12,812	12,812		
MISCELLANEOUS	249			15
PASS-THRU ENTITY	281	281		

**TY 2015 Other Income Schedule**

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER ORDINARY INV INCOME	1,372	1,372	

## TY 2015 Taxes Schedule

**Name:** THE ROBERT AND ANGELA ORTENZIO  
FAMILY FOUNDATION

**EIN:** 25-6843186

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990PF	135			

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

<div>Name of the organization</div> <div>THE ROBERT AND ANGELA ORTENZIO FAMILY FOUNDATION</div>	<div>Employer identification number</div> <div>25-6843186</div>
---	---

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<div><input type="checkbox"/> 501(c)( ) (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div>
Form 990-PF	<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>

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 33<sup>1</sup>/<sub>3</sub>% 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).

<b>Name of organization</b> THE ROBERT AND ANGELA ORTENZIO FAMILY FOUNDATION	<b>Employer identification number</b> 25-6843186
--	---

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	ROBERT A ORTENZIO	\$ 959,856	Person <input type="checkbox"/>
	1716 OLMSTEAD WAY EAST		Payroll <input type="checkbox"/>
	CAMP HILL, PA 17011		Noncash <input checked="" 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 )

<b>Name of organization</b> THE ROBERT AND ANGELA ORTENZIO FAMILY FOUNDATION	<b>Employer identification number</b>  25-6843186
--	---

**Part II**

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

(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1,557 SHS SPDR DOW JONES	\$ 275,028	2015-12-17
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	3,245 SHS GENERAL ELECTRIC	\$ 99,914	2015-12-17
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1,936 SHS SPDR S&P 500	\$ 364,442	2015-12-17
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1,356 SHS APPLE INC	\$ 149,994	2015-12-17
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	5,855 SHS KINDRED HEALTHCARE	\$ 70,478	2015-12-17
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

<b>Name of organization</b> THE ROBERT AND ANGELA ORTENZIO FAMILY FOUNDATION	<b>Employer identification number</b> 25-6843186
--	---

**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	
	_____ _____ --	_____ _____ _____	

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 93081-00-0

## Capital Gain and Loss Schedule

### Short-Term Covered

\* Code W indicates Wash Sale  
L indicates a Nondeductible Loss other than a Wash Sale  
\*\* Ordinary Income D indicates Ordinary Income gain or loss  
F indicates Foreign Exchange gain or loss on Capital transactions

Description	CUSIP	Code *	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
FPA CRESCENT FUND	30254T759		02/25/2014 01/26/2015	595.061	20,000.00	19,761.99		238.01
MAINSTAY MARKETFIELD FUND-I	56064B852		02/25/2014 01/21/2015	852.547	13,598.12	15,900.00		-2,301.88
NUVEEN HIGH YLD MUNI BND-I	67065Q772		02/26/2015 04/13/2015	1,157.407	20,000.00	20,034.72		-34.72
NUVEEN HIGH YLD MUNI BND-I	67065Q772		02/26/2015 09/23/2015	1,268.936	21,483.09	21,965.28		-482.19
PIMCO FDS	72201F458		02/26/2015 04/15/2015	1,598.721	20,000.00	19,776.18		223.82
PROFESSIONALLY MANAGED PORTFOLIOS	742935489		03/27/2014 01/26/2015	334.169	3,819.55	4,000.00		-180.45
PUTNAM DIVERSIFIED INCOME TR	746704501		02/26/2015 10/15/2015	230.063	1,612.75	1,739.28		-126.53
PUTNAM DIVERSIFIED INCOME TR	746704501		02/26/2015 10/21/2015	1,422.475	10,000.00	10,753.91		-753.91
RIVERNORTH FDS	76881N202		02/26/2015 08/24/2015	1,145.082	11,989.01	12,447.04		-458.03
T ROWE PRICE CAPITAL APPREC	77954M105		02/25/2014 01/26/2015	303.667	7,983.41	7,950.00		33.41
VANGUARD FI SEC SHRT BD PORTFOLIO	922031406		04/13/2015 05/13/2015	933.707	10,000.00	10,028.02		-28.02
VANGUARD FI SEC SHRT BD PORTFOLIO	922031406		04/14/2015 05/18/2015	2,801.120	30,000.00	30,084.03		-84.03
VANGUARD FI SEC SHRT BD PORTFOLIO	922031406		04/14/2015 05/19/2015	2,336.449	25,000.00	25,093.46		-93.46





