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Department of the Treasury

Internal Revenue Service

#### DLN: 93491133020856

OMB No 1545-0052

Open to Public Inspection

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

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

For	caler	ndar year 2015, or tax y	ear beginning 01-0	, and ending 12-31-2015					
	e of four JGH AND	ndation PATRICIA OKANE FOUNDATION				A Employer id	entification numb	er	
C/	O HUGH	OKANE				27-4313631			
		street (or P O box number if mail is G ROCK ROAD	not delivered to street address)	Room/suite		<b>B</b> Telephone nur	s)		
19	O PIPING	ROCK ROAD				(516) 759-0944			
		state or province, country, and ZIP of EY, NY 11560	r foreign postal code			<b>C</b> If exemption	application is pendin	g, check here 🕨 🦵	
<b>G</b> C1	neck all	I that apply Initial return Final return	Initial return of a fo	rmer public charity		_	ganizations, check h	tho 95% —	
		TAddress chang			!	test, chec	k here and attach co Indation status was	mputation	
		pe of organization					n 507(b)(1)(A), chec		
		et value of all assets at end	JAccounting method		ı	<b>F</b> If the founda	ation is in a 60-mont	h termination	
		rom Part II, col. (c), \$ 2,995,652	Other (specify)	oe on cash basıs.)		under sectioi	n 507(b)(1)(B), ched	ck here	
Pa	rt I	Analysis of Revenue a (The total of amounts in columns (necessarily equal the amounts in columns)	(b), (c), and (d) may not	Revenue and expenses per	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)	
	1	<i>instructions) )</i> Contributions, gifts, grants, e	etc. received (attach					(d) (casil basis offiy)	
	*								
	2	Check ► ✓ If the foundation							
	-	Sch B	·						
	3	Interest on savings and temp							
	4	Dividends and interest from s	securities	97,657		97,657			
	5a	Gross rents							
	b	Net rental income or (loss) _							
Φ.	6a	Net gain or (loss) from sale o	fassets not on line 10	22,589					
Reveilue	ь	Gross sales price for all asse	ets on line 6a						
œ	7	Capital gain net income (from	n Part IV, line 2)			35,184			
	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold .							
	С	Gross profit or (loss) (attach	schedule)						
	11	Other income (attach schedu	ıle)						
	12	Total.Add lines 1 through 11		120,246		132,841			
	13	Compensation of officers, dir	ectors, trustees, etc	0		0		0	
	14	O ther employee salaries and	wages						
φ	15	Pension plans, employee ben	F						
SUS.	16a	Legal fees (attach schedule).							
Expenses	b	Accounting fees (attach sch	edule)	5,000		3,500		1,500	
	c	Other professional fees (atta	ch schedule)						
and Administrative	17	Interest	<b>-</b>						
Str	18	Taxes (attach schedule) (see	e instructions)	1,110		0		0	
	19	Depreciation (attach schedul	e) and depletion						
Ē	20	Occupancy							
4	21	Travel, conferences, and mee	· · · · · · · · · · · · · · · · · · ·						
	22	Printing and publications	F	145		0		145	
Ē	23	Other expenses (attach sche	· -	250		0		250	
Operating	24	Total operating and administ	-			_			
8		Add lines 13 through 23.	<b> </b>	6,505		3,500		1,895	
_	25	Contributions, gifts, grants p	<u> </u>	168,560				168,560	
	26	<b>Total expenses and disburser</b> 25	nents.Add lines 24 and	175,065		3,500		170,455	
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expense		-54,819					
	b	Net investment income (If ne				129,341			
	С	Adjusted net income(If negat						200 P	

