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Form **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0052

۲	or c	alen	idar year 2015 or tax year beginning		, and ending		
-	Nan	ne of	foundation		<u>.</u>	A Employer identification	n number
			ROBERT P AND MARIANA R				
_			ILY FOUNDATION, INC.	27-0363761	·		
			nd street (or P O box number if mail is not delivered to street	B Telephone number	150		
_			WEST LIBERTY STREET 10			859-581-57	
	-		own, state or province, country, and ZIP or foreign p O , NV 89501	ostal code		C If exemption application is p	ending, check here
-			_ `	Initial return of a fe	armar nublia abariti	D 1 Foreign organization	n abaak bara
٠	ı U	HECK	all that apply: Initial return Final return	Amended return	ormer public charity	D 1. Foreign organizations	s, check here
			Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test,
- H	LC	heck	type of organization: X Section 501(c)(3) ex			1	
i	. 0	-		Other taxable private founda	ation	E If private foundation sta under section 507(b)(1)	
ī	Fai	-		ng method: X Cash	Accrual	F If the foundation is in a	•
			· —	her (specify)		under section 507(b)(1)	
	•		16,424,211. (Part I, colu		basis)		,, - ,, - · · · · · · · · · · ·
	Pa	rt 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))	- (a) Revenue and expenses per books	_ _ (b) Net investment _ income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
-		1	Contributions, gifts, grants, etc., received	16,479,900.		N/A	,,,,
			Check In the foundation is not required to attach Sch. B	, ,			<u> </u>
		3	Interest on savings and temporary cash investments				
		4	Dividends and interest from securities	69,276.	69,276.		STATEMENT 1
		5a	Gross rents				
		b	Net rental income or (loss)		 		
	ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	23,571.		<u>-</u>	
	evenue	_b	assets on line 6a		22 571		
,			Capital gain net income (from Part IV, line 2)		23,571.		 ,
;	ľ	8 9	Net short-term capital gain Income modifications				
		-	Gross sales less returns and allowances				1
_			Less Cost of goods sold				
			Gross profit or (loss)		-		
			Other income			_	
		12	Total. Add lines 1 through 11	16,572,747.	92,847.		
- >		13	Compensation of officers, directors, trustees, etc	0.	0.		0.
		14	Other employee salaries and wages				
•	ا ي		Pension plans, employee benefits				
	Jses		Legal fees				<u> </u>
	ğ		Accounting fees Other professional fees STMT 2	31.	0.	-	0.
	Ü		·		· · ·		0.
	Operating and Administrative Expens		Interest RECEL Taxes	VEU			
	str	40	Department and depletion	l iol			-
	ir.	20	Occupancy Travel, conferences, and meetings MAY 0 4	2016 6			
	Adi	21	Travel, conferences, and meetings	<u>1</u> 26			
	Pug	22	Printing and publications OGDE	N. UT			-
	g g	23	Other expenses				
	rati	24	Total operating and administrative				
	퇿		expenses. Add lines 13 through 23	31.	0.		0.
	$^{\sim}$		Contributions, gifts, grants paid	0.		_	0.
		26	Total expenses and disbursements.	21	^		
-		97	Add lines 24 and 25	31.	0.		0.
			Subtract line 26 from line 12:	16,572,716.			'
			Net investment income (if negative, enter -0-)	10,3,2,710.	92,847.	 	
			Adjusted net income (if negative, enter -0-)		22,0276	N/A	
			· · · · · · · · · · · · · · · · · · ·				

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orm 990-PF (2015)	FAMI	LY FOU	NDATIO	N. INC.	

