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Department of the Treasury

Internal Revenue Service

DLN: 93491120004136

OMB No 1545-0052

2015

Quen to Rublic

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

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

Open to Public Inspection

| For | caler | ndar year 2015, or tax y | ear beginning 01-0 | 1-2015 | , and ending 1 | 2-31-2015 | |
|----------------|-----------|---------------------------------------------------------------------------------------------|--------------------------------------|------------------------|----------------------------------|-----------------------------------------------|-------------------------------------------------------------|
| | e of four | | | | A Employer ide | entification numbe | er |
| OV | VENS FAI | MILY FOUNDATION | | | 25-6865026 | | |
| Num | her and | street (or P O box number if mail is i | not delivered to street address | Room/suite | B Telephone nur | nber (see instruction | s) |
| | | Y AVENUE 10TH FLOOR | iot delivered to street address; | Koom/ suite | (412) 762-3792 | | |
| Citi | | -t-t | | | . , | | g, check here 🕨 🗀 |
| | | state or province, country, and ZIP o , PA 152222705 | r Toreigri postal code | | C ii exemption | арріісацоп із репин | g, check here |
| G CI | neck all | that apply Initial return | Initial return of a fo | ormer public charity | D 1 Foreign or | ganizations, check h | ere 🕨 🗀 |
| | | Final return Address chang | A mended return Je Name change | | | ganizations, eneck in | • |
| H C h | ack ty | pe of organization | | e foundation | | k here and attach co Indation status was t | mputation ' erminated |
| | | 947(a)(1) nonexempt charitat | | | | 1 507(b)(1)(A), chec | . — |
| | | t value of all assets at end | JAccounting method Other (specify) | Cash Accrua | F II the lounds | tion is in a 60-mont | . – |
| | | om Part II, col. (c), \$ 538,566 | (Part I, column (d) must | be on cash basıs.) | under section | n 507(b)(1)(B), chec | k nere |
| Pa | rt I | Analysis of Revenue a | ind Expenses | Revenue and | I | | Disbursements |
| | | (The total of amounts in columns (necessarily equal the amounts in co instructions)) | b), (c), and (d) may not | expenses per (a) books | Net investment (b) income | Adjusted net (c) income | for charitable purposes (d) (cash basis only) |
| | 1 | Contributions, gifts, grants, e | tc , received (attach | | | | |
| | | schedule) | | 100,000 | | | |
| | 2 | Check 🟲 🦵 If the foundation | is not required to attach | | | | |
| | | Sch B | | | | | |
| | 3 | Interest on savings and temp | • | 0.404 | 0.404 | | |
| | 4 | Dividends and interest from s | | 9,404 | 9,404 | | |
| | 5a b | Gross rents | | | | | |
| Ф | 6a | Net gain or (loss) from sale o | | 21,410 | | | |
| 喜 | Ь | Gross sales price for all asse | | | | | |
| Revenue | _ | 142,312 | | | 21,410 | | |
| | 7 8 | Capital gain net income (from Net short-term capital gain. | | 21,410 | 0 | | |
| | 9 | Income modifications | | | | | - |
| | 10a | Gross sales less returns and | | | | | |
| | | allowances | | | | | |
| | ь | Less Cost of goods sold | | | | | |
| | C | Gross profit or (loss) (attach | | | | | |
| | 11 | Other income (attach schedu | | | | | |
| | 12 | Total.Add lines 1 through 11 | | 130,814 | | | 440 |
| | 13 | Compensation of officers, dire Other employee salaries and | | 4,186 | 3,767 | 0 | 419 |
| .n | 14 15 | Pension plans, employee ben | | | 0 | 0 | |
| Š | 16a | Legal fees (attach schedule). | | | | | 0 |
| Expenses | ь | Accounting fees (attach sche | | | | | |
| | | O ther professional fees (atta | | | | | 0 |
| Administrative | 17 | Interest | | | | | 0 |
| trat | 18 | Taxes (attach schedule) (see | | % 334 | | | 0 |
| | 19 | Depreciation (attach schedul | · | 0 | 0 | | |
| 트 | 20 | Occupancy | | | | | |
| Ă | 21 | Travel, conferences, and mee | | | 0 | 0 | |
| and | 22 | Printing and publications | | | 0 | 0 | |
| | 23 | Other expenses (attach sche | dule) | | | | |
| rati | 24 | Total operating and administ | rative expenses. | | | | |
| Operating | | Add lines 13 through 23 | | 4,520 | • | 0 | 419 |
| 0 | 25 | Contributions, gifts, grants pa | aid | 68,700 | | | 68,700 |
| | 26 | Total expenses and disbursen 25 | nents.Add lines 24 and | 73,220 | 3,767 | 0 | 69,119 |
| | 27 | Subtract line 26 from line 12 | | | | | |
| | a | Excess of revenue over exper | nses and disbursements | 57,594 | | | |
| | ь | Net investment income (if ne | • • | | 27,047 | | |
| | l c | Adjusted net income(if negat | ıve, enter -0 -) | | | 0 | |