## Capital Gain and Loss Schedule

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 93081-00-0

### Short-Term Covered

\* Code W indicates Wash Sale  
L indicates a Nondeductible Loss other than a Wash Sale  
\*\* Ordinary Income D indicates Ordinary Income gain or loss  
F Indicates Foreign Exchange gain or loss on Capital transactions

Description	CUSIP	Code*	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
VANGUARD FI SEC SHRT BD PORTFOLIO	922031406		04/14/2015 05/29/2015	4,668.534	50,000.00	50,140.06		-140.06
Total Short-Term Covered					245,485.93	249,673.97		-4,188.04

## Capital Gain and Loss Schedule

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 93081-00-0

### Long-Term Covered

\* Code W indicates Wash Sale  
L indicates a Nondeductible Loss other than a Wash Sale  
\*\* Ordinary Income D indicates Ordinary Income gain or loss  
F indicates Foreign Exchange gain or loss on Capital Transactions

Description	CUSIP	Code *	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
FIDELITY FLOATING RATE HIGH INCOME	315916783		02/28/2013 01/21/2015	2,515.086	24,195.13	25,025.10		-829.97
GREENSPRING FUND INC	395724107		06/27/2013 01/26/2015	978.394	24,000.00	24,577.26		-577.26
OPPENHEIMER SR FLOATING RATE	68381K408		Various 01/26/2015	1,858.736	15,000.00	15,324.88		-324.88
OPPENHEIMER SR FLOATING RATE	68381K408		04/19/2012 01/30/2015	620.347	5,000.00	5,099.52		-99.52
PIMCO TOTAL RETURN FUND	693391674		Various 01/21/2015	662.182	7,164.81	7,354.52		-189.71
PROFESSIONALLY MANAGED PORTFOLIOS	742935489		04/19/2012 01/26/2015	978.167	11,180.45	11,327.17		-146.72
PUTNAM DIVERSIFIED INCOME TR	746704501		Various 10/15/2015	4,049.538	28,387.25	31,631.71		-3,244.46
RIVERNORTH FDS	76881N202		03/27/2014 08/24/2015	2,197.802	23,010.99	24,000.00		-989.01
T ROWE PRICE CAPITAL APPREC	77954M105		05/15/2013 01/26/2015	989.600	26,016.59	24,611.36		1,405.23
WELLS FARGO ADVANTAGE SHORT TERM	949917629		Various 01/21/2015	4,990.147	40,220.58	40,896.35		-675.77
<b>Total Long-Term Covered</b>					<b>204,175.80</b>	<b>209,847.87</b>		<b>-5,672.07</b>



## Capital Gain and Loss Schedule

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 93081-00-0

### Long-Term Noncovered

\* Code W indicates Wash Sale  
L indicates a Nondeductible Loss other than a Wash Sale  
\*\* Ordinary Income D indicates Ordinary Income gain or loss  
F indicates Foreign Exchange gain or loss on Capital transactions

Description	CUSIP	Code*	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
PIMCO TOTAL RETURN FUND	693391674		06/23/2011 01/21/2015	1,324.828	14,334.64	14,565.93		-231.29
Total Long-Term Noncovered					14,334.64	14,565.93		-231.29

# Capital Gain and Loss Schedule

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 09102-00-7

## Short-Term Covered

\* Code W indicates Wash Sale  
L indicates a Nondeductible Loss other than a Wash Sale  
\*\* Ordinary Income D indicates Ordinary Income gain or loss  
F indicates Foreign Exchange gain or loss on Capital Transactions

