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Form **990-P**,F

EXTENDED TO AUGUST 15, 2016 Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶ 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 Open to Public Inspection

	Ford	alen	dar year 2015 or tax year	r beginning				, and e	nding				
	Nar	ne of	foundation							A Em	ployer identification	number	
	Т	HE	HENRY A. MO	CKINNE	LL FOU	NDA'	rion			2	7-1279165		
			nd street (or PO box number						Room/suite	1	ephone number		
	Р	.0	. BOX 524							3	01-203-26	62	
			own, state or province, co	untry, and ZI		C If ex	emption application is p	ending, check here	$\cdot \Box$				
				3001-0									
			all that apply:	Initial returi	1		Initial return of a former public charity				Foreign organizations	s, check here	\cdot
				Final return			Amended return			,			
				Address ch	ange		Name change				Foreign organizations me check here and attach co	eting the 85% test, imputation	
	H C	heck	type of organization:	X Section	n 501(c) <u>(3) e</u> x	empt pr	ivate foundation			E If p	rivate foundation sta	tus was terminated	
	<u> </u>	Se	ction 4947(a)(1) nonexen	npt charitable	trust	Other ta	xable private founda	ition		un	der section 507(b)(1)	(A), check here	•
	I Fa	ur ma	rket value of all assets at	end of year	J Account	_		Accr	ual			60-month termination	ار
	•		Part II, col. (c), line 16)		Ot	her (spe	ecify)			un	der section 507(b)(1)	(B), check here	•
					(Part I, colu	mn (d)	must be on cash t	oasis.)		-		1 (4)	
	Pa	<u>irt l</u>	Analysis of Revenue ar (The total of amounts in colunecessarily equal the amount	ımns (b), (c), an	d (d) may not)))) Revenue and enses per books		ivestment ome		(c) Adjusted net income	(0) Disbursement for charitable purpo (cash basis only)	ses
		1	Contributions, gifts, gran	ts, etc., recei	ved	4	<u>,050,398.</u>			<u> </u>	N/A		
		2		n is not required to	o attach Sch B					<u> </u>			
		3	Interest on savings and temp cash investments	orary			2,725.		2,725			STATEMENT	
9,		4	Dividends and interest fro	om securities	3		301,593.	30	1,593.	\		STATEMENT	_3_
202)	5a Gross rents				<u> </u>				 			
4.0	?		Net rental income or (loss)	-			452.			┼		STATEMENT	1
SEP 1 4 2016	e e	١	Net gain or (loss) from sale of Gross sales price for all	1,353		<u></u> -	4,72.			┼─		DIAILMENI	
<u>م</u> «	evenu	b 7	assets on line 6a Capital gain net income (from			61	1,136	_					
S S	2 %	8 Net short-term capital gain						7.200					
<u>م</u> ب	١	9	Income modifications				-			 			
뿌	Ka WITH	l '	Gross sales less returns and allowances										
CANNED	₹	Ι.	Less Cost of goods sold										
S-	ā	C	Gross profit or (loss)										
Ø.	7		Other income			<u> </u>				 			
1	τ		Total. Add lines 1 through			4	,355,168.	91	5,454				
4	-	13	Compensation of officers, dir		s, etc		0.		<u>0</u> .	-			0.
			ther employee salaries	•						+			
Se.	6		ension plans, employee egal fees RE(-	
Ξ	n 9	뭂	ccounting fees	CEIVE	—					 			
Z	7	0	ther professional fees.		၂ဗ္ဂ								
ره ا	C	RECORD	ither professional fees nterest 👸 AUG	2 4 20	RS-OS								
_ <u>ਹ</u>	B		unco										
, III	þ	RS	epreciation and@plate	DEN. L	JT ⁻ l					<u> </u>			
7 5	,	Ш	Occupancy									<u> </u>	
<u>e</u>	Ŀ	9	ravel, conferences, and							-			
	2	EN	Printing and publications	3						-		<u> </u>	
Certified Article Num	<u>-</u>	U)	Other expenses	-1-1-4414						+			
, O	12.		Total operating and admexpenses. Add lines 13				0.		0				0.
			Contributions, gifts, gran			<u> </u>	806,401.		<u> </u>	•		806,4	
	- '	26	Total expenses and disl				300/4011		_	1		500,4	
		٦	Add lines 24 and 25				806,401.		0			806,4	01.
		27	Subtract line 26 from line	e 12:	-					Ì			
		a	Excess of revenue over expe	nses and disbu	rsements	3	,548,767.						
		b	Net investment income	(if negative, en	ter -0-)			91	5,454	•			
		C	Adjusted net income (# r	negative, enter	-0-)						N/A		