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	1		
	2	Savings and temporary cash investments	65,919	38,771	38,771
	3	Accounts receivable 🟲			
		Less allowance for doubtful accounts 🕨			
	4	Pledges receivable 🟲			
		Less allowance for doubtful accounts 🕨			
	5	Grants receivable			_
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts 🟲			
	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
<b>A</b> 5:	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	2,240,417	2,212,747	2,956,881
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	2,306,337	2,251,518	2,995,652
寸	17	Accounts payable and accrued expenses			
	18	Grants payable			
bilities	19	Deferred revenue			
Ĕ۱	20	Loans from officers, directors, trustees, and other disqualified persons			
9	21	Mortgages and other notes payable (attach schedule)			
_	22	O ther liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
. 6		Foundations that follow SFAS 117, check here 🕨 🦵			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
lan	24	Unrestricted			
Ba	25	Temporarily restricted			
딛	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here 🕨 🔽			
9		and complete lines 27 through 31.			
Ş	27	Capital stock, trust principal, or current funds	2,515,652	2,515,652	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	-209,315	-264,134	
Net	30	Total net assets or fund balances(see instructions)	2,306,337	2,251,518	
	31	Total liabilities and net assets/fund balances(see instructions)	2,306,337	2,251,518	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			_
1		Total net assets or fund balances at beginning of year—Part II, column (	a), line 30 (must ag	ree	
		with end-of-year figure reported on prior year's return)		1	2,306,337
2		Enter amount from Part I, line 27a		2	-54,819
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		4	2,251,518
5		Decreases not included in line 2 (itemize) ►		_ 5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II column (b) lu	ie 30 . <b>6</b>	2.251.518

the Part VI instructions

Part IV Capital Gains and Losses for Tax on Investment Income

List and describe (a) 2-story brick ware	How acquire P—Purchase (b) D—Donation	e (c) (	Date acquired mo , day, yr )	Date sold (d) (mo , day, yr )						
1a PUBLICALLY TRADE	D SECURIT	 IES			P P	1				
b										
C										
d										
e										
		Depreciation allowe	м	Cost	or other basis	1	Gair	or(loss)		
(e) Gross sales price		· · · · · · · · · · · · · · · · · · ·			expense of sale		(h) (e) plus (f) minus (g)			
a	50,259				15,07	7 5		35,184		
b										
c										
d										
e								_		
Complete only for assets s	showing gain	ın column (h) and own	ed by the for	undation	on 12/31/69		Gains (Col	(h) gain minus		
(i) F M V as of 12/31/69		Adjusted basis			col (k), but not less than -0-) <b>or</b>					
(1) 1 1		(j) as of 12/31/69		(k) over col (j), if any		(1)	(I) Losses (from col (h))			
a								35,184		
b										
С										
d						_				
е										
-	•	s) as defined in section column (c) (see instru	, ,			}				
Part V Qualification U	Inder Sect	ion 4940(e) for F	Reduced 1	Tax on	Net Investm	ent Ir	ncome			
(For optional use by domestic p if section 4940(d)(2) applies, l			ection 4940	)(a) tax (	on net investmen	t incom	ne)			
Was the foundation liable for the If "Yes," the foundation does no						eriod?		│ Yes   No		
<b>1</b> Enter the appropriate amo	unt in each c	olumn for each year, s	ee instruction	ons befo	re making any en	tries				
(a) Base period years Calendar year (or tax year beginning in)	Adjusted q	<b>(b)</b> ualıfyıng dıstrıbutıons	Net value o	(c) of nonchar	table-use assets		(d) Distributio (col (b) divided	n ratio		
2014		145,420			3,447,576		· · · · · ·	0 042180		
2013		231,395			3,059,891			0 075622		
2012		66,456			2,822,676			0 023544		
2011		79,243			2,654,095			0 029857		
2010 Zotalafiina 1. salumr	· (d)	0			2,479,550	<u>.                                     </u>		0 000000		
<b>3</b> Average distribution	ratio for the 5		vide the tota	al on line	2 by 5, or by	3		0 171203		
		n has been in existenc le-use assets for 201				4		3,258,167		
				-	-	5		111,563		
		ie (1% of Part I, line 2				6		1,293		
			•		-	7		112,856		
		Part XII, line 4				8		170,455		
Lincer quality mig uistil	ibaciona nom	TAICALL, HINE T				0		1/0,435		

