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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.

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

	_	lendar year 2015 or tax year beginni					, and endir				, 20
!	vame	of foundation JOHN E. AND SHER	YL M	. DOI	WNING FAMI	LY		- 1	A Employer identifi		er
_		RITABLE FOUNDATION			<u> </u>				27-437619	_	
ı	Numbe	er and street (or P O box number if mail is not de	livered to	o street :	address)		Room/suite	'	B Telephone numbe	er (see instrui	ctions)
_		MATLOCK RD					L		(270) 78	1-6500	
(City or	town, state or province, country, and ZIP or fore	gn posta	al code					C If avametics ===! ::	hon ie	
								['	C If exemption applica pending, check here		▶□
_		LING GREEN, KY 42104			T			_			
G	Che	ck all that apply Initial return			Initial return	·	ublic charif	Υ	D 1 Foreign organizat		
		Final return		<u> </u>	Amended re			İ	2 Foreign organizat 85% test, check h		ne
_		Address chan			Name chang				computation .		▶⊔
H		ck type of organization X Section						- 1	E If private foundation	status was ter	minated
1		ection 4947(a)(1) nonexempt charitable tru			ther taxable pr				under section 507(b)	(1)(A), check h	ere . 🕨 🔲
ı		1 (=	_	_	nethod X C	ash Acc	rual	1	F If the foundation is		
		of year (from Part II, col (c), line	_	ner (sp			 	-	under section 507(b)	(1)(B) check h	ere ,
				lumn (c	l) must be on cas	sh basis)		_		(d) Dish	ursements
نا	ari	Analysis of Revenue and Expenses total of amounts in columns (b), (c), and (c)			Revenue and	(b) Net inve	estment	(c)) Adjusted net	for ch	narıtable
		may not necessarily equal the amounts in		ex	penses per books	incom			ıncome		poses pasis only)
_		column (a) (see instructions))	 		-					(Casii I	maia Ulliy)
	1	Contributions, gifts, grants, etc., received (attach schedu									
	2	attach Sch B	· • -							· · · · · · ·	
evenue	3	Interest on savings and temporary cash investme			7,757.		7,757.				
	4	Dividends and interest from securities Gross repts			,,,,,,,,		, , , ,				
	5a	Gross rents	••				-				
		Net rental income or (loss)	10		22,036.						
	b	Gross sales price for all 213.7			• • • • • •						
š	7	Capital gain net income (from Part IV, line		•		2	2,036.		····		
2	8	Net short-term capital gain	·								
	9	Income modifications				•					
		Gross sales less returns and allowances									
	h	Less Cost of goods sold .									
		Gross profit or (loss) (attach schedule)									
	11	Other income (attach schedule)									
_	12	Total Add lines 1 through 11			29,793.	2	9,793.				
	13	Compensation of officers, directors, trustees, etc	[0.						
ses	14	Other employee salaries and wages									
enses	15	Pension plans, employee benefits	∟								
	16 a	Legal fees (attach schedule)	↓								
U O	b	Accounting fees (attach schedule) ${\tt ATCH}$.	1.		1,090.						1,090
≦	С	Other professional fees (attach schedule) .				·-·	- 1	ĪΚ	ECEIVI		
Ta	16a b c 17 18 19 20 21 22 23 24	Interest			407		17,				
₽	18	Taxes (attach schedule) (see instructions)[- F		437.		174	1	MAY 2 6 201	6	
Ē	19	Depreciation (attach schedule) and deplet	F				160	<u> </u>	-0	(C)	
Ad	20	Occupancy					- 7		DGDEN, L		
چ	21	Travel, conferences, and meetings								· · · · · · · · · · · · · · · · · · ·	
ē	22	Printing and publications									
2	23	Other expenses (attach schedule)	Г								
펼	24	Total operating and administrative exper			1,527.		174.				1,090
8		Add lines 13 through 23			19,190.		1/3.				19,190
0		Contributions, gifts, grants paid			20,717.		174.		0.		20,280
_	26	Total expenses and disbursements Add lines 24 ar	10 25		20,111.	<u> </u>	1/3.				20,200
	27	Subtract line 26 from line 12			9,076.						
	l	Excess of revenue over expenses and disbursements Net investment income (if negative, enter			2,010.	2	9,619.				
	l	Adjusted net income (if negative, enter -0	· -		 		-,				
F	ــــــــــــــــــــــــــــــــــــــ	perwork Reduction Act Notice, see instruc								Form 99	90-PF (2015)