| 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 | (a) Book Talac | (2) Book Talle | (c) rain riainer raide | | | | |
| | 2 | Savings and temporary cash investments | 121,136 | 90,179 | 90,179 | | | | |
| | 3 | Accounts receivable | | | | | | | |
| | | Less allowance for doubtful accounts 🕨 | | 0 | 0 | | | | |
| | 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 🟲0 | | | | | | | |
| | 8 | Inventories for sale or use | | | | | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | | | | | |
| 8 | 10a | Investments—U S and state government obligations (attach | | | | | | | |
| ∢ | 100 | schedule) | | | | | | | |
| | b | Investments—corporate stock (attach schedule) | | | | | | | |
| | С | Investments—corporate bonds (attach schedule) | | | | | | | |
| | 11 | Investments—land, buildings, and equipment basis 🟲 | | | | | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | | | | | |
| | 12 | Investments—mortgage loans | | | | | | | |
| | 13 | Investments—other (attach schedule) | 344,974 | 433,525 | 448,387 | | | | |
| | 14 | Land, buildings, and equipment basis 🟲 | | | | | | | |
| | | Less accumulated depreciation (attach schedule) 🟲 | | | | | | | |
| | 15 | O ther assets (describe 🟲) | | | | | | | |
| | 16 | Total assets(to be completed by all filers—see the | | | | | | | |
| | | ınstructions Also, see page 1, item I) | 466,110 | 523,704 | 538,566 | | | | |
| | 17 | Accounts payable and accrued expenses | | | | | | | |
| | 18 | Grants payable | | | | | | | |
| Ě | 19 | Deferred revenue | | | | | | | |
| abilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | | | | |
| Lial | 21 | Mortgages and other notes payable (attach schedule) | | | | | | | |
| _ | 22 | O ther liabilities (describe 🟲) | | | | | | | |
| | 23 | Total liabilities(add lines 17 through 22) | | 0 | | | | | |
| ٠. | | Foundations that follow SFAS 117, check here 🕨 🦵 | | | | | | | |
| Fund Balances | | and complete lines 24 through 26 and lines 30 and 31. | | | | | | | |
| an | 24 | Unrestricted | | | | | | | |
| ထ | 25 | Temporarily restricted | | | | | | | |
| Ξ | 26 | Permanently restricted | | | | | | | |
| Fu | | Foundations that do not follow SFAS 117, check here 🕨 🔽 | | | | | | | |
| ō | | and complete lines 27 through 31. | | | | | | | |
| | 27 | Capital stock, trust principal, or current funds | 466,110 | 523,704 | | | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | | | | | |
| | 29 | Retained earnings, accumulated income, endowment, or other funds | | | | | | | |
| Net | 30 | Total net assets or fund balances(see instructions) | 466,110 | 523,704 | | | | | |
| | 31 | Total liabilities and net assets/fund balances(see instructions) | 466,110 | 523,704 | | | | | |
| Pa | rt 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 ag | jree | | | | | |
| | | with end-of-year figure reported on prior year's return) | 1 | 466,110 | | | | | |
| 2 | | Enter amount from Part I, line 27a | | 2 | 57,594 | | | | |
| 3 | | Other increases not included in line 2 (itemize) | | 3 | 0 | | | | |
| 4 | | Add lines 1, 2, and 3 | | 4 | 523,704 | | | | |
| 5 | | Decreases not included in line 2 (itemize) ► | | _ 5 | 0 | | | | |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)—Pa | art II, column (b), lı | ne 30 . 6 | 523,704 | | | | |

Part IV Capital Gains and Losses for Tax on Investment Income

| | | the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs | How acquired P—Purchase (b) D—Donation | L | Date acquired mo , day, yr) | Date sold (d) (mo , day, yr) | |
|--------|---------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------|-------------------------------------------|----------------------------------|------------------------------|
| 1a | See Additional Data | Table | | (b) D—Donation | | | |
| | | | | | | | |
| С | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| (e | e) Gross sales price | Depreciation allowe (f) (or allowable) | | t or other basis expense of sale | Gain or (loss) (h) (e) plus (f) minus (g) | | |
| а | See Additional Data | | | • | | | |
| ь | | | | | | | |
| С | | | | | | | |
| d | | | | | | | |
| e | | | | | + | | |
| | mnlete only for assets | showing gain in column (h) and owne | d by the foundation | on 12/31/69 | | Gains (Col | (h) gain minus |
| | | Adjusted basis | | cess of col (ı) | \dashv , | • | ot less than -0-) o i |
| (1) | FMV as of 12/31/69 | (j) as of 12/31/69 | (k) over col (j), if any | | | Losses | (from col (h)) |
| а | See Additional Data | Table | | | | | |
| b | | | | | | | |
| c | | | | | | | |
| d | | | | | | | |
| е | | | | | | | |
| 3 | Net short-term capit If gain, also enter in in Part I, line 8 | me or (net capital loss) { al gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru | ctions) If (loss), e |) nter -0 - | 3 | | 21,410 |
| | - | Jnder Section 4940(e) for R private foundations subject to the seleave this part blank | | | | | |
| f"Yes, | " the foundation does n | e section 4942 tax on the distributa ot qualify under section 4940(e) Do unt in each column for each year, so | o not complete this | part | | | │ Yes 🔽 No |
| | (a) period years Calendar or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncha | rıtable-use assets | | (d) Distributio (col (b) divided | n ratio |
| | 2014 | 66,524 | | 466,445 | | | 0 142619 |
| | 2013 | 65,945 | | 391,608 | | | 0 168395 |
| | 2012 | 75,667 | | 323,785 | | | 0 233695 |
| | 2011 | 62,831 | | 274,129 | | | 0 229202 |
| | 2010 | 53,826 | | 216,757 | | | 0 248324 |
| 2 | | n (d) | | | 2 | | 1 022235 |
| 3 | the number of years | ratio for the 5-year base period—div the foundation has been in existence | e ıf less than 5 yea | rs | 3 | | 0 204447 |
| 4 | | f noncharitable-use assets for 2015 | · | _ | 4 | | 513,107 |
| 5 | | 23 | | <u> </u> | 5 | | 104,903 |
| 6 | | stment income (1% of Part I, line 2 | | _ | 6 | | 270 |
| 7 | Add lines 5 and 6. | | | | 7 | | 105,173 |