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

ĽŒΙ	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49		, UI 4340—St	e pag	C 10 01	the ins	LIUCLIO	'IIS)	
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			ļ					
	(attach copy of letter if necessary-see instructions)			(					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			J	1				1,293
	here 🟲 🔽 and enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter $2\%$ of line $27b$ Exempt foreign organiza Part I, line $12$ , col (b)	itions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)								0
3									1,293
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Oth	ers	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - 0		•	5				1,293
6	Credits/Payments		•						
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		1,480					
b	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6с							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				1,480
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here $\  \  \  \  \  \  \  \  \  \  \  \  \ $	220 is	attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .				9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount	t over	paid		10				187
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	187	Refunded	<u> </u>	11				0
Pai	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislatio	n or d	ıd			Yes	No
	it participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p			see In	structi	ions			
	for definition)?					•	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any i	nateria	ıls				
	published or distributed by the foundation in connection with the activities.								
	Did the foundation file Form 1120-POL for this year?	• •				•	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos								
_	(1) On the foundation  \$\bigs\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			0					
e	Enter the reimbursement (if any) paid by the foundation during the year for poli	ilicai e	xpenditure t	ax IIIIµ	Josed				
2	on foundation managers  \$\bigs\tau \square \frac{0}{2}\$  Has the foundation engaged in any activities that have not previously been rep	orted:	to the IDC2				2		No
2	If "Yes," attach a detailed description of the activities.	Jorteu	to the IKS.						NO
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts aova	rning instru	mont	articlo	c			
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confe	_	_	-		3	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d						4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction dui								No
_	If "Yes," attach the statement required by General Instruction T.	9	-,						
6	Are the requirements of section 508(e) (relating to sections 4941 through 49-	45)sa	tisfied eithe	r					
	By language in the governing instrument, or	,							
	• By state legislation that effectively amends the governing instrument so the	at no n	nandatory d	irectio	ns				
	that conflict with the state law remain in the governing instrument?						6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year?	? If "Yes	s," complete	Part II	, col. (c	:),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)						
	▶NY								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99								
	General (or designate) of each state as required by General Instruction G? If $^\prime$	"No," at	tach explana	tion .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r		_						
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	ructions for	Part X	(IV)?				
	If "Yes," complete Part XIV						9	$\longmapsto$	No
10	Did any persons become substantial contributors during the tax year? If "Yes,"			_					
	and addresses.						10	1 /	No

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶ <u>N/A</u>			
14	The books are in care of ►HOMLER HOMLER LLP Telephone no ►(516)	747	-1191	
	Located at \$\int_{25}\$ SOUTH SERVICE ROAD JERICHO NY ZIP+4 \$\int_{11753}\$			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		<b>▶</b> □	-
	and enter the amount of tax-exempt interest received or accrued during the year		- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
10	a bank, securities, or other financial account in a foreign country?	16	103	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t 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.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a dısqualıfıed person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) <b>Yes V No</b>			
b	If any answer is "Yes" to $1a(1)-(6)$ , did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
Ī	► 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$ ) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2015.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

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

	(see instructions). If none, enter "NO!	VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	<b>、</b>	
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year Include re rganizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1	duced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2  All other program-related investments See instructions	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2	•	Amount

#### Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	3,231,455
b	Average of monthly cash balances	1b	76,329
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	3,307,784
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	3,307,784
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	49,617
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,258,167
6	Minimum investment return. Enter 5% of line 5	6	162,908
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and ce check here ► □ and do not complete this part.)	rtaın fo	reign organizations
1	Mınımum ınvestment return from Part X, line 6	1	162,908
2a	Tax on investment income for 2015 from Part VI, line 5 2a 1,293		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	1,293
3	Distributable amount before adjustments Subtract line 2c from line 1	3	161,615
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	161,615
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	161,615
Par	t XII Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	170,455
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
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	170,455
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	1,293
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	169,162
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the fo	undation qualifies for