	Part II Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only		Beginning of year	End o	f year		
L	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments		1,247,598.	1,247,598.		
		Accounts receivable ►		<u> </u>			
	_	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					
	ľ	disqualified persons					
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts			·		
s .	8	Inventories for sale or use					
Assets	٥	Prepaid expenses and deferred charges		-			
As	10a	Investments - U.S. and state government obligations	_				
		Investments - corporate stock					
		Investments - corporate bonds					
	١	Investments - land, buildings, and equipment basis					
	l''				- 1		
	12	Less accumulated depreciation Investments - mortgage loans					
	13	Investments - other STMT 3	0.	15,325,118.	15,176,613.		
		Land, buildings, and equipment basis		20,020,220			
	'-	Less accumulated depreciation	·· — ·		· ·		
	15	Other assets (describe >					
		Total assets (to be completed by all filers - see the					
	'	instructions. Also, see page 1, item I)	0.	16,572,716.	16,424,211.		
_	17	Accounts payable and accrued expenses		20/3/2//200	10,121,211		
	18	Grants payable					
m	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
Ē	21	Mortgages and other notes payable					
Ë		Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
	Ë	Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.			ı		
Se	24	Unrestricted			i		
auc	25	Temporarily restricted			'		
Bag	26	Permanently restricted					
Fund Balances		Foundations that do not follow SFAS 117, check here			1		
昰		and complete lines 27 through 31.					
ō	27	Capital stock, trust principal, or current funds	0.	0.			
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	16,572,716.			
et	30	Total net assets or fund balances	0.	16,572,716.	1		
~				.,,	:		
	31	Total liabilities and net assets/fund balances	0.	16,572,716.			
		Analysis of Changes in Not Assets or Fund B	clonoos				
Ц	art	Analysis of Changes in Net Assets or Fund B	alances				
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30				
	(mus	st agree with end-of-year figure reported on prior year's return)		1	0.		
2	Ente	r amount from Part I, line 27a		2	16,572,716.		
3	Othe	r increases not included in line 2 (itemize)		3	0.		
4	Add	lines 1, 2, and 3		. 4	16,572,716.		
5	Decr	eases not included in line 2 (itemize)		5	0.		
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	16,572,716.		
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(a) List and descr 2-story brick wai	I P-F	(b) How acquired P - Purchase D - Donation		e acquired day, yr.)	(d) Date sold (mo., day, yr.)			
1a CAPITAL GAINS I	DIVIDENDS			ļ				
<u>b</u>								
<u>c</u>					-			
e				 				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		L	(h) (e) pli	Gain or (loss) us (f) minus () (g)
a 23,571.								23,571.
b				_				
C				_				
d								
Complete only for assets showing	a asin in column (h) and owned h	y the foundation	on 12/31/60	-+		(I) Coupe (Cal (b) sain	
Complete only for assets showing	(j) Adjusted basis		cess of col. (i)	\dashv	CC	l. (k), but	Col. (h) gain not less thar	n -0-) or
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			Losse	s (from col. (h)) ´
_a								23-571.
b								
С								
d								
е						_		
	∫ If gain, also ent	ter in Part I, line	7	٦٢				
Capital gain net income or (net cap	ortal loss) 🕴 If (loss), enter	ter in Part I, line -0- in Part I, line	7	儿	2			23,571.
3 Net short-term capital gain or (loss	s) as defined in sections 1222(5)	and (6):						
If gain, also enter in Part I, line 8, o	column (c).						/ -	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	ndor Cootion 4040/o\fa	n Dadwaa	Tay on Nat	ا ل	3		N/A	
	<u>`</u>				sument in	come		-
(For optional use by domestic private	roundations subject to the section	n 4940(a) tax on	i net investment in	icome.)				
If section 4940(d)(2) applies, leave th	ıs part blank.							
Was the foundation liable for the secti	on 4042 tay on the distributable a	amount of any w	ear in the hace nor	riod2				Yes X No
If "Yes," the foundation does not quali			•	ilou :				162 NO
1 Enter the appropriate amount in e				ntries.	***			· · · · · · · · ·
(a)	(b)			(c)	•		Diotrib	(d)
Base periód years Calendar year (or tax year beginnin	ig in) Adjusted qualifying d	fistributions	Net value of no		ble-use assets	;	(col. (b) div	utión ratio ided by col. (c))
2014	<u> </u>	0.			(7.		.000000
2013		0.			().		.000000
2012		0.).		.000000
2011		0.				0.		.000000
2010		6,317.			2,37	3.		2.656434
							1	0 656434
2 Total of line 1, column (d)				_		2		2.656434
3 Average distribution ratio for the 5	•	al on line 2 by 5,	or by the number	of years	;			E21207
the foundation has been in existen	ice it less than 5 years					3	-	.531287
4. Embar the met value of membershiph	la	V 1: F						2 026 002
4 Enter the net value of noncharitable	le-use assets for 2015 from Part 7	K, line 5				4	 	<u>2,026,802.</u>
5 Multiply line 4 by line 2						5		1,076,814.
5 Multiply line 4 by line 3						-	-	1,0/0,014.
6 Enter 1% of net investment incom	e (1% of Part I line 27h)					6		928.
- Entor 170 of not mycoungment mcom	(170 OF 1 OF 1, IIIIO 270)					"	 	
7 Add lines 5 and 6						7	1	1,077,742.
						\ <u>'</u>	 	
8 Enter qualifying distributions from	Part XII, line 4					8		0.
If line 8 is equal to or greater than See the Part VI instructions.	·	ne 1b, and comp	plete that part usin	ng a 1% 1	tax rate.	1		