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

69,119

8

| ĽŒL | Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49 | 7 7 0(e), | , UI 4340—SE | e pag | = 10 OL | the ins | LIUCLIO | 'IIS) | | |
|-----|----------------------------------------------------------------------------------------------------------------|----------------------|----------------|----------|-----------|---------|---------|---------------|-----|--|
| 1a | | | | 1 | | | | | | |
| | and enter "N/A" on line 1 Date of ruling or determination letter | | | l | | | | | | |
| | (attach copy of letter if necessary-see instructions) | | | ĺ | | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, | | | J | 1 | | | | 541 | |
| | here Fand 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) | itions e | enter 4% of | | | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-) | dation | s only Othe | rs | 2 | | 0 | | | |
| 3 | Add lines 1 and 2 | | | • | 3 | | | | 541 | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-) | ndation | is only Othe | ers | 4 | | | | 0 | |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, en | nter-0 | | | 5 | | | | 541 | |
| 6 | Credits/Payments | | • | | | | | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 | 6a | | 460 | | | | | | |
| b | Exempt foreign organizations—tax withheld at source | 6b | | | | | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c 0 | | | | | | | | | |
| d | Backup withholding erroneously withheld | 6d | | | | | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | | 7 | | | | 460 | |
| 8 | Enter any penalty for underpayment of estimated tax Check here $\ \ \ \ \ \ \ \ \ \ \ \ \ $ | 220 is | attached | | 8 | | | | 0 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . | | | • | 9 | | | | 81 | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount | t overp | paid | F | 10 | | | | | |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax | 0 | Refunded | <u> </u> | 11 | | | | 0 | |
| Par | t VII-A Statements Regarding Activities | | | | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state | , or loc | al legislatio | n or d | 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 | | | see In | structi | ons | | | | |
| | for definition)? | | | | | • | 1b | | No | |
| | If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities | and co | pies of any n | nateria | ls | | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | | | | | | |
| | Did the foundation file Form 1120-POL for this year? | • • | | | | • | 1c | | No | |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) impos | | | • | | | | | | |
| _ | (1) On the foundation \$ (2) On foundation managers | | | | | | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political formulation managers. | tical e | xpenditure t | ax IIIIµ | oseu | | | | | |
| 2 | on foundation managers * \$ Has the foundation engaged in any activities that have not previously been rep | orted t | to the IDS2 | | | | 2 | | No | |
| 2 | If "Yes," attach a detailed description of the activities. | orteu | to the IK3. | | | | | | NO | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in it | -c aovo | rning instru | mont | articlo | • | | | | |
| 3 | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo | = | _ | - | | 3 | 3 | | No | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more di | | | | | | 4a | | No | |
| ь | 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 dur | | | | | | 5 | | No | |
| _ | If "Yes," attach the statement required by General Instruction T. | 9 | -, | | | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 494 | 45) sa | tisfied eithe | r | | | | | | |
| | By language in the governing instrument, or | , | | | | | | | | |
| | By state legislation that effectively amends the governing instrument so the | at no n | nandatory dı | rectio | 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? | If "Yes | s," complete i | Part II | , col. (c | ·), | | | | |
| | and Part XV. | | | | | | 7 | Yes | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (s | see ins | tructions) | | | | | | | |
| | ▶PA | | | | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99 | | | | | | | | | |
| | General (or designate) of each state as required by General Instruction G? If $^{\prime\prime}$ | "No," at | tach explana | tion . | | | 8b | Yes | | |
| 9 | Is the foundation claiming status as a private operating foundation within the n | | - | | | | | | | |
| | or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (so | ee inst | ructions for | Part X | (IV)? | | | | | |
| | If "Yes," complete Part XIV | | | | | | 9 | \longmapsto | No | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," | | | _ | | | | | | |
| | and addresses. | | | | | | 10 | Yes | | |

| Pai | 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 ►PNC BANK NA Telephone no ►(412 | 762 | -3792 | |
| | Located at ▶620 LIBERTY AVENUE 10TH FLOOR PITTSBURGH PA ZIP+4 ▶1522227 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here | | . | - |
| 13 | and enter the amount of tax-exempt interest received or accrued during the year | • | - , | |
| | | | 1 | |
| 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 | | | 1 |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Payanaparanatan to an approximate the symptoms of a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | If the foundation agreed to make a grant to or to employ the official for a period | | | |
| | after termination of government service, if terminating within 90 days) Yes V No | | | |
| ь | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| _ | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | No |
| | 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 | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | |
| | to all years listed, answer "No" and attach statement—see instructions) | 2b | | |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | ▶ 20, 20, 20 | | | |
| 3 a | 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 | | No |
| Ь | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | ۸. |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | 1 | No |

| ЮL | Statements Rega | raing Activities for | rveni | ich Form 4/20 | мау ве | Required | (Cont | mue | u) | | |
|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------|-----------------------|-----------|-----------|----------|--------|------------|-------|--|
| 5a | During the year did the foundation | n pay or incurany amoun | nt to | | | | | | | | |
| | (1) Carry on propaganda, or other | rwise attempt to influenc | e legis | slation (section 494 | 45(e))? | Г | Yes 🗸 | No | | | |
| | (2) Influence the outcome of any | specific public election | (see s | ection 4955), or to | carry | | | | | | |
| | on, directly or indirectly, any | voter registration drive? | | | | | Yes 🗸 | No | | | |
| | | | | | | | Yes 🗸 | No | | | |
| | (4) Provide a grant to an organiza | ation other than a charita | able, e | tc , organization de: | scribed | | | | | | |
| | | | | | | | Yes 🗸 | No | | | |
| | | | | | | • | , | | | | |
| | | | | | | г | Yes 🗸 | No | | | |
| ь | | | | | | | ribed in | | | | |
| | | | | | | | | | 5b | | |
| | | | | | | | _ | _ | | | |
| 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? | | | | | | | | | | | |
| tax because it maintained expenditure responsibility for the grant? | | | | | | | | | | | |
| 6a | | | | | premiun | ns on | | | | | |
| | · · · | | • | | • | | Yes 🗸 | No | | | |
| ь | · | | | | | · | • | | 6b | No | |
| | | ,, ,, | , | ,, , | | | | | | | |
| 7a | (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? | | | | | | | | | | |
| | | • | - | | | | | | 7b | | |
| | Information About | | | | | | | | | ees. | |
| Pai | | | -, | | | 9, . | 9, | | | , | |
| 1 | List all officers, directors, trustees | s, foundation managers a | and th | eir compensation (| see instr | uctions). | | | | | |
| | | Title, and average | erage (c) Compensation(If | | | | | | | | |
| | (a) Name and address | | 1 | | | | | | • | | |
| | | (b) devoted to position | | -0-) | | | ' ' | | | | |
| PNC E | BANK NA | TRUSTEE | | 4,186 | · · | | | | | | |
| 520 | LIBERTY AVENUE |]1 | | | | | | | | | |
| | | | | | | | | | | | |
| 2 | Compensation of five highest-paid | l employees (other than | those | included on line 1— | see inst | | | ter "I | NONE." | | |
| | (a) | Title, and aver | rage | | | | | | Evnanca ac | count | |
| Nar | | | | (c) Compensatio | n | | | | | | |
| | more than \$50,000 | (b) devoted to pos | ition | | (d) | | | () | | | |
| NON | E | | | | | | | | | | |
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| | | | | | | | | | | | |
| Tot a | I number of other employees hald o | | | | | | . | | | 0 | |

| Form 990-PF (2015) | | Page 7 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------|
| Part VIII Information About Officers, Directors, Trust and Contractors (continued) | ees, Foundation Managers, Higl | hly Paid Employees, |
| 3 Five highest-paid independent contractors for professional services | (see instructions). If none, enter "NONE | " <u>. </u> |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
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| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services. | | 0 |
| | | |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers produced. | | Expenses |
| 1 | , | |
| 2 | | |
| 3 | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments | (see instructions) | |
| Describe the two largest program-related investments made by the foundation during | • | Amount |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | P |