-	art XIIII Undistributed Income (see instr	ructions)			
		(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	<b>(d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7				161,615
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			72,300	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
C	From 2012				
d	From 2013				
	From 2014				
	<b>Total</b> of lines 3a through e	(			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 170,455				
а	Applied to 2014, but not more than line 2a			72,300	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	(			
d	Applied to 2015 distributable amount				98,155
е	Remaining amount distributed out of corpus	(	<u> </u>		
5	Excess distributions carryover applied to 2015	(			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	(			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
С	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		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
_	Instructions			ŭ	
Т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				63,460
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170 (b)(1)(F) or 4942(g)(3) (Election may				
_	be required - see instructions)				
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	(			
9	Excess distributions carryover to 2016.				
ر	Subtract lines 7 and 8 from line 6a	(			
10	Analysis of line 9				
а	Excess from 2011				
b	Excess from 2012				
C	Excess from 2013				
d	Excess from 2014				
е	Excess from 2015				

- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

3 Grants and Contributions Paid	During the Year or App	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total				168,560
<b>b</b> Approved for future payment				

Form 990-PF (2015)  Part XVI-A Analysis of Income-Production	ing Activities	<b>S</b>			Page <b>1</b> 2
Enter gross amounts unless otherwise indicated		siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
1 Program service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a b					
c d					
e f					
g Fees and contracts from government agencies  Membership dues and assessments  Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	97,657	
<ul><li>Net rental income or (loss) from real estate</li><li>a Debt-financed property</li></ul>					
<ul><li>b Not debt-financed property</li><li>6 Net rental income or (loss) from personal property</li></ul>					
<ul><li>7 Other investment income</li><li>8 Gain or (loss) from sales of assets other than inventory</li></ul>			18	22,589	
9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a b</b>					
c					
d e					
12 Subtotal Add columns (b), (d), and (e) 13 Total.Add line 12, columns (b), (d), and (e)				120,246	
(See worksheet in line 13 instructions to verify  Part XVI-B Relationship of Activities to	calculations )				<u>,                                      </u>
Explain below how each activity for wh the accomplishment of the foundation instructions )	ıch ıncome ıs rep	orted in column (	(e) of Part XVI-A co	ontributed importa	

Part XVI	Information Re Noncharitable				actions and I	Relationships	With		
	organization directly or i	ndırectly en	gage in any of	the following witl				Yes	No
organızat	tions?								
<b>a</b> Transfers	s from the reporting four	ndation to a	noncharitable	exempt organıza	tion of				
<b>(1)</b> Cas	h							1a(1)	No
(2) Oth	erassets							1a(2)	No
<b>b</b> Other tra	ansactions								
<b>(1)</b> Sale	es of assets to a noncha	rıtable exem	npt organizatio	n				1b(1)	No
<b>(2)</b> Purc	chases of assets from a	noncharitab	ole exempt orga	anızatıon			.	1b(2)	No
<b>(3)</b> Rent	tal of facilities, equipme	nt, or other	assets					1b(3)	No
<b>(4)</b> Rein	nbursement arrangemer	nts						1b(4)	No
<b>(5)</b> Loar	ns or loan guarantees.							1b(5)	No
(6)Perfo	rmance of services or m	embership (	or fundraising s	olicitations				1b(6)	No
<b>c</b> Sharing o	of facilities, equipment,	maılıng lısts	, other assets,	, or paid employe	ees		[	1c	No
of the go in any tra	swer to any of the above ods, other assets, or se ansaction or sharing arr	rvices giver angement, s	n by the reporti show in column	ng foundation If ( <b>d)</b> the value of	the foundation r the goods, other	eceived less thai assets, or servio	n fair marke ces receive	t value d	
(a) Line No	(b) Amount involved	(c) Name of	noncharitable exe	empt organization	(d) Description	of transfers, transact	tions, and sha	ang arrangeme	ents
describe	undation directly or indid in section 501(c) of the complete the following (a) Name of organization	ne Code (oth schedule	ner than sectio		n section 527?.		ption of relatio		▼ No
the	der penalties of perjury, best of my knowledge a ormation of which prepar	ind belief, it	ıs true, correc				an taxpayer	) is based oi	n all
Here	*****			2016-05-12	*****		return	e IRS discuss t	
	Signature of officer or t	rustee		Date	Tıtle		below	e preparer sho str )? 🔽 Yes	
	Print/Type preparer's HOMLER HOMLER CPA'S		Preparer's Sign	ature	Date 2016-05-04	Check if self- employed <b>▶</b> ✓	PTIN PO	0759410	<del></del> -
Paid Preparer Use	Firm's name HOMLER & HOMLER	LLP CPA'S			ı	Firm's EIN ► 0	3-0460159	9	
Only	25 SOUTH SERVICE	ROAD JERI	ICHO,NY 117	753		Phone no (516	5)747-119	1	