For	m 99	0-PF (2015) THE HENRY A. MCKINNELL			1279165 Page 2
Б	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u> </u>
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	-14.	-2.	-2.
	2	Savings and temporary cash investments	5,493,206.	6,268,557.	6,268,557.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			_
		Less: allowance for doubtful accounts ▶			
Ø	8	Inventories for sale or use		_	
Assets	9	Prepaid expenses and deferred charges			
Ą	L	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 4	10,238,882.	13,012,286.	17,623,928.
		Investments - corporate bonds -			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
	` `	Less accumulated depreciation			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	15,732,074.	19,280,841.	23,892,483.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue	1		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ξģ	21	Mortgages and other notes payable			
Ë	1	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
and	25	Temporarily restricted			
Bal	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
ī		and complete lines 27 through 31.			
ŏ	27	Capital stock, trust principal, or current funds	0.	0.	
šets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	15,732,074.	19,280,841.	
Net	30	Total net assets or fund balances	15,732,074.	19,280,841.	
_					
	31	Total liabilities and net assets/fund balances	15,732,074.	19,280,841.	
LP	art	III Allalysis of Changes in Net Assets of Fund to			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mu	st agree with end-of-year figure reported on prior year's return)	1	15,732,074.	
2	Ente	r amount from Part I, line 27a	2	3,548,767.	
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	19,280,841.
		eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	olumn (b), line 30	6	19,280,841.
					Form 990-PF (2015)

	Calcillat year (Or lax year beginning iii)			(00	(5) 5555 5) 55 (5))
_	2014	105,000.	16,271,327.		.006453
_	2013	853,285.	12,395,578.		.068838
	2012	263,189.	8,117,804.		.032421
_	2011	153,654.	6,071,880.		.025306
_	2010	17,736.	3,118,351.		.005688
2	Total of line 1, column (d)			2	.138706
3	Average distribution ratio for the 5-year ba the foundation has been in existence if less	3	.027741		
4	Enter the net value of noncharitable-use as		4	20,652,622.	
5	Multiply line 4 by line 3			5	572,924.
6	Enter 1% of net investment income (1% of	Part I, line 27b)		6	9,155.
7	Add lines 5 and 6			7	582,079.
8	Enter qualifying distributions from Part XII	, line 4		8	806,401.
	If line 8 is equal to or greater than line 7, cl See the Part VI instructions.	neck the box in Part VI, line 1b, and complete	that part using a 1% tax rate.		

Form 990-PF (2015)