Part X Minimum Investment Return

| Pa | (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 | 520,921 |
| b | Average of monthly cash balances | 1b | 0 |
| c | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 520,921 |
| 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 | 520,921 |
| 4 | Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see | | |
| | ınstructions) | 4 | 7,814 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 513,107 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 25,655 |
| 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.) | taın f | oreign organizations |
| 1 | Mınımum ınvestment return from Part X, line 6 | 1 | 25,655 |
| 2a | Tax on investment income for 2015 from Part VI, line 5 2a 541 | | |
| b | Income tax for 2015 (This does not include the tax from Part VI) 2b | | |
| С | Add lines 2a and 2b | 2c | 541 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 25,114 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0 |
| 5 | Add lines 3 and 4 | 5 | 25,114 |
| 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 | 25,114 |
| Par | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes | | |
| а | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | 1a | 69,119 |
| | Program-related investments—total from Part IX-B | 1b | 0 |
| 2 | A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , | | |
| | purposes | 2 | 0 |
| 3 | A mounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | 0 |
| b | Cash distribution test (attach the required schedule) | 3b | 0 |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 69,119 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | ıncome Enter 1% of Part I, line 27b (see instructions) | 5 | 0 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 69,119 |
| | Note: 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 | er the | foundation qualifies for |

| Ρ | art XIIII Undistributed | Income (see ınstru | ctions) | | | |
|---|--------------------------------------------------------------------|---------------------------|----------------------|-----------------------------------|--------------------|--------------------|
| | | | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
| 1 | Distributable amount for 2015 | from Part XI, line 7 | | | | 25,114 |
| 2 | Undistributed income, if any, as | of the end of 2015 | | | | |
| а | | | | | 0 | |
| b | Total for prior years 2013, | | | 0 | | |
| 3 | Excess distributions carryover, | | | | | |
| а | From 2010 | 43,051 | | | | |
| b | From 2011 | 49,619 | | | | |
| c | From 2012 | 54,634 | | | | |
| d | From 2013 | 46,946 | | | | |
| | From 2014 | 43,660 | | | | |
| f | Total of lines 3a through e | | 237,910 | | | |
| 4 | Qualifying distributions for 201! | 5 from Part | | | | |
| | XII, line 4 🕨 \$ | _ | | | | |
| а | Applied to 2014, but not more t | | | | 0 | |
| ь | Applied to undistributed income | of prior years | | 0 | | |
| | (Election required—see instruct | ions) | | | | |
| C | Treated as distributions out of c | | 0 | | | |
| | required—see instructions) | | | | | 2F 114 |
| | Applied to 2015 distributable a | | 44,005 | | | 25,114 |
| | Remaining amount distributed o | · — | 44,003 | | | 0 |
| 3 | Excess distributions carryover | • • | Ü | | | |
| | (If an amount appears in column same amount must be show | . ,, | | | | |
| 6 | Enter the net total of each colu | • • • • = | | | | |
| | indicated below: | | | | | |
| а | Corpus Add lines 3f, 4c, and 4e | Subtract line 5 | 281,915 | | | |
| b | Prior years' undistributed incom | | | 0 | | |
| | line 4b from line 2b | | - | 0 | | |
| С | Enter the amount of prior years' income for which a notice of defi | | | | | |
| | been issued, or on which the sec | • | | | | |
| | tax has been previously assess | ` , | | 0 | | |
| d | Subtract line 6c from line 6b Ta | axable amount | | | | |
| | —see instructions | | | 0 | | |
| е | Undistributed income for 2014 | | | | | |
| | 4a from line 2a Taxable amount | t—see | | | 0 | |
| _ | Undistributed income for 2016 | Cubtract | | | | |
| • | lines 4d and 5 from line 1 This | | | | | |
| | be distributed in 2015 | | | | | 0 |
| 7 | A mounts treated as distribution | s out of | | | | |
| | corpus to satisfy requirements i | | | | | |
| | section 170(b)(1)(F) or 4942(g | | 0 | | | |
| Ω | be required - see instructions). Excess distributions carryover | | | | | |
| · | applied on line 5 or line 7 (see ii | | 43,051 | | | |
| 9 | Excess distributions carryover t | · · | | | | |
| | Subtract lines 7 and 8 from line | | 238,864 | | | |
| | Analysis of line 9 | | | | | |
| | Excess from 2011 | 49,619 | | | | |
| | Excess from 2012 | 54,634 | | | | |
| | Excess from 2013 | 46,946 | | | | |
| | Excess from 2014 | 43,660 | | | | |
| е | Excess from 2015 | 44,005 | | | | |