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Part VI Excise Tax Based on Investment Income (Section 494	l0(a), 4940(b), 4940(e), or 4	1948 -	see instr	uctio	ns)
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 ne	cessary-see instructions)	l			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ and enter 1%	1		1,8	<u>57.</u>
of Part I, line 27b			· · · · · · · · · · · · · · · · · · ·		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49	6 of Part I, line 12, col. (b). リ	ll.			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C	others enter -0-)	2			<u>0.</u>
3 Add lines 1 and 2		3		1,8	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	4		4 0	<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		1,8	<u>57.</u>
6 Credits/Payments:	1 1	1 1			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	4 I			
b Exempt foreign organizations - tax withheld at source	6b	1 1			
c Tax paid with application for extension of time to file (Form 8868)	6c	1 [
d Backup withholding erroneously withheld	6d				لـہ ۔
7 Total credits and payments. Add lines 6a through 6d		7			<u> </u>
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is atta	ached	8		4 0	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	.	9		1,8	<u>57.</u>
-10-Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refunded ►	11			
Part VII-A Statements Regarding Activities				W	N-
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or intervene	e in		Yes	
any political campaign?		١.٥	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo			1b		
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	na copies of any materials publish	ea or			
distributed by the foundation in connection with the activities.					X
c Did the foundation file Form 1120-POL for this year?	o voor		1c		<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the (1) On the foundation. ► \$ 0 • (2) On foundation managers					
e Enter the reimbursement (if any) paid by the foundation during the year for political expend		_			
managers. > \$ 0.	mure tax imposed on roundation				i
2 Has the foundation engaged in any activities that have not previously been reported to the	R92		2		X
If "Yes," attach a detailed description of the activities			<u> </u>		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument articles of incornoration	or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/			
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	?	•	5		х
If "Yes," attach the statement required by General Instruction T.					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either:			ļ l	
By language in the governing instrument, or			1	1	1 1
By state legislation that effectively amends the governing instrument so that no mandato	ry directions that conflict with the stat	e law			
remain in the governing instrument?			6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co.	mplete Part II, col. (c), and Part X	/	7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ons) >				l i
NV					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)			l	
of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of si	ection 4942(j)(3) or 4942(j)(5) for cal	endar			
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			9	L	X
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sched	lule listing their names and addresses	TMT	4 10	X	1

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			ĺ
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges	?		
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► MIRAMAR SERVICES, INC. Telephone no. ► 859			
	Located at ► 250 GRANDVIEW AVE., SUITE 400, FT. MITCHELL, KY ZIP+4	► 41017		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	_
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1	a-During the year did the foundation (either directly or indirectly):-			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	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) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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)?	No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after		1	
_	termination of government service, if terminating within 90 days.)	No		
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	, <u> </u>		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	A 1b		
	Organizations relying on a current notice regarding disaster assistance check here	┛┃ ¹	1	
•	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		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	,		
	defined in section 4942(j)(3) or 4942(j)(5)):			
•	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? Yes X	. I		
	16 P/op I leat the years	NO		
	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 the provisions of section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	A	l— ·	
	,	A 2b	-	
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Wes X	No.		
,	b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	140		
	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.)	A 3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48		Х
	b Did the foundation mivest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	⁷⁴	H	
	had not been removed from jeonardy before the first day of the tay year beginning in 20152	- <u>-</u> -		v

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

(a) Name and address of each employee paid more than \$50,000

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans and deterred compensation

(e) Expense of the provided in the provided in

Form **990-PF** (2015)

27-0363761 FAMILY FOUNDATION, INC. Form 990-PF (2015) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Part VIII 3 Five highest-paid independent contractors for professional services. 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 **Expenses** number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A

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0.

All other program-related investments. See instructions.

Total. Add lines 1 through 3

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FAMILY FOUNDATION, INC.