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orm 990 Part V	PF (2015) THE HENRY A. MCKINNELL FOUNDA' Excise Tax Based on Investment Income (Section 494)	TION 0(a).	1 4940(b), 4940(e			1279 - see i		ction	age <u>4</u>
	npt operating foundations described in section 4940(d)(2), check here and e				<u>"</u>		Ī			
	of ruling or determination letter: (attach copy of letter if ne									
	estic foundations that meet the section 4940(e) requirements in Part V, check here	▼	and ente	r 1%)	1			9,1	<u>55.</u>
	art I, line 27b									
c All o	ther domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49	6 of Par	t I, line 12	, col. (b).)					
2 Tax	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C	thers er	nter -0-)			2				0.
3 Add	lines 1 and 2					3			9,1	<u>55.</u>
4 Sub	itle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others e	nter -0-)			4				0.
5 Tax	based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5_			<u>9,1</u>	<u>55.</u>
6 Crec	its/Payments:									
a 201	5 estimated tax payments and 2014 overpayment credited to 2015	6a		6,	000.					
b Exer	npt foreign organizations - tax withheld at source	6Ъ					1			
c Tax	paid with application for extension of time to file (Form 8868)	6c		<u> </u>	155.					
d Back	cup withholding erroneously withheld	6d								
7 Tota	I credits and payments. Add lines 6a through 6d					7			<u>9,1</u>	<u>55.</u>
	r any penalty for underpayment of estimated tax. Check here 🔲 if Form 2220 is atta	ached				8				
9 Tax	due. If the total of lines 5 and 8 is more than line 7, enter amount owed					9				0.
10 Ove	payment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					10				
	r the amount of line 10 to be: Credited to 2016 estimated tax			Refun	ded 🚩	11_				
Part V	II-A Statements Regarding Activities									
1a Duri	ng the tax year, did the foundation attempt to influence any national, state, or local legi	slation o	or did it pa	rticipate or i	ntervene	ın			Yes	
any	political campaign?							1a		X
b Did	t spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (se	e instructi	ons for the o	lefinition)?		1b		<u>X</u>
	e answer is "Yes" to 1a or 1b , attach a detailed description of the activities ar	nd copi	es of any	matenals ,	oublishe	d or				
dist	nbuted by the foundation in connection with the activities								,	
	the foundation file Form 1120-POL for this year?							1c		<u>X</u>
	r the amount (if any) of tax on political expenditures (section 4955) imposed during th				_					
	On the foundation. > \$ 0 . (2) On foundation manager				0.					
	r the reimbursement (if any) paid by the foundation during the year for political expend	liture ta:	x imposed	l on foundat	on					
	agers. ▶ \$0.									
	the foundation engaged in any activities that have not previously been reported to the	IRS?						2		<u>X</u>
	es, " attach a detailed description of the activities									
	the foundation made any changes, not previously reported to the IRS, in its governing		ient, articl	es of incorpi	oration, c	r				
	ws, or other similar instruments? If "Yes," attach a conformed copy of the chang							3		X
	the foundation have unrelated business gross income of \$1,000 or more during the ye	ar?				3.7	. / >	4a		X
	es, has it filed a tax return on Form 990-T for this year?	^				N	I/A	4b		
-	there a liquidation, termination, dissolution, or substantial contraction during the year	,						5		<u>X</u> _
	es," attach the statement required by General Instruction T									
	the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 6	eitner:								
	/ language in the governing instrument, or		tiona that	معالمه سيغام	the state	. In				
	y state legislation that effectively amends the governing instrument so that no mandato	ry airec	tions mai	COMMICT WITH	me state	law				v
	ain in the governing instrument?		0-44-	-1 (-)	D4 M	,		7	Х	X
7 Did	the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	mpiete	Рап ІІ, С	oi. (c), and	Paπ XV			<u> </u>		
0- 5-4-	with a state of the subject the foundation reports or with which it is required for a potrice.									
	r the states to which the foundation reports or with which it is registered (see instructi ச	UIIS) =								
W If the	x e answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorna	General (or decionate						
	e answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-FF to the 7 ach state as required by General Instruction G? If "No," attach explanation	- HOLLIE	General (o ucaiyiidtt	'1			8b	х	
	te foundation claiming status as a private operating foundation within the meaning of s	ection A	045(1)(3)	Or 4049/1/F) for calc	ndar		- 00	Λ	
	e foundation claiming status as a private operating foundation within the meaning of s 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"				, ioi cale	iiuai		9		X
•	any persons become substantial contributors during the tax year? <u>If "Yes," attach a sche</u> c							10		X
יט טוע	any persons become substantial contributors during the tax year is res, attach a sched	inie iiaiiui	g aleir name	a anu auures	NO 3		Fni)-PF	(2015)
							. 01	551	•	(~~ , ~)