| | Private Operating Foundat | • | | | 19) | |
|------------|---------------------------------------------------------------------------------------------------|---------------------|------------------------|----------------------|----------------------|------------|
| 1a | If the foundation has received a ruling or determ | | | | | |
| | foundation, and the ruling is effective for 2015, | | | | | |
| | Check box to indicate whether the organization | | ting foundation de | | 1 4942(j)(3) or | 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | (e) Total |
| | investment return from Part X for each | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | |
| | year listed | | | | | |
| b 8 | 35% of line 2a | | | | | |
| c | Qualifying distributions from Part XII, | | | | | |
| | line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used | | | | | |
| | directly for active conduct of exempt activities | | | | | |
| 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 | | 1 | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test— enter 2/3 | | 1 | | | |
| - | 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 (C | | | e organizatio | n had \$5,000 o | r more in |
| | assets at any time during the | <u>year—see ins</u> | tructions.) | | | |
| L a | Information Regarding Foundation Managers: List any managers of the foundation who have co | ontributed more th | nan 2% of the tota | ıl contributions rec | eived by the found | lation |
| | before the close of any tax year (but only if they | | | | | ideloli |
| | | | | | | |
| b | List any managers of the foundation who own 10 | | | | large portion of th | е |
| | ownership of a partnership or other entity) of wh | ich the loundation | inas a 10% or gre | eaterinterest | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Total Control Control Control City | Cabalanak | :t- B | | | |
| 2 | Information Regarding Contribution, Grant, Gift | | | | | |
| | Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation | | | | | |
| | other conditions, complete items 2a, b, c, and d | | its, etc. (see ilisti) | actions) to marvia | dais of organizatio | iis uiidei |
| | | | | | | |
| а | The name, address, and telephone number or e | mail address of th | e nerson to whom | annlications shou | ld he addressed | |
| u | The name, address, and telephone number of el | man address of th | e person to whom | applications shou | ia be addressed | |
| | | | | | | |
| | | | | | | |
| b | The form in which applications should be submi | tted and informat | ion and materials t | they should includ | e | |
| | | | | | | |
| | | | | | | |
| C | Any submission deadlines | | | | | |
| | | | | | | |
| _ | A | | | | | |
| d | Any restrictions or limitations on awards, such factors | as by geographic | aı areas, charitabl | e neias, kinds of ii | nstitutions, or othe | Γ |

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 contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 68,700 **b** Approved for future payment

| 5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property | Page 1 2 | | | S | ing Activitie | A Analysis of Income-Produc | orm 990-Pf Part XVI- |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------|---------------------|----------------|----------------|--------------------------------------------------------------------------------|--------------------------------|
| Business code Amount Exclusion code Amount Business code Amount Business code Amount Business code Amount Business code Amount Exclusion code Amount Business code and seasons Business codes and seasons Business code and seasons Business code and seasons Business code and seasons Business code and seasons Busin | (e) Related or exemp function income | 1 512, 513, or 514 | Excluded by section | isiness income | Unrelated bu | amounts unless otherwise indicated | nter gross |
| b c d d d d d d d d d d d d d d d d d d | (See Instructions) | | | • • | 1 | service revenue | 1 Program : |
| d e g Fees and contracts from government agencies 2 Membership dues and assessments | | | | | | <u> </u> | |
| g Fees and contracts from government agencies 2 Membership dues and assessments | | | | | | | |
| g Fees and contracts from government agencies 2 Membership dues and assessments | | | | | | | е |
| 3 Interest on savings and temporary cash investments | | | | | | nd contracts from government agencies | g Fees ar |
| Solution Property Solution Pro | | | | | | on savings and temporary cash | 3 Interest |
| b Not debt-financed property | 404 | 9,404 | 14 | | | | |
| property | | | | | | | |
| Gain or (loss) from sales of assets other than inventory | | | | | | | |
| Power income or (loss) from special events Of Gross profit or (loss) from sales of inventory Of Other revenue a b c 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) Part 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 import the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) | | | | | | (loss) from sales of assets other than | B Gain or (|
| C G G Subtotal Add columns (b), (d), and (e). Subtotal Add line 12, columns (b), (d), and (e). Substitution of Add line 13 instructions to verify calculations (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 import the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) | 410 | 21,410 | 18 | | | me or (loss) from special events | Net incoi |
| b c d d d d d d d d d d d d d d d d d d | | | | | | | • |
| 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) Part 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 import the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) | | | | | | | b |
| 2 Subtotal Add columns (b), (d), and (e) | | | | | | - | |
| Total.Add line 12, columns (b), (d), and (e) | 814 | 30,814 | | | | | |
| Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed import the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) | 30,814 | 13 | | | calculations) | d line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify | 3 Total. Ad |
| the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) | ertantly to | | | | | | |
| | | | | | | the accomplishment of the foundation's | |
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| Part) | (ATT | Noncharitable | | | | actio | ns and Relatio | onsnips with | | |
|---------------|------------------|----------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------|---------------------------------------------|-----------|----------------------------------------|-------------------------------------------------|----------------------------|----------|
| | | anization directly or ii .(c) of the Code (othe | ndırectly eng | age in any of t | he following wit | | | | Y | res No |
| | nızatıor | • • | | | , g , c | | | , | | |
| _ | | om the reporting four | ndation to a n | oncharıtable e | exempt organiza | ation of | | | | |
| (1) | Cash. | | | | | | | | 1a(1) | No |
| (2) | Othera | assets | | | | | | | 1a(2) | No |
| b Othe | r trans | actions | | | | | | | | |
| (1) | Sales | of assets to a noncha | rıtable exemp | ot organization | | | | | 1b(1) | No |
| (2) | Purcha | ses of assets from a | noncharitable | e exempt orga | nızatıon | | | | 1b(2) | No |
| (3) | Rental | of facilities, equipme | nt, or other as | ssets | | | | | 1b(3) | No |
| | | ırsement arrangemen | | | | | | | 1b(4) | No |
| (5) l | Loans | or loan guarantees. | | | | | | | 1b(5) | No |
| | | ance of services or m | | | | | | | 1b(6) | No |
| | | acılıtıes, equipment, i | | | | | | | 1c | No |
| | _ | er to any of the above | | | | | | | rket value | e |
| of the | goods y trans | s, other assets, or se action or sharing arr | rvices given l angement, sh | by the reporting ow in column | ng foundation I (d) the value of | f the foo | undation received ods, other assets | l less than fair marke , or services receive | et value ed | |
| (a) Line N | 10 | (b) Amount involved | (c) Name of n | ioncharitable exe | mpt organization | (d) | Description of transfe | ers, transactions, and sha | ring arrang | ements |
| | | | | | | | | | | |
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| desc | rıbed ır | lation directly or indiin section 501(c) of the mplete the following s (a) Name of organization | ne Code (othe schedule | r than section | 501(c)(3)) or | ın sectı | | | . TYes | VNo |
| | | (a) Name of Organization | 1 | (B |) Type of organiza | COH | | (c) Description of relation | опэшр | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Sign Here | the be inform | penalties of perjury, st of my knowledge a ation of which prepar | ınd belief, it is | s true, correct | | | | (other than taxpaye May t return | r) is base he IRS discu | d on all |
| | Sı | Signature of officer or trustee | | | Date | <u> </u> | Tıtle | below | | |
| | | Print/Type preparer's name Preparer | | Preparer's S | parer's Signature | | Date | Check if self- employed ► | PTIN | |
| Paid Prepa | rer | Firm's name 🕨 | | | | l | | Firm's EIN ► | | _ |
| Use O | nly ¯ | Fırm's address ▶ | | | | | Phone no | | | |