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

compensation				
(a) Name and address	Title, and average hours per week  (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
HUGH O'KANE	DIRECTOR &	0	0	0
190 PIPING ROCK ROAD LOCUST VALLEY, NY 11560	PRESIDENT 0 00			
PATRICIA O'KANE	DIRECTOR,VICE	0	0	0
190 PIPING ROCK ROAD LOCUST VALLEY, NY 11560	PRESIDENT & 0 00			
HUGH R O'KANE	DIRECTOR &	0	0	0
300 HIGHWOOD CIRCLE OYSTER BAY COVE, NY 11771	TREASURER 0 00			
KATHLEEN O'KANE TOBIN	DIRECTOR	0	0	0
67 COVE ROAD OYSTER BAY COVE, NY 11771	0 00			
ALICE O'KANE MILLER	DIRECTOR	0	0	0
1956 BARTON HILL ROAD RESTON,VA 20191	0 00			
JOHN O'KANE	DIRECTOR	0	0	0
133 WOODS ROAD LOCUST VALLEY, NY 11560	0 00			

Form 990PF Part XV Line 1a - 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).

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PATRICIA O'KANE

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

			Burness of grant or	
Recipient  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	A mount
a Paid during the year				
ADELPHI UNIVERSITY PO BOX 701 GARDEN CITY,NY 11530	N/A	PUBLIC	EDUCATION	500
AMERICAN RED CROSS 195 WILLIS AVENUE MINEOLA,NY 11501	N/A	PUBLIC	FUND DISASTER RESPONSE	200
AUTISM RESEARCH INSTITUTE 4182 ADAMS AVENUE SAN DIEGO,CA 92116	N/A	PUBLIC	CONDUCTING AND SPONSORING RESEARCH AIMED AT IMPROVING THE QUALITY OF LIFE FOR TODAY'S GENERATION OF CHILDREN AND ADULTS WITH AUTISM SPECTRUM DISODERS	1,000
BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL, MA 02467	N/A	PUBLIC	EDUCATION	50,000
BOYS AND GIRLS OF CLIFTON 822 CLIFTON AVENUE CLIFTON,NJ 07013	N/A	PUBLIC	DEVELOPMENT OF YOUTH	1,000
BROOKS SCHOOL 1160 GREAT POND ROAD NORTH ANDOVER, MA 01845	N/A	PUBLIC	TO PROVIDE THE MOST MEANINGFUL EDUCATIONAL EXPERIENCE OUR STUDENTS WILL HAVE IN THEIR LIVES	500
CATHOLIC CHARITIES 2050 BALLENGER AVENUE SUITE 400 ALEXANDRIA,VA 22314	N/A	PUBLIC	PROVIDE LEADERSHIP AND SUPPORT FOR THE WORK OF LOCAL AGENCIES IN THEIR EFFORTS TO REDUCE POVERTY, SUPPORT FAMILIES AND EMPOWER COMMUNITIES	100