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Form **990-PF** (2015)

orm 990-PF (2015) THE HENRY A. MCKINNELL F	OUNDATION		<u> 27-12791</u>	65 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4/20 May Be F	sequirea (continu	Jed)	
5a During the year did the foundation pay or incur any amount to:		٠ رـــــا	[TT]	<u> </u>
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		. चि	
any voter registration drive?	0		s X No s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	מא ניציו פ	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	□ v ₂	s X No	
4945(d)(4)(A)? (see instructions)	or adventional purposes, or f		S LALINO	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or r		s X No	
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	for the excentions described i		יאו באביווט	
section 53.4945 or in a current notice regarding disaster assistance (see instru		ii ricgulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned		
expenditure responsibility for the grant?		. —	s 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	, , ,	☐ Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/	
Paid Employees, and Contractors				.
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	account, other allowances
DD HENDY & MOVINGELL	to position TRUSTEE	enter -0-)	compensation	allowalices
DR. HENRY A. MCKINNELL P.O. BOX 524	TRUSTEE			
JACKSON, WY 830010524	2.00	0.	0.	0.
ORCHDON, WI 030010324	2.00			†
		111015 11		l
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Eynense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NOME.	devoted to position		compensation	allowalices
NONE	-			
		 		<u> </u>
	1			
	1			
		1		
		<u> </u>		<u> </u>
Total number of other employees paid over \$50,000				0
			Form	n 990-PF (2015)

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Paid Employees, and Contractors (continued) 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 NONE Column	Form 990-PF (2015) THE HENRY A. MCKINNELL FOUNDATION		L279165 Page 7
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Column	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Foundation Ma	lighly	
NONE Total number of others receiving over \$50,000 for professional services	3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
Fotal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A	(a) Name and address of each person paid more than \$50,000 (b) Type	of service	(c) Compensation
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A 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 All other program-related investments. See instructions.	NONE		
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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 All other program-related investments. See instructions.	List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	the	Expenses
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 All other program-related investments. See instructions.	1 N/A		
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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 All other program-related investments. See instructions. Total. Add lines 1 through 3	3		
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 All other program-related investments. See instructions. Total. Add lines 1 through 3			
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 All other program-related investments. See instructions. Brotal. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. N/A Amount All other program-related investments. See instructions. Total. Add lines 1 through 3	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. N/A Amount All other program-related investments. See instructions. Total. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. N/A Amount All other program-related investments. See instructions. Total. Add lines 1 through 3			
N/A All other program-related investments. See instructions. Fotal. Add lines 1 through 3			• • • • • •
All other program-related investments. See instructions. Solution Total. Add lines 1 through 3			Amount
All other program-related investments. See instructions. Solution Fotal. Add lines 1 through 3	1 N/A		
All other program-related investments. See instructions. Solution Fotal. Add lines 1 through 3			
All other program-related investments. See instructions. Solution Fotal. Add lines 1 through 3			
Total. Add lines 1 through 3 ■ 0.	2		
Total. Add lines 1 through 3 ■ 0.			
Total. Add lines 1 through 3 ■ 0.	All other account related investments. Con instructions		
Fotal. Add lines 1 through 3 ▶ 0 •	· ·		
	3		
	Total Add lines 1 through 3		0
FOID 350-F F (7015)	Total / No inito : tirougho		Form 990-PF (2015

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, 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	15,374,887.
b	Average of monthly cash balances	1b	15,374,887. 5,592,242.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	20,967,129.
е	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	20,967,129.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	314,507.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	20,652,622.
6	Minimum investment return. Enter 5% of line 5	6	1,032,631.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	1,032,631.
2a	Tax on investment income for 2015 from Part VI, line 5 2a 9, 155.		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	9,155.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,023,476.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,023,476.
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	1,023,476.
P	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	806,401.
b	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	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	806,401.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	<u>9,155.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	797,246.
	Note. The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation (qualifies fo	or the section

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4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7				1,023,476.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			806,401.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 806,401.			006 401	
a Applied to 2014, but not more than line 2a			806,401.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		<u> </u>
c Treated as distributions out of corpus	•	•		
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				0.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a 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				4 000 474
be distributed in 2016				1,023,476.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010	0.			
not applied on line 5 or line 7	<u>.V •</u>			
9 Excess distributions carryover to 2016.	0.			
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9: a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · ·	·····	Form 990-PF (2015)