| 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) |
|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|------------------------------------------------|-------------------------------------|
| 181 992 DODGE & COX INTERNATIONAL STOCK FUND | | 2011-11-02 | 2015-01-27 |
| 58 087 DODGE & COX INTERNATIONAL STOCK FUND | | 2014-12-23 | 2015-01-27 |
| 159 SECTOR SPDR TR SBI INT-TECH | | 2014-07-31 | 2015-01-30 |
| 2 SECTOR SPDR TR SHS BEN INT-UTILITIES | | 2015-01-16 | 2015-01-30 |
| 3 HEALTH CARE SELECT SECTOR ETF LARGE CAP | | 2015-01-16 | 2015-03-31 |
| 132 SECTOR SPDR TR SBI CONS STPLS | | 2015-01-30 | 2015-03-31 |
| 135 SECTOR SPDR TR SHS BEN INT-UTILITIES | | 2014-12-01 | 2015-03-31 |
| 134 408 AMERICAN BEACON L/C VALU IS | | 2011-11-02 | 2015-04-24 |
| 161 487 AMERICAN BEACON L/C VALU IS | | 2014-12-23 | 2015-04-24 |
| 73 247 ARTISAN FDS INC INTERNATIONAL | | 2014-12-23 | 2015-04-24 |

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) (h) (e) plus (f) minus (g) |
|-----------------------|-----------------------------------------|----------------------------------------------|-----------------------------------------------------|
| 7,811 | | 5,653 | 2,158 |
| 2,493 | | 2,432 | 61 |
| 6,398 | | 6,271 | 127 |
| 98 | | 97 | 1 |
| 220 | | 210 | 10 |
| 6,464 | | 6,394 | 70 |
| 5,980 | | 6,299 | -319 |
| 2,746 | | 2,118 | 628 |
| 3,299 | | 2,970 | 329 |
| 2,348 | | 2,213 | 135 |

| 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 basıs (j) as of 12/31/69 | Excess of col (ı) (k) over col (յ), ıf any | col (k), but not less than -0-) or (I) Losses (from col (h)) |
| | | | 2,158 |
| | | | 61 |
| | | | 127 |
| | | | 1 |
| | | | 10 |
| | | | 70 |
| | | | -319 |
| | | | 628 |
| | | | 329 |
| | | | 135 |

| 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) |
|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|------------------------------------------------|--------------------------------------------|
| 19 485 ARTISAN FDS INC INTERNATIONAL | | 2013-02-25 | 2015-04-24 |
| 7 403 COLUMBIA ACORN INTL FUND CL Z | | 2014-03-14 | 2015-04-24 |
| 15 381 GOLDMAN SACHS MID CAP VALUE FD CL I | | 2013-05-30 | 2015-04-24 |
| 36 961 GOLDMAN SACHS GRTH OPPOR INSTIT CLASS | | 2014-12-23 | 2015-04-24 |
| 133 464 HARDING LOEVNER INTERNATIONAL EQUITY PORTFOLIO | | 2014-12-23 | 2015-04-24 |
| 172 977 HARDING LOEVNER INTERNATIONAL EQUITY PORTFOLIO | | 2012-11-01 | 2015-04-24 |
| 23 ISHARES MSCI EMERGING MKTS INDEX FUND | | 2010-01-11 | 2015-04-24 |
| 4 ISHARES TR S&P SMLCP GROW | | 2014-12-23 | 2015-04-24 |
| 39 348 MFS VALUE FUND CLASS I FUND 893 | | 2015-01-16 | 2015-04-24 |
| 9 915 MAINSTAY EPOCH GLOBAL EQUITY YIELD FUND CLASS I | | 2014-12-23 | 2015-04-24 |

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) (h) (e) plus (f) minus (g) |
|-----------------------|------------------------------------------------|----------------------------------------------|-----------------------------------------------------|
| 625 | | 491 | 134 |
| 336 | | 343 | -7 |
| 662 | | 713 | -51 |
| 1,076 | | 1,032 | 44 |
| 2,589 | | 2,353 | 236 |
| 3,356 | | 2,652 | 704 |
| 1,008 | | 1,001 | 7 |
| 525 | | 488 | 37 |
| 1,404 | | 1,357 | 47 |
| 199 | | 195 | 4 |

| Gains (Col (h) gain minus col (k), but not less than -0-) (I) Losses (from col (h)) | Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------|--------------------------|
| | Excess of col (1) (k) over col (j), if any | Adjusted basis (j) as of 12/31/69 | (i) F M V as of 12/31/69 |
| 134 | | | |
| -7 | | | |
| -51 | | | |
| 44 | | | |
| 236 | | | |
| 704 | | | |
| 7 | | | |
| 37 | | | - |
| 47 | | | |
| 4 | | | |

| 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) |
|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|------------------------------------------------|--------------------------------------------|
| 80 755 T ROWE PRICE GROWTH STOCK FUND | | 2014-12-23 | 2015-04-24 |
| 68 756 ROWE T PRICE VALUE FD INC COM | | 2014-12-23 | 2015-04-24 |
| 162 109 TEMPLETON INSTL FDS INC FOREIGN EQUITY SER | | 2015-01-27 | 2015-04-24 |
| 158 TOUCHSTONE SANDS CAPITAL SELECT GROWTH FD CLASS Y | | 2015-01-16 | 2015-04-24 |
| 1 HEALTH CARE SELECT SECTOR ETF LARGE CAP | | 2015-01-16 | 2015-07-31 |
| 1 SECTOR SPDR TR SBI CYCL TRANS | | 2015-03-31 | 2015-07-31 |
| 153 SECTOR SPDR TR SBI INT-TECH | | 2015-03-31 | 2015-07-31 |
| 56 ISHARES TR S&P SMLCAP 600 | | 2015-07-31 | 2015-08-31 |
| 1 SECTOR SPDR TR SBI CYCL TRANS | | 2015-03-31 | 2015-08-31 |
| 13 HEALTH CARE SELECT SECTOR ETF LARGE CAP | | 2015-01-16 | 2015-09-30 |