<u> P</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	632,359.
	Average of monthly cash balances	1b	1,425,308.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,057,667.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,057,667.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	30,865.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,026,802.
6	Minimum investment return. Enter 5% of line 5	6	101,340.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certair	
1	Minimum investment return from Part X, line 6	1	101,340.
2a	Tax on investment income for 2015 from Part VI, line 5 2a 2 1,857.		
−b-	-Income tax for-2015. (This does-not-include the tax from Part VI.)		
	Add lines 2a and 2b	2c	1,857.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,857. 99,483.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	99,483.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	99,483.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	\dashv	
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies 1	for the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
4. Disability stability amount for 2045 from Dark VI	Corbas	rears prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI,				99,483.
line 7				33,403.
2 Undistributed income, if any, as of the end of 2015			0.	
a Enter amount for 2014 only				
b Total for prior years:		0	•	
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010 6,198.				
b From 2011				
c From 2012				
dFrom 2013				
eFrom 2014	6 100			
f Total of lines 3a through e	6,198.			-
4 Qualifying distributions for 2015 from				
— Part XII; line 4: ► \$ 0 .	· - · ·			
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		· · · · · · · · · · · · · · · · · · ·
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount		44 .		0.
e Remaining amount distributed out of corpus	0.			C 100
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	6,198.			6,198.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				93,285.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
dExcess from 2014				
e Excess from 2015				

THE ROBERT P AND MARIANA R SCRIPPS FAMILY FOUNDATION, INC. Form 990-PF (2015) 27-0363761 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2015 (b) 2014 (c) 2013 (d) 2012 (e) Total income from Part I or the minimum investment return from Part X for each vear listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🗶 If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed; b The form in which applications should be submitted and information and materials they should include:

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

Form **990-PF** (2015)

c Any submission deadlines:

Form 990-PF (2015) FAMILY FOUNDATION FAMILY FOUNDATION (continuous properties of the properties of the

FAMILY FOUNDATION, INC.

27-0363761 Page 11

3 Grants and Contributions Paid During the	Very or Approved for Euture	Payment		
Recipient	If recipient is an individual.			· ·
Name and address (home or business)	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
	or substantial contributor	recipient		
a Paid during the year				
NONE				
Table				
Total b Approved for future payment		1	▶ 3a	1
v Approved for future payment				
NONE				
		}		
		<u> </u>		
Total			▶ 3b	

Unrelated business income

Excluded by section 512, 513, or 514

FAMILY FOUNDATION, INC. Form 990-PF (2015)

Part XVI-A	Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)		
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income		
a			1				
b	-	-					
C			 				
d	\vdash	 -	 				
e	<u> </u>						
·					 		
g Fees and contracts from government agencies					<u></u>		
2 Membership dues and assessments			<u> </u>				
3 Interest on savings and temporary cash	i l		ļ				
investments							
4 Dividends and interest from securities			14	69,276.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
— -b- Not debt-financed property————————————————————————————————————							
6 Net rental income or (loss) from personal							
property							
7 Other investment income			-				
	-		_				
8 Gain or (loss) from sales of assets other			14	23,571.			
than inventory			14	23,3/1.	<u> </u>		
9 Net income or (loss) from special events	<u> </u>						
10 Gross profit or (loss) from sales of inventory			<u> </u>				
11 Other revenue:							
a							
b							
c							
d							
e							
12 Subtotal. Add columns (b), (d), and (e)		0.		92,847.	0.		
13 Total. Add line 12, columns (b), (d), and (e)				13	92,847.		
(See worksheet in line 13 instructions to verify calculations.)				_			
				. 5			
Part XVI-B Relationship of Activities to	the Acco	implishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incom	ne is renorted i	n column (e) of Part XVI-A	contrib	nuted importantly to the accor	mnlichment of		
the foundation's exempt purposes (other than b			COMUL	outed importantly to the accor	npiisiinient oi		
and realisation a exempt purposes (earlier than a	y providing ta	Tuo for Such purposcoj.					
							