Part XIV Private Operating Fo	undations (see Inst			N/A	7-12/9105 rage
1 a If the foundation has received a ruling or				N/A	
foundation, and the ruling is effective for					
b Check box to indicate whether the founda			un section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g roundation described	Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for			 		
each year 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					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
``'					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	1				
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 Infor	mation (Complet	te this part only	if the foundat	tion had \$5,000	or more in assets
at any time during the					
Information Regarding Foundation	n Managers:				
a List any managers of the foundation who		han 2% of the total co	ntributions received b	y the foundation before	the close of any tax
year (but only if they have contributed m				-	
R. HENRY A. MCKINNE	L				
b List any managers of the foundation who other entity) of which the foundation has			n (or an equally large	portion of the ownersh	ip of a partnership or
IONE					
2 Information Regarding Contribution	on. Grant. Gift. Loan.	Scholarship, etc., I	Programs:		
Check here ► X if the foundation or				oes not accept unsolici	ited requests for funds. If
the foundation makes gifts, grants, etc. (
a The name, address, and telephone numb	er or e-mail address of th	ne person to whom ap	olications should be a	ddressed:	
OBERT J. MILLER, ES					
C/O DAY PITNEY LLP,			STAMFORD	, CT 06901	
b The form in which applications should be	submitted and informate	on and materials they	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographica	l areas, charitable field	s, kınds of ınstitutions	s, or other factors:	
		,			
					Form 990-PF (20

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient a Paid during the year PUBLIC CHARITY TO SUPPORT PROGRAMS VANGUARD CHARITABLE FOUNDATION (DONOR NONE AND ACTIVITIES 806,401, ADVISED FUND) 806,401, Total b Approved for future payment NONE **▶** 3b Total

V\/I A	A lucaia a f	Income-Producing	Activition
IIT XVI-A I	Analysis of	income-Froducina	ACTIVITIES

Enter gross amounts unless otherwise indicated.	Unrelated	business income		section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	Tunction moonie
a	_				
b	_				
C	_				
d	_				·
e	_				·
f	-		 		·
g Fees and contracts from government agencies					
2 Membership dues and assessments	ļ			····	
3 Interest on savings and temporary cash					
investments			14	2,725. 301,593.	
4 Dividends and interest from securities			14	301,593.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	452.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
C	1 1				
d					
e		·			
2 Subtotal. Add columns (b), (d), and (e)).	304,770.	0
3 Total. Add line 12, columns (b), (d), and (e)				13	304,770
See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities	to the Accor	nplishment of	Exempt Pu	ırposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other th				importantly to the accomp	olishment of
3&4 THE INVESTMENT OF FOU	NDATION A	SSETS IS 1	NTENDE	D TO ENHANCE	THE AMOUNT
THAT MAY BE EXPENDED					
PRINCIPAL ACTIVITY.					-
			**		

Line No.		Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).														
3&4	THE	INVES	STME	NT C	F FOU	JNDA'	rion	ASSET	S IS	INTE	NDEI	TO	ENHANCE	THE	AMOU	NT
	1	MAY						NTMAKI					FOUNDAT:	ON'S	3	
	PRIN	CIPAI	L AC	TIVI	TY.				•							
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	ļ															
	1															

X Yes Signature of officer or trustee Title Date: Print/Type preparer's name Check [Prepara 's signature Date self-employed P00836026 ROBERT J. MILLER Preparer Firm's name ► DAY PITNEY Firm's EIN $\triangleright 06 - 0317480$ **Use Only** Firm's address ► ONE CANTERBURY GREEN STAMFORD, CT 06901 203-977-7300

Form **990-PF** (2015)

shown below (see instr)?