CHILDREN'S NATIONAL MEDICAL CENTER 111 MICHIGAN AVENUE NW WASHINGTON, DC 20010	N/A	PUBLIC	EXCLUSIVE PROVIDER OF PEDIATRIC CARE IN WASHINGTON, D C MEDICAL RESEARCHSUPPORT THE PEOPLE AND RESOURCES TO PROVIDE THE BEST PEDIATRIC CARE POSSIBLE TO PATIENTS, DISCOVER CURES AND ADVOCATE FOR CHILDREN'S HEALTH	3,000
CHOATE ROSEMARY HALL 333 CHRISTIAN STREET WALLINGFORD,CT 064923800	N/A	PUBLIC	TO PROVIDE NEW RESOURCES FOR LEARNING AND DISCOVERY, EXPAND THE FINANCIAL AID PROGRAM TO STUDENTS WHO NEED IT AND IMPROVE ITS FACILITIES	1,000
CHURCH OF SAINT DOMINIC 93 ANSTICE STREET OYSTER BAY,NY 11771	N/A	PUBLIC	TO SUPPORT THE PARISH AND SCHOOLS	2,500
COLD SPRING HARBOR LABS 1 BUNGTOWN ROAD LAUREL HOLLOW, NY 11791	N/A	PUBLIC	MEDICAL RESEARCHRESEARCH	1,000
DOCTORS WITHOUT BORDERS 333 7TH AVENUE FRNT 2 NEW YORK,NY 10001	N/A	PUBLIC	PROVIDED MEDICAL CARE TO PEOPLE IN NEARLY 70 COUNTRIES WORLDWIDE, SAVING LIVES THREATENED BY VIOLENCE, NEGLECT, OR CATASTROPHE	1,000
GLEN COVE BOYS AND GIRLS CLUB 113 GLEN COVE AVENUE GLEN COVE, NY 11542	N/A	PUBLIC	DEVELOPMENT OF YOUTHFUNDING TO PROVIDE A CARING ENVIRONMENT THAT WILL INSPIRE & ENABLE ALL YOUNG PEOPLE TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE & RESPOSIBLE CITIZENS TO PROVIDE A CARING ENVIRONMENT TO INSPIRE AND ENABLE ALL YOUNG PEOPLE TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE AND RESPONSIBLE CITIZENS	39,860
GREEN WOOD HISTORICAL FUND 500 25TH STREET BROOKLYN,NY 11232	N/A	PUBLIC	TO MAINTAIN GREEN- WOODS MUNUMENTS AND BUILDINGS OF HISTORICAL, CULTURAL AND ARCHITECTURAL SIGNIFICANCE, ADVANCE PUBLIC KNOWLEDGE AND APPRECIATION OF THIS SIGNIFICANCE, AND PRESERVE THE NATURAL HABITAT AND PARKLANDS OF ONE OF NEW YORK CITY'S FIRST GREEN SPACES	5,000
HOBE SOUND COMMUNITY CHEST PO BOX 511 HOBE SOUND,FL 334750511	N/A	PUBLIC	RAISE FUNDS FOR AND TO PROVIDE FINANCIAL, ADVISORY, AND VOLUNTEER SUPPORT TO THOSE QUALIFYING NONPROFIT SOCIAL SERVICE AGENCIES THAT CONTRIBUTE TO THE SUSTAINED IMPROVEMENT IN THE LIVES OF NEEDY PEOPLE IN THE HOBE SOUND COMMUNITY	5,000
Total			▶ 3a	168,560

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Paginish If recipient is an individual Foundation Purpose of grant or Amount