Description	CUSIP	Code*	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
CHESAPEAKE ENERGY CORP 7 1/4% DEC 15 2018 DTD 05/27/2008	165167CC9		04/15/2015 08/19/2015	15,000.000	12,806.25	16,198.62		-3,392.37
CHESAPEAKE ENERGY CORP 7 1/4% DEC 15 2018 DTD 05/27/2008	165167CC9		Various 08/19/2015	15,000.000	12,862.50	16,177.82		-3,315.32
CHESAPEAKE ENERGY CORP 7 1/4% DEC 15 2018 DTD 05/27/2008	165167CC9		05/12/2015 08/19/2015	15,000.000	12,825.00	16,167.41		-3,342.41
CHESAPEAKE ENERGY CORP 7 1/4% DEC 15 2018 DTD 05/27/2008	165167CC9		03/30/2015 08/19/2015	15,000.000	12,862.50	16,083.08		-3,220.58
CHESAPEAKE ENERGY CORP 7 1/4% DEC 15 2018 DTD 05/27/2008	165167CC9		03/30/2015 08/19/2015	15,000.000	12,825.00	16,083.07		-3,258.07
CHRYSLER GP CG CO ISSUER 8 1/4% JUN 15 2021 DTD 12/15/2011	17121EAD9		Various 12/21/2015	25,000.000	26,871.00	26,727.42		143.58
COSTCO WHOLESALE CORP 0.650% 12/07/2015 DTD 12/07/2012	22160KAD7		09/21/2015 12/07/2015	18,000.000	18,000.00	18,000.00		.00
DENBURY RESOURCES INC 6 3/8% AUG 15 2021 DTD 02/17/2011	247916AC3		03/03/2015 10/01/2015	10,000.000	6,175.00	9,725.00		-3,550.00
HEALTHSOUTH CORP	421924BJ9		09/30/2015 11/30/2015	8,000.000	8,310.00	8,346.02		-36.02
PUTNAM DIVERSIFIED INCOME TR	746704501		02/26/2015 11/11/2015	1,125.240	8,034.21	8,506.81		-472.60



**THE ROBERT & ANGELA ORTENZIO FDN**  
Account Number: Q 09102-00-7

**Capital Gain and Loss Schedule**

**Short-Term Covered**

\* Code W Indicates Wash Sale  
L Indicates a Nondeductible Loss other than a Wash Sale  
\*\* Ordinary Income D Indicates Ordinary Income gain or loss  
F Indicates Foreign Exchange gain or loss on Capital Transactions

Description	CUSIP	Code*	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
RIVERNORTH FDS	76881N202		Various 11/11/2015	1,729.107	18,000.00	18,785.97		-785.97
RIVERNORTH FDS	76881N202		01/21/2015 11/13/2015	1,820.165	18,929.72	19,766.99		-837.27
SALLY HOLDINGS/SALLY CAP	79546VAH9		Various 12/18/2015	55,000.000	56,890.90	57,246.77		-355.87
SPDR DOW JONES INDUSTRIAL AVERAGE	78467X109		08/08/2014 01/26/2015	650.000	114,433.22	106,880.48		7,552.74
SPDR DOW JONES INDUSTRIAL AVERAGE	78467X109		08/08/2014 02/17/2015	145.000	26,155.47	23,842.57		2,312.90
SPDR DOW JONES INDUSTRIAL AVERAGE	78467X109		08/08/2014 03/10/2015	425.000	75,187.48	69,883.39		5,304.09
SPDR DOW JONES INDUSTRIAL AVERAGE	78467X109		08/08/2014 03/18/2015	650.000	117,266.42	106,880.47		10,385.95
SPDR DOW JONES INDUSTRIAL AVERAGE	78467X109		08/08/2014 03/30/2015	175.000	31,394.56	28,775.51		2,619.05
SPDR DOW JONES INDUSTRIAL AVERAGE	78467X109		05/12/2015 08/25/2015	280.000	44,746.57	50,477.76		-5,731.19
SPDR S&P 500 ETF TRUST	78462F103		Various 12/23/2015	335.000	68,930.00	65,610.63		3,319.37
UNITED SURGICAL PARTNERS	913016AG6		01/23/2015 07/01/2015	100,000.000	106,750.00	106,649.00		101.00
VANGUARD SHORT-TERM CORPORATE	92206C409		04/27/2015 05/26/2015	650.000	51,989.29	52,204.75		-215.46
VANGUARD SHORT-TERM CORPORATE	92206C409		04/27/2015 05/27/2015	300.000	23,989.05	24,094.50		-105.45



## Capital Gain and Loss Schedule

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 09102-00-7

### Short-Term Covered

\* Code W Indicates Wash Sale  
L Indicates a Nondeductible Loss other than a Wash Sale  
\*\* Ordinary Income D Indicates Ordinary Income gain or loss  
F Indicates Foreign Exchange gain or loss on Capital transactions

Description	CUSIP	Code*	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
VANGUARD GROWTH VIPERS	922908736		04/27/2015 09/29/2015	225.000	22,157.15	24,925.51		-2,768.36
Total Short-Term Covered					908,391.29	908,039.55		351.74