Here

Paid

THE HENRY A. MCKINNELL FOUNDATION

Part IV		sses for Tax on Investment Income		1	,	
	(a) List and 2-story br	describe the kind(s) of property solution ick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 4,4	22 SHS. AMS	URG CORP.		D	11/12/14	12/22/15
b 2,8	31 SHS. ANH	EUSER BUSCH		D	VARIOUS	12/22/15
c 4,4	70 SHS. CEN	TENE CORP.		D	VARIOUS	12/22/15
d 1,7	90 SHS. COL	UMBIA SPORTSWEAR	CO.	D	12/19/11	
e 2,1	40 SHS. HIL	L ROM HOLDINGS I	NC.	D	10/18/12	
f 92	SHS. MIDDLE	BY CORP.		D	12/17/12	
g 3,1	11 SHS. THO	R INDUSTRIES INC	•	D	VARIOUS	12/22/15
h			***		<u> </u>	
<u>k</u>						
		·			 	
<u>m</u>						
<u>n</u>						
	Gross sales price	(f) Depreciation allowed	(g) Cost or other basis) Gain or (loss)	
		(or allowable)	plus expense of sale	(6) [olus (f) minus (g)	115 562
a	338,965.		223,402.			115,563.
<u>b</u>	352,021.		198,119.			153,902.
C	291,862.		130,464.			161,398.
<u>d</u>	81,995.		41,123. 62,853.			40,872.
<u>e</u>	103,599. 9,935.		3,962.			5,973.
<u>f</u>	174,948.		82,266.	-		92,682.
<u>g</u> h	1/4,540.		02,200.			72,002.
1						
<u>'</u>						_
k				•		
1		-1-477				
m						
n						
0						
Comp	lete only for assets showing	ng gain in column (h) and owned by	the foundation on 12/31/69		sses (from col. (h))	
(i) F.	M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any		of col. (h) gain over not less than "-0-")	col. (k),
a						115,563.
b						<u>153,902.</u>
С						<u>161,398.</u>
d						40,872.
<u>e</u>					•	40,746.
<u>f</u>						5,973.
9	_					92,682.
<u>h</u>				****		
1						
						
<u>k</u>						
<u> </u>						
m n						
0						
-					-	-
	gain net income or (net ca	(1000), 0	, I	2		611,136.
If gain,	also enter in Part I, line 8,		nd (6):		37/3	
II (loss), enter "-0-" in Part I, line 8	ō		3	N/A	

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

Employer identification number

	THE HENRY A. MCKINNELL FOUNDATION	27-1279165
Organization type (chec	k 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	
	on is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	al Rule. See instructions
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a contri	
Special Rules		
sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% su (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 outor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the a EZ, line 1. Complete Parts I and II.	, 16a, or 16b, and that received from
year, total conti	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or of cruelty to children or animals. Complete Parts I, II, and III.	
year, contributions is checked, ento purpose. Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received ons exclusively for religious, charitable, etc., purposes, but no such contributions total er here the total contributions that were received during the year for an exclusively related to complete any of the parts unless the General Rule applies to this organization becausele, etc., contributions totaling \$5,000 or more during the year	aled more than \$1,000. If this box ligious, charitable, etc.,
but it must answer "No"	on that is not covered by the General Rule and/or the Special Rules does not file Sche on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or or leet 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)