	·						
				•			
				•			
				<u>-</u>			
							

Form 990-PF (2015) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 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										No	
•	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:											
•	(1) Cash	· · ·	auon to a nononana	abio oxomptor	gamzation of			1a(1)		X	
	(2) Othe							1a(2)		X	
h	Other tran									 -	
•		s of assets to a noncharita	hle exempt organiza	ition				1b(1)		X	
		hases of assets from a no						1b(2)		X	
		al of facilities, equipment,	-	or gamzation				1b(3)		X	
	• •	bursement arrangements						1b(4)	\dashv	X	
		s or loan guarantees						1b(5)	\dashv	X	
		ormance of services or me	mharchin or fundra	ieina enlicitatio	nne			1b(6)		X	
r		of facilities, equipment, ma						1c		<u> </u>	
	_				edule. Column (b) should alv	wave chow the fair m	arket value of the goods of	بنب	l		
·		=	•	-	ed less than fair market valu	=	- · · · · · · · · · · · · · · · · · · ·		, ,		
		d) the value of the goods,				c in any nansaonon	or snaring arrangement, si	OW 111			
(a)ı	ine no	(b) Amount involved			e exempt organization —	(d) Description	of transfers, transactions, and s	harino arra	ngeme	——	
(-,-		-(b) runosiic involvos	(0) 1121110	N/A	o o o o o o o o o o o o o o o o o o o	(4) Description	or autoros, autocoros, and o	ina ing and	arigenie		
				11/21		 					
				<u> </u>		·					
						<u> </u>					
						 					
	- 	-	 			-					
	- 										
	- 					 	- -				
									_		
						-	· · · · · · · · · · · · · · · · · · ·				
				-	-						
	 					 					
_						 					
						_		-			
2a	Is the fou	ndation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organi	zations described					
		501(c) of the Code (other	-					Yes	X	l No	
ь		omplete the following sch	-	,,(0,, 0, 000.			_			, 110	
Ť	, -	(a) Name of org			(b) Type of organization	(c) Description of relationsh	ID .			
		N/A	:		.,,,,		· · · · · · · · · · · · · · · · · · ·	<u>- </u>			
		<u> </u>				-					
						, , , , , , , , , , , , , , , , , , ,					
						-					
-		,									
					ng accompanying schedules and			the IRS di	cours t	nie -	
Sig	gn and b	elief, it is true, correct, and cor	nplete.Declaration of p	reparer (other tha	n taxpayer) is based on all inform	nation of which preparer	nas any knowledge retur	n with the	prepare	31	
	ere	ON YU	XX	,	14/25/16	TREASU		Yes	See IIISI	, No	
	Sigi	nature of officer or trustee	; (Date	Title					
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if PTIN				
					\sim \sim \sim	ایر با	self- employed				
Pa	nid	TRACY TUNN	EY WARD	Drage	Juneyuld	4/25/16	P01	3008	364		
Pr	eparer	Firm's name ►MIR		TICES.	₹NC. 🔾	LL	Firm's EIN ► 35-21				
Us	se Only				_				_		
	_	Firm's address ▶ 25	0 GRANDV	EW AVE	., SUITE 400				_		
					41017-2086		Phone no. 859-58	1-5	758		
		•		-				rm 990		2015)	

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Name of the organization

THE ROBERT P AND MARIANA R SCRIPPS FAMILY FOUNDATION, INC.

Employer identification number

27-0363761

Organization type (check one):			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		
	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.		
General Rule			
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or yone contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.		
Special Rules			
sections 509(a)(1) any one contribute	in described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 or, 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, I line 1. Complete Parts I and II.		
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the autions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III.		
year, contributions is checked, enter purpose. Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seculusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively le, etc., contributions totaling \$5,000 or more during the year		
but it must answer "No" or	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), in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to it the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization THE ROBERT P AND MARIANA R SCRIPPS FAMILY FOUNDATION, INC.

Employer identification number

27-0363761

Part:I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE ROBERT P. SCRIPPS TRUST DTD 12-4-1992, MIRAMAR FIDUCIARY CORP., TR 250 GRANDVIEW DRIVE, SUITE 400 FT. MITCHELL, KY 41017	\$ <u>16,479,900</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person - Payroll - Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
523452 10-2	6-15	Schedule B (Form	990, 990-EZ, or 990-PF) (2015

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization THE ROBERT P AND MARIANA R SCRIPPS FAMILY FOUNDATION, INC.