Recipient  Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	or substantial contributor			
a Paid during the year  HOPE FOR THE WARRIORS 55 WATER STREET NEW YORK, NY 10041	N/A	PUBLIC	ENHANCING THE QUALITY OF LIFE FOR THE MANY US MILITARY MEMBERS AND THEIR FAMILIES NATIONWIDE, WHO HAVE BEEN ADVERSELY AFFECTED BY INJURIES OR DEATH IN THE LINE OF DUTY	1,000
JUPITER ISLAND LIBRARY 705 MILITARY TRAIL JUPITER,FL 33458	N/A	PUBLIC	PUBLIC LIBRARYPUBLIC LIBRARY	250
JUPITER ISLAND MEDICAL CLINIC 100 ESTRADA SQUARE HOBE SOUND,FL 33455	N/A	PUBLIC	MEDICAL CLINIC	200
JUPTIER ISLAND HISTORICAL SOCIETY 2 BRIDGE ROAD HOBE SOUND,FL 33455	N/A	PUBLIC	EDUCATIONAL ORGANIZATION	200
MAKE-A-WISH FOUNDATION 4742 NORTH 24TH STREET SUITE 400 PHOENIX,AZ 85016	N/A	PUBLIC	HELP SUPPORT CANCER PATIENTSPROVIDE GIFTS FOR CHILDREN WITH LIFE- THREATENING MEDICAL CONDITIONS	1,000
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK,NY 10065	N/A	PUBLIC	HELP FUND CANCER RESEARCH	2,500
MOUNT SINAI HOSPITAL ONE GUSTAVE L LEVY PLACE PO BOX 1049 NEW YORK,NY 100296574	N/A	PUBLIC	HELP PROVIDE FREE AND CONFIDENTIAL COUNSELING, ADVOCACY AND SUPPORT TO PAST AND NEW SURVIVORS OF RAPE, SEXUAL ASSAULT, INCEST AND DOMESTIC VIOLENCE	7,500
NORTH SHORE LAND ALLIANCE 151 POST ROAD OLD WESTBURY,NY 11568	N/A	PUBLIC	LAND CONSERVATION	2,000
OLD BROOKVILLE PBA PO BOX 344 GLEN HEAD,NY 11545	N/A	PUBLIC	COMMITTED TO PROTECTING LIFE & PROPERTY WITH A PROACTIVE APPROACH TO LAW ENFORCEMENT	200
SPCA OF NORTHERN VIRGINIA PO BOX 100220 ARLINGTON,VA 222103220	N/A	PUBLIC	HELP RESCUE AND CARE FOR ANIMALS AND PREVENT THE NEGLECT AND ABUSE OF ANIMALS IN THE REGION	1,000
ST ANTHONYS HIGH SCHOOL 275 WOLF HILL ROAD SOUTH HUNTINGTON,NY 11747	N/A	PUBLIC	TO EDUCATE YOUNG MEN AND WOMEN ON THEIR JOURNEY TOWARDS TRUTH	1,500
ST DOMINIC HIGH SCHOOL 110 ANSTICE STREET OYSTER BAY,NY 11771	N/A	PUBLIC	EDUCATION	2,500
ST GEORGE'S SCHOOL PO BOX 1910 NEWPORT,RI 028400190	N/A	PUBLIC	SUPPORT TO HELP PROVIDE A LEARNING ENVIRONMENT WHICH ENCOURAGES EACH STUDENT TO ACHIEVE HIS OR HER PERSONAL BEST	3,500
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS,TN 381051942	N/A	PUBLIC	SEARCH FOR BETTER TREATMENTS AND CURES FOR CHILDHOOD DISEASES	1,000
THE BARTON CENTER 30 ENNIS ROAD PO BOX 356 NORTH OXFORD, MA 01537	N/A	PUBLIC	DIABETES EDUCATION	100
Total			▶ 3a	168,560