Employer identification number

THE HENRY A. MCKINNELL FOUNDATION

27-1279165

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is ne	eded
--	------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u> </u>	DR. HENRY A. MCKINNELL P.O. BOX 524 JACKSON, WY 83001-0524	\$\$, 350,733.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DR. HENRY A. MCKINNELL P.O. BOX 524 JACKSON, WY 83001-0524	\$\$ 	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	DR. HENRY A. MCKINNELL P.O. BOX 524 JACKSON, WY 83001-0524	\$\$,931.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	DR. HENRY A. MCKINNELL P.O. BOX 524 JACKSON, WY 83001-0524	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
4 (a) No.	P.O. BOX 524	\$ 103,876. (c) Total contributions	Payroll X Noncash X (Complete Part II for
(a)	P.O. BOX 524 JACKSON, WY 83001-0524 (b)	(c)	Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	P.O. BOX 524 JACKSON, WY 83001-0524 (b) Name, address, and ZIP+4 DR. HENRY A. MCKINNELL P.O. BOX 524	(c) Total contributions	Payroll Noncash X (Complete Part II for noncash contributions) (d) Type of contribution Person Payroll Noncash X (Complete Part II for
(a) No. 5	P.O. BOX 524 JACKSON, WY 83001-0524 (b) Name, address, and ZIP+4 DR. HENRY A. MCKINNELL P.O. BOX 524 JACKSON, WY 83001-0524 (b) Name, address, and ZIP+4 DR. HENRY A. MCKINNELL P.O. BOX 524 JACKSON, WY 83001-0524	(c) Total contributions \$ 81,266. (c) Total contributions (c) Total contributions	Payroll Noncash X (Complete Part II for noncash contributions) (d) Type of contribution Person Payroll Noncash X (Complete Part II for noncash contributions)

Employer identification number

<u>THE H</u>			7-1279165
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed	
		(c) Total contributions	(d) Type of contribution
7	P.O. BOX 524	\$342,926.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
		(c) Total contributions	(d) Type of contribution
	DR. HENRY A. MCKINNELL P.O. BOX 524	\$ <u>2,697,525</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions)
		(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
		(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
	• •	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II for noncash contributions)

Employer identification number

THE HENRY A. MCKINNELL FOUNDATION

27-1279165

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	ıf addıtıonal space ıs needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	2,831 SHS. ANHEUSER BUSCH	_	
		\$ 350,733.	12/18/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	3,111 SHS. THOR		
		\$\$ <u>173,189.</u>	12/21/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	92 SHS. MIDDLEBY	_	
<u> </u>			12/21/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	2,140 SHS. HILL ROM HOLDING, INC.	_	
<u> </u>			12/21/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	1,790 SHS. COLUMBIA SPORTSWEAR	_	
		\$\$\$\$	12/21/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

6

<u>290,952.</u> <u>12/21/15</u>

4,470 SHS. CENTENE CORPORATION

Employer identification number

THE HENRY A. MCKINNELL FOUNDATION

27-1279165

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	ıf addıtıonal space ıs needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_	4,422 SHS. AMSURG	_	
_7		-	
		\$\$	12/21/15
(a) No.	(b)	(c)	(d)
rom Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
	14,250 SHS. VANGUARD 500 INDEX FUND	_	
8		-	
		\$ 2,697,525.	12/17/15
(a) No.	(b)	(c)	(d)
rom Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
		_	
		_	
		_ \$	
(a)		(c)	
No. rom Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		-	
		_ _	
		- ⁴	
(a) No.	(b)	(c)	(d)
rom Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
		- -	
		_	
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(see instructions)	Date received
		-	
		 \$	
153 10-20	9-15		90, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 4 Employer identification number Name of organization 27-1279165 THE HENRY A. MCKINNELL FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

FORM 990)-PF	GAIN OR	(LOSS)	FROM	SALE	OI	· A	SSETS		STA	TEMENT	1
DESCRIP	(A) FION OF PROPER	RTY						ANNER QUIRED	DA ACQU	TE IRED	DATE	SOLD
4,422 SI	HS. AMSURG COF	RP.				_	DO	NATED	11/1	2/14	12/2	22/15
	(B) GROSS SALES PRICE		C) UE AT OF ACQ.	EXP	(D) ENSE SALE	OF	?	(E)	с.	GAIN	(F)	SS
	338,965	5.	342,926	•		(<u> </u>		0.		-3,	961.
DESCRIP	(A) TION OF PROPER	RTY						ANNER QUIRED	DA ACQU		DATE	SOLD
2,831 SI	HS. ANHEUSER E	BUSCH					DO	NATED	VARI	ous	12/2	22/15
	(B) GROSS SALES PRICE	VAL	C) UE AT OF ACQ.	EXP	(D) ENSE SALE	OF	ङ्	(E)	c.	GAIN	(F) I OR LO	SS
	352,021	L.	350,733	•		() ·		0.		1,	288.
DESCRIP	(A) FION OF PROPER	RTY						ANNER QUIRED	DA ACQU	TE IRED	DATE	SOLD
4,470 SI	HS. CENTENE CO	ORP.				-	DO	NATED	VARI	ous	12/2	22/15
	(B) GROSS	VAL	C) UE AT	EXP	(D) ENSE	OI	F	(E)			(F)	
_	SALES PRICE	TIME	OF ACQ.		SALE			DEPRE	C•	GAIN	OR LO)SS
	291,862	2.	290,952	•		(0.		0.			910.