V 15-4.5F

JSA For Paperwork Reduction Act Notice, see instructions. $3026 DF\ G63W$

Fo	rm 990	-PF (2015) JOHN E. AND SHERYL M.	DOWNING FAMILY		27-	-4376195 Page 2
		Attached schedules and amounts in the Balance Sheets description column should be for end-of-year	Beginning of year		End of	year
	art II	amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	35 , 775.	9	93.	993.
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Piedges 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			1	
s	_					
Assets	8	Inventories for sale or use			<u> </u>	
ŝ	9	Prepaid expenses and deferred charges				
_	10a	Investments - U S and state government obligations (attach schedule).	301,929.	341,7	an	373,197.
		Investments - corporate stock (attach schedule) ATCH 3	301,929.	3,9		3,985.
i	11 C	Investments - corporate bonds (attach schedule) ATCH 4		3,9	02.	3,903.
		and equipment basis Less accumulated depreciation			ļ	
		(attach schedule)				
	12	Investments - mortgage loans			+	
	13 14	Investments - other (attach schedule) 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)	337,704.	346,7	65.	<u>378,175</u> .
	17	Accounts payable and accrued expenses				
	18	Grants payable				
es	19 20 21 22	Deferred revenue				
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)		 		
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	0.	<u>.</u>	0.	
		Foundations that follow SFAS 117, check here . ▶ X			-	
es		and complete lines 24 through 26 and lines 30 and 31.				
Ĕ	24 25 26 27 28 29 30 31	Unrestricted	337,704.	346,7	65.	
믕	25	Temporarily restricted				
<u>m</u>	26	Permanently restricted				
Ĕ		Foundations that do not follow SFAS 117,				
ヹ		check here and complete lines 27 through 31.				
þ	27	Capital stock, trust principal, or current funds				
ध्र	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
55	29	Retained earnings, accumulated income, endowment, or other funds				
Ž	30	Total net assets or fund balances (see instructions)	337,704.	346,7	65.	
É	31	Total liabilities and net assets/fund balances (see				
_	-	instructions)	337,704.	346,7	65.	
E	art I	Analysis of Changes in Net Assets or Fund Balar		<u></u>		
		al net assets or fund balances at beginning of year - Part I		ust agree with		
1		-of-year figure reported on prior year's return)		-	1	337,704.
2		er amount from Part I, line 27a			2	9,076
					3	3,070
					4	346,780.
		Innes 1, 2, and 3		-	5	15
5	Dec	al net assets or fund balances at end of year (line 4 minus	line 5) Part II column (h)	line 30	6	346,765.
b	100	arnet assets of fund palances at end of year (line 4 minus	mię 5) – Fait II, Wiunin (D)	, 30	U	340,103

Part IV Capital Ga	ains and Losses for Tax on Inv	estment Income			
(a) Lı: 2-st	st and describe the kind(s) of property sold ory brick warehouse, or common stock, 200	(e g , real estate, shs MLC Co)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV S	CHEDULE		D - DOMANON		
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					
b					
<u>C</u>					
<u>d</u>					
<u>e</u>		1 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -			
Complete only for as	sets showing gain in column (h) and owner			Gains (Col (h) g	
(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	COI	(k), but not less t Losses (from co	
<u>a</u>					
<u>b</u>					
<u>c</u>					
d					
Capital gain net inco		gain, also enter in Part I, line 7			
, ,	, , , , , , , , , , , , , , , , , , ,	(loss), enter -0- in Part I, line 7	2		22,036.
	al gain or (loss) as defined in sections				
-	n Part I, line 8, column (c) (see ins				•
	on Under Section 4940(e) for Re		3		0.
	e for the section 4942 tax on the distrib		ase period	12] Yes ◯X No
	oes not qualify under section 4940(e)				
1 Enter the appropriate (a)	e amount in each column for each yea		g any enti	(d)	
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
2014	3,367.	389,014.		_	0.008655
2013	15,774.	338,275.			0.046631
2012	16,650.	297,929.			0.055886
2011	10,671.	292,857.			0.036438
2010		1			
	(4)		,		0.147610
	nn (d)		2		0.147010
•	ratio for the 5-year base period - divid	-	3		0.029522
number of years the	foundation has been in existence if les	ss than 5 years	-		0.023322
4 Enter the net value of	of noncharitable-use assets for 2015 fr	rom Part X, line 5	4		398,798.
5 Multiply line 4 by line	e 3		5		11,773.
6 Enter 1% of net inve	stment income (1% of Part I, line 27b)		6		296.
7 Add lines 5 and 6 .			7		12,069.
8 Enter qualifying distr	ributions from Part XII, line 4		8		20,280.
if line 8 is equal to Part VI instructions	or greater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See ti

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	uction	<u> S}</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			006
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		· · ·	296.
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of $\mathcal J$ Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			<u> 296.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0			296.
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015, 6a			
Ь	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
ď	Backup withholding erroneously withheld			0
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	·		206
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		- 4	296.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2016 estimated tax			
_	t VII-A Statements Regarding Activities	_		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	Yes	No X
	participate or intervene in any political campaign?	ıa.		^
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1ь		X
	Instructions for the definition)?	10		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			1
	published or distributed by the foundation in connection with the activities	1c		x
	Did the foundation file Form 1120-POL for this year?	<u> </u>		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\bigsec{0.}{2}\$ On foundation managers \$\bigsec{0.}{2}\$			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
-	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
-	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	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 either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
	KY,			
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) 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 section 4942(j)(3) or			
	4942(J)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			.,
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	ا ۔ ا		X
	names and addresses	10	<u> </u>	^