Employer identification number

27-0363761

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	
		\$		
(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	
		\$		
(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	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
<u> </u>		\$		

1					
l .	27-	- 0 3	63	76	1

FAMILY	FOUNDATION, INC.		27-0363761
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete completing Part III, enter the total of exclusively religion.	columns (a) through (e) and the following	n section 501(c)(7), (8), or (10) that total more than \$1,000 for ing line entry. For organizations ess for the year (Enter this info once)
	Use duplicate copies of Part III if addition	nal 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, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
(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, a	nd 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, a		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
-		(a) Transfer of eith	
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
			The second of the second of

FORM 990-PF	DIVIDENDS	AND I	NTEREST	FROM	SECUR	ITIES	STATEMENT	1
SOURCE	GROSS AMOUNT	GA	PITAL INS DENDS	(/ REVI PER I		(B) NET INVE MENT INC		
VARIOUS DIVIDENDS	92,847.	2	3,571.	6.9	276.	69,2	76.	
TO PART I, LINE 4	92,847.	2	3,571.	69	276.	69,2	76.	
FORM 990-PF	ОТІ	HER PR	OFESSI	NAL FE	EES		STATEMENT	2
DESCRIPTION						(C) —ADJUSTEI NET INCOI		
MFC ADMINISTRATIVE F	EES		31.		0.	<u> </u>		0.
TO FORM 990-PF, PG 1			31.		0.			0.
FORM 990-PF		OTHER	INVEST	MENTS	<u>-</u>		STATEMENT	3
DESCRIPTION			VALUA METI		B00:	K VALUE	FAIR MARKE VALUE	T
106,991.5666 SHS DFA EQUITY 30,162.004 SHS DFA E		rg	COS		1	,222,914.	1,218,6	34.
CORE EQUITY 434,050.51 SHS DFA I 118,358.973 SHS DFA	NT EXT QUAI		COS	ST.	4	479,877. ,605,276.	475,3 4,540,1	
EXTEND QUALITY 50,354.406 SHS TORTO			COS		1	,277,093.		
PIPELINE 27,754.627 SHS VANGUINDEX			COS			479,877. 479,877.	•	
31,201,811 SHS VANGUINDX INST		ΛГ	COS			758,516.	740,4	19.
99,620.847 SHS VANGUINDEX-INST 50,568.104 SHS VANGU			COS		3	,188,863.	3,169,9	35.
INDEX INST	MAND GROWTH		COS) T.	2	,832,825.	2,769,6	15.
TOTAL TO FORM 990-PE	, PART II,	LINE	13		15	,325,118.	15,176,6	13.

			_
FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS	STATEMENT	4
	PART VII-A, LINE 10		

NAME OF CONTRIBUTOR ADDRESS

THE ROBERT P. SCRIPPS TRUST DTD 12-4-1992, MIRAMAR FIDUCIARY CORP, TRUSTEE

C/O 250 GRANDVIEW DR., SUITE 400

FT. MITCHELL, KY 41017

SPECIFIC BEQUEST TO FUND FOUNDATION

FORM9-90-PFPARTVI-IILIST TRUSTEES AND	C-OF-OFFICERS, DIRECTION MANAGERS			
NAME AND ADDRESS	TITLE AND CO			
REBECCA BRICKNER 100 W. LIBERTY ST, 10TH FLOOR RENO, NV 89501	CO-PRESIDENT/DIREC		0.	0.
VIRGINIA S. VASQUEZ 100 W. LIBERTY ST, 10TH FLOOR RENO, NV 89501	CO-PRESIDENT/DIREC	CTOR 0.	0.	0.
TRACY TUNNEY WARD 100 W. LIBERTY ST, 10TH FLOOR RENO, NV 89501	SECRETARY 1.00	0.	0.	0.
CYNTHIA M. CHIARO 100 W. LIBERTY ST, 10TH FLOOR RENO, NV 89501	TREASURER 1.00	0.	0.	0.
MARY ANN S. SANCHEZ 100 W. LIBERTY ST, 10TH FLOOR RENO, NV 89501	VICE PRESIDENT/DII	RECTOR 0.	0.	0.
MARGARET S. KLENZING 100 W. LIBERTY ST, 10TH FLOOR RENO, NV 89501	VICE PRESIDENT/DII	RECTOR 0.	0.	0.

. THE ROBERT P AND MARIANA R SCR	IPPS FAMIL		27-0	363761
CORINA S. GRANADO	VICE PRESIDENT/I	DIRECTOR		
100 W. LIBERTY ST, 10TH FLOOR RENO, NV 89501	1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.