DESCRII	(A) PTION OF PROPERTY				MANNER CQUIRED		TE IRED	DATE SOLD
1,790	SHS. COLUMBIA SPO	 RTSWEAR CO.		D	ONATED	12/1	9/11	12/22/15
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	C.	GATN	(F)
	81,995.	81,266.		0.		0.		729.
DESCRI	(A) PTION OF PROPERTY				MANNER CQUIRED		TE IRED	DATE SOLD
2,140	SHS. HILL ROM HOL	- DINGS INC.			ONATED	10/1	8/12	12/22/15
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F)
	103,599.	103,876.		0.	-	0.		-277.
DESCRI	(A) PTION OF PROPERTY	7			MANNER CQUIRED		TE VIRED	DATE SOLD
92 SHS	. MIDDLEBY CORP.	_		Ī	ONATED	12/1	7/12	12/22/15
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F) I OR LOSS
	9,935.	9,931.		0.		0.		4.
DESCRI	(A) PTION OF PROPERTY			7	MANNER ACQUIRED		TE JIRED	DATE SOLD
3,111	SHS. THOR INDUSTR	RIES INC.		I	ONATED	VARI	ous	12/22/15
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F) I OR LOSS
	174,948.	173,189.		0.		0.		1,759.
СУБТФУ	L GAINS DIVIDENDS	S FROM PART TV				-		0.
	TO FORM 990-PF, I							452.
TOTUL	IO FORM JOO FE I	THE T, DIME OR						

FORM 990-PF INTERE	ST ON SAVINGS	S AND TEMPOR	ARY CAS	H IN	VESTMENTS	STATEMENT	2
SOURCE		(A) REVENUE PER BOOK			(B) VESTMENT COME	(C) ADJUSTEI NET INCOI	
VANGUARD PRIME MONE	Y MARKET	2,7	25.	, '	2,725.		
TOTAL TO PART I, LI	NE 3	2,7	25.		2,725.		
FORM 990-PF	DIVIDENDS A	AND INTEREST	FROM S	ECUR	ITIES	STATEMENT	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVEN PER BO		(B) NET INVES MENT INCO		
	113,558.	0.	113,	558.	113,55	58.	
FUND	15,704.	0.	15,	704.	15,70	4.	
VANGUARD EMERGING MARKETS	9,689.	0.	9,	689.	9,68	19.	
VANGUARD SMALL CAP INDEX FUND	50,486.	0.	50,	486.	50,48	36.	
VANGUARD TOTAL STOCK MKT	112,156.	0.	112,	156.	112,15	66.	
TO PART I, LINE 4	301,593.	0.	301,	593.	301,59)3.	-
FORM 990-PF		CORPORATE S	TOCK			STATEMENT	4
DESCRIPTION				воо	K VALUE	FAIR MARK	ET
VANGUARD A/C 258264	78			13	,012,286.	17,623,	928
TOTAL TO FORM 990-P	F, PART II, I	LINE 10B	-	13	,012,286.	17,623,	928
			=				

THE HENRY A. MCKINNELL FOUNDATION 2015 FORM 990-PF

LINE 12 – DISTRIBUTION TO A DONOR ADVISED FUND

A distribution of \$806,401.00 was made in 2015 to the Vanguard Charitable Foundation. This distribution is treated as a qualifying distribution. The donor advised fund assets will be distributed solely for charitable purposes, directly accomplishing Section 170(c)(2)(B) purposes, and will be distributed taking into account recommendations from the trustee's children in order to increase their involvement in philanthropy.