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) (h) (e) plus (f) minus (g) |
|-----------------------|------------------------------------------------|----------------------------------------------|-----------------------------------------------------|
| 4,593 | | 4,143 | 450 |
| 2,463 | | 2,340 | 123 |
| 3,615 | | 3,307 | 308 |
| 2,999 | | 2,811 | 188 |
| 77 | | 70 | 7 |
| 80 | | 76 | 4 |
| 6,521 | | 6,391 | 130 |
| 6,205 | | 6,569 | -364 |
| 75 | | 76 | -1 |
| 856 | | 909 | -53 |

| 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 basıs (j) as of 12/31/69 | Excess of col (1) (k) over col (j), ıf any | col (k), but not less than -0-) or (I) Losses (from col (h)) |
| | | | 450 |
| | | | 123 |
| | | | 308 |
| | | | 188 |
| | | | 7 |
| | | | 4 |
| | | | 130 |
| | | | -364 |
| | | | -1 |
| | | | -53 |

| 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 | Date acquired (c) (mo , day, yr) | (d) Date sold (mo , day, yr) |
|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------|--------------------------------------------|
| | D—Donation | | |
| 1 HEALTH CARE SELECT SECTOR ETF LARGE CAP | | 2015-08-31 | 2015-09-30 |
| 75 HEALTH CARE SELECT SECTOR ETF LARGE CAP | | 2014-08-29 | 2015-09-30 |
| 130 SECTOR SPDR TR SBI CONS STPLS | | 2015-08-31 | 2015-09-30 |
| 82 SECTOR SPDR TR SBI CYCL TRANS | | 2015-03-31 | 2015-10-28 |
| 165 SECTOR SPDR TR SBI CYCL TRANS | | 2015-09-30 | 2015-10-28 |
| 94 SPDR TR UNIT SER 1 | | 2015-10-28 | 2015-11-30 |
| CAPITAL GAIN DIVIDENDS | Р | | |

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) (h) (e) plus (f) minus (g) |
|-----------------------|------------------------------------------------|----------------------------------------------|-------------------------------------------|
| 66 | | 72 | -6 |
| 4,937 | | 4,785 | 152 |
| 6,114 | | 6,155 | -41 |
| 6,565 | | 6,226 | 339 |
| 13,211 | | 12,168 | 1,043 |
| 19,655 | | 19,522 | 133 |
| | | | 14,643 |

| Complete only for assets show | Complete only for assets showing gain in column (h) and owned by the foundation on $12/31/69$ | | |
|-------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------|
| (i) F M V as of 12/31/69 | A djusted basis (j) 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)) |
| | | | -6 |
| | | | 152 |
| | | | -41 |
| | | | 339 |
| | | | 1,043 |
| | | | 133 |
| | | | |

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

| Offic 5 Offic 5 Offic 5 | ants and contributions | raid baring | the real of Approved for i | deare rayment |
|----------------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------|----------------------------------|---------------|
| 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 | | | | |
| CHRIST EPISCOPAL CHURCH 220 OWENSVILLE ROAD WEST RIVER,MD 20778 | NONE | PC | GENERAL SUPPORT | 5,000 |
| CONNECTICUT COLLEGE 270 MOHEGAN AVENUE NEW LONDON,CT 06320 | NONE | PC | GENERAL SUPPORT | 3,000 |
| RIVERSIDE THEATER 116 W WISCONSIN AVE MILWAUKEE, WI 53203 | NONE | PC | GENERAL SUPPORT | 1,500 |
| DARTMOUTH-HITCHCOCK MEDICAL CENTER ONE MEDICAL CENTER DRIVE LEBANON,NH 03756 | NONE | PC | GENERAL SUPPORT | 1,500 |
| DOGS FOR LIFE 1230 16TH AVENUE VERO BEACH,FL 32960 | NONE | PC | GENERAL SUPPORT | 5,000 |
| FRONTIER NURSING SERVICE INC PO BOX 910912 LEXINGTON,KY 40591 | NONE | PC | GENERAL SUPPORT | 500 |
| GILBERT HART LIBRARY - TOWN OF WALLINGFO PO BOX 327 WALLINGFORD,VT 05773 | NONE | PC | GENERAL SUPPORT | 500 |
| GREEN HILL CEMETERY ASSOCIATION PO BOX 196 WALLINGFORD,VT 05773 | NONE | PC | GENERAL SUPPORT | 2,500 |
| HUMANE SOCIETY OF VERO BEACH 6174 NORTH A1A VERO BEACH,FL 32963 | NONE | PC | GENERAL SUPPORT | 2,000 |
| INDIAN RIVER HOSPITAL FOUNDATION 1000 36TH STREET VERO BEACH,FL 32960 | NONE | PC | GENERAL SUPPORT | 7,500 |
| INDIAN RIVER LAND TRUST 80 ROYAL PALM BLVD VERO BEACH,FL 32960 | NONE | PC | GENERAL SUPPORT | 1,200 |
| MCKEE BOTANICAL GARDENS 350 US HIGHWAY 1 VERO BEACH,FL 32962 | NONE | PC | GENERAL SUPPORT | 1,000 |
| MEMORIAL SLOAN-KETTERING CANCER CENTER PO BOX 27105 NEW YORK,NY 10117 | NONE | PC | GENERAL SUPPORT | 1,000 |
| NEW YORK UNIVERSITY 726 BROADWAY 2ND FLOOR NEW YORK,NY 10003 | NONE | PC | GENERAL SUPPORT | 1,000 |
| RUTLAND AREA VISITING NURSES ASSN & HOSP 7 ALBERT CREE DRIVE RUTLAND,VT 05701 | NONE | PC | GENERAL SUPPORT | 1,000 |
| Total | | | ▶ 3a | 68,700 |