# Capital Gain and Loss Schedule

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 09102-00-7

\* Code W indicates Wash Sale

L indicates a Nondeductible Loss other than a Wash Sale

\*\* Ordinary Income D Indicates Ordinary Income gain or loss

F Indicates Foreign Exchange gain or loss on Capital transactions

## Short-Term Noncovered

Description	CUSIP	Code*	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
TRANSOCEAN INC	893830BD0		01/02/2015 08/19/2015	75,000.000	69,375.00	68,062.50		1,312.50 D
<b>Total Short-Term Noncovered</b>					<b>69,375.00</b>	<b>68,062.50</b>		<b>.00</b> <b>1,312.50 D</b>

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 09102-00-7

## Capital Gain and Loss Schedule

### Long-Term Covered

\* Code, W Indicates Wash Sale  
L Indicates a Nondeductible Loss other than a Wash Sale  
\*\* Ordinary Income D Indicates Ordinary Income gain or loss  
F Indicates Foreign Exchange gain or loss on Capital transactions

Description	CUSIP	Code *	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income **
APPLE INC.	037833100		08/02/2013 02/23/2015	1,130.000	149,024.81	74,261.18		74,763.63
APPLE INC.	037833100		Various 02/26/2015	2,267.000	288,752.68	148,726.45		140,026.23
GENERAL ELECTRIC CO	369604103		09/23/2013 04/10/2015	2,200.000	62,886.28	53,683.08		9,203.20
GENERAL ELECTRIC CO	369604103		09/23/2013 04/13/2015	1,475.000	40,967.36	35,992.06		4,975.30
GENERAL ELECTRIC CO	369604103		09/23/2013 04/17/2015	234.000	6,299.30	5,709.93		589.37
JPM FLOAT RATE INC FD - SEL	48121L510		Various 01/21/2015	5,434.299	52,930.07	55,000.00		-2,069.93
JPM INC BUILDER FD - SEL	4812A3254		01/18/2013 01/21/2015	1,992.032	20,458.17	20,000.00		458.17
MICROSOFT CORP	594918104		02/01/2011 04/24/2015	1,131.000	52,596.18	31,466.00		21,130.18
MICROSOFT CORP	594918104		Various 05/05/2015	2,470.000	117,195.39	65,629.01		51,566.38
SPDR DJIA TRUST	78467X109		08/08/2014 12/23/2015	400.000	70,204.70	65,772.60		4,432.10
SPDR DOW JONES INDUSTRIAL AVERAGE	78467X109		08/08/2014 08/25/2015	70.000	11,186.64	11,510.21		-323.57





# Capital Gain and Loss Schedule

THE ROBERT & ANGELA ORTENZIO FDN  
Account Number: Q 09102-00-7

\* Code W indicates Wash Sale

L indicates a Nondeductible Loss other than a Wash Sale

\*\* Ordinary Income D indicates Ordinary Income gain or loss

F indicates Foreign Exchange gain or loss on Capital transactions

## Long-Term Covered

Description	Code*	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
SPDR DOW JONES INDUSTRIAL AVERAGE	78467X109	08/08/2014 09/23/2015	285.000	46,378.98	46,862.98		-484.00

Total Long-Term Covered

918,880.56 614,613.50 304,267.06

**Capital Gain and Loss Schedule**  
**THE ROBERT & ANGELA ORTENZIO FDN**  
 Account Number: Q 09102-00-7

**Long-Term Noncovered**

\* Code: W indicates Wash Sale  
 L indicates a Nondeductible Loss other than a Wash Sale  
 \*\* Ordinary Income D Indicates Ordinary Income gain or loss  
 F Indicates Foreign Exchange gain or loss on Capital Transactions

Description	CUSIP	Code*	Date Acquired Date Sold	Units	Proceeds	Cost or Other Basis	Adjustments to gain or loss	Gain or Loss Ordinary Income**
GENERAL ELECTRIC CO	369604103		05/06/2010 04/17/2015	5,882.000	158,344.05	99,760.48		58,583.57
MICROSOFT CORP	594918104		04/19/2010 04/10/2015	2,456.000	102,413.06	76,197.40		26,215.66
MICROSOFT CORP	594918104		04/19/2010 04/24/2015	1,339.000	62,269.05	41,542.48		20,726.57
<b>Total Long-Term Noncovered</b>					<b>323,026.16</b>	<b>217,500.36</b>		<b>105,525.80</b>