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
THE GREEN VALE SCHOOL 250 VALENTINES LANE OLD BROOKVILLE,NY 115452523	N/A	PUBLIC	HELP FUND FACULTY SALARIES, CURRICULUM DEVELOPMENT, STUDENT ACTIVITIES, FINANCIAL AID, AND FACILITIES MAINTENANCE	7,500
THE LANGLEY SCHOOL 1411 BALL HILL ROAD MCLEAN,VA 22101	N/A	PUBLIC	EDUCATION	4,000
UNIVERSITY OF NOTRE DAME UNIVERSITY OF NOTRE DAME NOTRE DAME,IN 46556	N/A	PUBLIC	EDUCATION EDUCATION	3,500
WINTHROP UNIVERSITY HOSPITAL 259 FIRST STREET MINEOLA,NY 11501	N/A	PUBLIC	MEDICAL RESEARCH	10,000
PLANTING FIELDS FOUNDATION 1395 PLAINTING FIELDS ROAD OYSTER BAY,NY 11771	N/A	PUBLIC	PRESERVING AND INTERPRETING PLANTAREASING FIELDS AR BORETUM STATE HISTORIC PARK AS THE PREMIER PUBLIC GARDEN AND GOLD COAST ESTATE FOR TODAY AND TOMORROW BY EDUCATING, AND ENRICHING, AND ENTERTAINING THE VISITING PUBLIC	500
ST FRANCIS HOSPITAL FOUNDATION 100 PORT WASHINGTON BLVD ROSLYN,NY 11576	N/A	PUBLIC	SPECIALTY DISIGNATED CARDIAC CENTER AND OFFERS ONE OF THE LEADING CARDIAC CARE PROGRAMS IN THE NATION	500
NORTH SHORE WILDLIFE SANCTUARY 63 MIDWAY AVENUE LOCUST VALLEY,NY 11560	N/A	PUBLIC	TO PRESERVE OR TO AID IN THE PRESERVATION OF ALL TYPES OF WILD NATURE	250
DIOCESAN SERVICE APPEAL 9995 N MILITARY TRAIL PO BOX 109650 PLAM BEACH GARDENS,FL 334109650	N/A	PUBLIC	SUPPORT LOCAL CHURCH	500
JUPITER ISLAND GARDEN CLUB PO BOX 1410 HOBE SOUND, FL 33475	N/A	PUBLIC	TO UNITE ITS MEMBERS IN AN ACTIVE INTEREST IN THE CULTIVATION OF TROPICAL TREES AND PLANTS WITH THE PURPOSE OF BEAUTIFYING THE ISLAND AND THE HOBE SOUND MAINLAND	200
1000 FRIENDS OF FLORIDA 308 NORTH MONROE STREET TALLAHASSEE,FL 32301	N/A	PUBLIC	HELP BUILD BETTER COMMUNITIES AND SAVE SPECIAL PLACES	500
JUPITER MEDICAL CENTER FOUNDATION 1210 SOUTH DIXIE HIGHWAY JUPITER,FL 33458	N/A	PUBLIC	TO SUSTAIN AND ENHANCE THE MISSION OF JUPITER MEDICAL CENTER TO DELIVER EXCELLENT AND COMPASSIONATE HEALTHCARE AND ADVANCE THE WELL-BEING OF THE PEOPLE THEY SERVE	2,500
SAMADI ROBOTICS FOUNDATION 485 MADISON AVENUE NEWYORK,NY 10022	N/A	PUBLIC	DEDICATED TO PREVENTING, TREATING, AND ULTIMATELY FINDING A CURE FOR PROSTATE CANCER	2,500
Total	<del></del>		▶ 3a	168,560

### **TY 2015 Accounting Fees Schedule**

Name: HUGH AND PATRICIA OKANE FOUNDATION

C/O HUGH OKANE

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	5,000	3,500		1,500

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491133020856
		-

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

Name: HUGH AND PATRICIA OKANE FOUNDATION

C/O HUGH OKANE

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SECURITIES	2,212,747	2,956,881

### **TY 2015 Other Expenses Schedule**

Name: HUGH AND PATRICIA OKANE FOUNDATION

C/O HUGH OKANE

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEE	250	0		250

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491133020856

#### **TY 2015 Taxes Schedule**

Name: HUGH AND PATRICIA OKANE FOUNDATION

C/O HUGH OKANE

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAX	1,110	0		0