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 | Foundation status of recipient | Purpose of grant or contribution | A mount |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|--------------------------------------|----------------------------------|---------|
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| COLONIAL WILLIAMSBURG FOUNDATION 134 N HENRY STREET WILLIAMSBURG,VA 23185 | NONE | PC | GENERAL SUPPORT | 500 |
| RUTLAND REGIONAL MEDICAL CENTER 160 ALLEN ST RUTLAND,VT 05701 | NONE | PC | GENERAL SUPPORT | 2,000 |
| SPENCE-CHAPIN SERVICES TO FAMILIES AND CHILDREN 6 EAST 94TH STREET NEW YORK,NY 10130 | NONE | PC | GENERAL SUPPORT | 1,500 |
| THE KNOX SCHOOL 541 LONG BEACH ROAD SAINT JAMES,NY 11780 | NONE | PC | GENERAL SUPPORT | 1,500 |
| TRINITY EPISCOPAL CHURCH 2365 PINE AVENUE VERO BEACH,FL 32960 | NONE | PC | GENERAL SUPPORT | 2,500 |
| VERO BEACH MUSEUM OF ART 3001 RIVERSIDE PARK DRIVE VERO BEACH,FL 32963 | NONE | PC | GENERAL SUPPORT | 1,500 |
| VISITING NURSE ASSOC & HOSPICE FDN 1110 35TH LANE VERO BEACH,FL 32960 | NONE | PC | GENERAL SUPPORT | 3,000 |
| WESTTOWN SCHOOL PO BOX 1799 WESTTOWN ROAD WESTTOWN,PA 19395 | NONE | PC | GENERAL SUPPORT | 20,000 |
| WILMINGTON COLLEGE PYLE CENTER BOX 1307 WILMINGTON,OH 45177 | NONE | PC | GENERAL SUPPORT | 2,000 |
| Total | | | | 68,700 |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491120004136

TY 2015 Investments - Other Schedule

Name: OWENS FAMILY FOUNDATION

EIN: 25-6865026

| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
|-----------------------|-----------------------|------------|----------------------------------|
| MUTUAL FUNDS - FIXED | AT COST | 161,800 | 155,413 |
| MUTUAL FUNDS - EQUITY | AT COST | 271,725 | 292,974 |

TY 2015 Taxes Schedule

Name: OWENS FAMILY FOUNDATION

EIN: 25-6865026

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-------------------------------|--------|--------------------------|------------------------|---------------------------------------------|
| FEDERAL ESTIMATES - PRINCIPAL | 334 | 0 | | 0 |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491120004136

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

OWENS FAMILY FOUNDATION

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Employer identification number

| | | 25-6865026 | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--|--|--|
| Organization type (check o | one) | | | | |
| Filers of: | Section: | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | I | | | |
| | 527 political organization | | | | |
| Form 990-PF | ▼ 501(c)(3) exempt private foundation | | | | |
| | ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | |
| | 501(c)(3) taxable private foundation | | | | |
| | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions in any one contributor. Complete Parts I and II. See instructions for determining a | · · · · · · · · · · · · · · · · · · · | | | |
| Special Rules | | | | | |
| under sections 509(a received from any or | lescribed in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 / 3\%$ supply (1) and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Partile contributor, during the year, total contributions of the greater of (1) \$5,000 or) Form 990-EZ, line 1 Complete Parts I and II | II, line 13, 16a, or 16b, and that | | | |
| during the year, total | lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive contributions of more than \$1,000 exclusively for religious, charitable, scientific cruelty to children or animals. Complete Parts I, II, and III | | | | |
| during the year, conti this box is checked, of purpose Do not com | lescribed in section $501(c)(7)$, (8) , or (10) filing Form 990 or 990-EZ that receive ributions $exclusively$ for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an $exclusive$ plete any of the parts unless the General Rule applies to this organization becaute, contributions totaling \$5,000 or more during the year | outions totaled more than \$1,000 If usively religious, charitable, etc, ause it received nonexclusively | | | |

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization OWENS FAMILY FOUNDATION Employer identification number 25-6865026

| M W O WENS 2004 CHARITABLE TRUST | , |
|-------------------------------------------------------------------|-----------------------------------------|
| M W O WENS 2004 CHARITABLE TRUST | roll |
| PITTSBURGH, PA 152222705 (Com | plete Part II for noncash |
| | |
| (a) (b) (c) No. Name, address, and ZIP + 4 Total contributions Ty | (d) ype of contribution |
| Pers Payr | • |
| (Com | cash |
| (a) (b) (c) No. Name, address, and ZIP + 4 Total contributions | (d) ype of contribution |
| Pers | • |
| \$ | cash Γ |
| (Com | pplete Part II for noncash ibutions) |
| (a) (b) (c) No. Name, address, and ZIP + 4 Total contributions Ty | (d) ype of contribution |
| Pers | son Γ |
| | , |
| (Com | cash |
| (a) (b) (c) No. Name, address, and ZIP + 4 Total contributions Ty | (d) ype of contribution |
| Pers | son Γ |
| | , |
| (Com | cash |
| (a) (b) (c) No. Name, address, and ZIP + 4 Total contributions Ty | (d) ype of contribution |
| Pers | son Γ |
| | , |
| (Com | cash |

| Name of organizat | | Employer identification n | umber |
|-------------------------|----------------------------------------------------------------------------------|------------------------------------------|----------------------|
| OWENS FAMILY FOUNDATION | | 25-6865026 | |
| Part II | Noncash Property | <u>.</u> | |
| T AIT II | (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 |
| | | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | <u> </u> | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | <u> </u> | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | <u> </u> | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | <u> </u> | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | <u> </u> | |
| | | | |

| Schedule B (Form 990, 990-EZ, or 990-F | F) | (201 | 5) |
|----------------------------------------|----|------|----|
|----------------------------------------|----|------|----|

| chedule B (Form 990, | , 990-EZ, or 990-PF) (2015) | | Page 4 |
|-----------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| ame of organization WENS FAMILY FOU | | | Employer identification number 25-6865026 |
| total more line entry of \$1,000 c | e than \$1,000 for the year from any | one contributor. Complete co t III, enter the total of exclusive rmation once. See instruction | ribed in section 501(c)(7), (8), or (10) that olumns (a) through (e) and the following ely religious, charitable, etc., contributions |
| (a) No.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, al | (e) Transfer of gr | ft Relationship of transferor to transferee |
| (a) o.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, a | (e) Transfer of gr | ft Relationship of transferor to transferee |
| (a) o.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| · - | Tourification | (e) Transfer of gr | |
| - | Transferee's name, address, a | nd 2124 | Relationship of transferor to transferee |
| (a) o.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | Transferee's name, address, al | (e) Transfer of gr nd ZIP4 | ft Relationship of transferor to transferee |
| - | | | |