Pa	rt VII-A Statements Regarding Activities (continued)		_	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of 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	Х	
	Website address ▶ N/A			
14	The books are in care of ▶ KIM PAPP Telephone no ▶ 270-781	-141	6	
	Located at ▶ 937 WHITLOCK ROAD ALVATON, KY ZIP+4 ▶ 42122			
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			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country			
Pa	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? Yes X 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? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X 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	.		
	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		X
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	, İ	İ	
	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years ,,,,,,,,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	,		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	0.5	ł	
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	j		
_	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	·		İ	
Ø	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	34		
4.	foundation had excess business holdings in 2015)	3b 4a		X
	Did the foundation invest 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	70	\dashv	
O	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		Х

Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)		
5a	During the year did the foundation pay or incur any ame	ount to				
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	n 4945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public el					i
	directly or indirectly, any voter registration drive?				,	
	(3) Provide a grant to an individual for travel, study, or				,	
	(4) Provide a grant to an organization other than a					
	section 4945(d)(4)(A)? (see instructions)	_			,	
	(5) Provide for any purpose other than religious, of			. —		
	purposes, or for the prevention of cruelty to children				,	
	If any answer is "Yes" to 5a(1)-(5), did any of the				- 1	
b	Regulations section 53 4945 or in a current notice rega					
						
	Organizations relying on a current notice regarding disa				ᆜ	
С	If the answer is "Yes" to question 5a(4), does the		·			
	because it maintained expenditure responsibility for the			. Tes No	'	
	If "Yes," attach the statement required by Regulations se					li
6a	Did the foundation, during the year, receive any fu	•		[] [,.]		
	on a personal benefit contract?					
b	Did the foundation, during the year, pay premiums, dir	ectly or indirectly, on a	personal benefit contra	ict.	6b	X
	If "Yes" to 6b, file Form 8870					
	At any time during the tax year, was the foundation a					
b_	If "Yes," did the foundation receive any proceeds or hat VIII Information About Officers, Director					<u> </u>
Pai	and Contractors	ors, Trustees, Fot	iliuation Managers	s, nigniy raiu Lini	Jioyees,	
1	List all officers, directors, trustees, foundation	managers and thei	r compensation (see			
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expens	se account, lowances
		devoted to position	`enter'-0-) ´	and deferred compensation		
7 EC	п с		0.	0.		0.
ATC:	по		<u> </u>			
		 				
				,		
		· [
2	Compensation of five highest-paid employees	other than thos	e included on line	e 1 - see instructi	ons). If n	one, enter
-	"NONE."				·	<u> </u>
	050 000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit		se account,
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other al	lowances
					-	
	NONE	•				
	NONE					
		•				
		· [
		·				
			L	<u> </u>		
Tota	number of other employees paid over \$50,000.			<u> </u>	Form QQ	0-PF (2015)
					rum JJ	⊌- F i (∠UIS)

Page	. /

	990-PF (Page 7
Pa	rt VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
3	Five	nighest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	NONE		
			:
Tota	l numb	er of others receiving over \$50,000 for professional services	
Pa	rt IX-A	Summary of Direct Charitable Activities	
		ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of is and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A		
•			
2			
3			
4			
_			
	rt IX-B	Summary of Program-Related Investments (see instructions) e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<u>_</u>	NONE	e two targest program-related investments made by the foundation during the tax year on times 1 and 2	
	110112		
2			
	0 -45		
		ogram-related investments. See instructions	
3	NONE		
			
Tota	ıl. Add	lines 1 through 3	
			5 000 DE (00

Part	see instructions)	gn found	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		272 122
а	Average monthly fair market value of securities	1a	378,489.
b	Average of monthly cash balances	1b	26,382.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	404,871.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	404,871.
4	Subtract line 2 from line 1d		
	instructions)	4	6,073.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	398,798.
6	Minimum investment return. Enter 5% of line 5	6	19,940.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	19,940.
	Tax on investment income for 2015 from Part VI, line 5		
h	Income tax for 2015 (This does not include the tax from Part VI)	1	
	Add lines 2a and 2b	2c	296.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	19,644.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	19,644.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	19,644.
Dor	XII Qualifying Distributions (see instructions)	<u> </u>	
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	20,280.
b	Program-related investments - total from Part IX-B	1b	
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	20,280.
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 (see instructions)	5	296.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	19,984.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculations for the section 4940(e) reduction of tax in those years	alculating	whether the foundation

Forn	n 990-PF (2015)				Page 9
Pa	rt XIII Undistributed Income (see instr	uctions)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
	line 7				19,644.
	Undistributed income, if any, as of the end of 2015 Enter amount for 2014 only			19,188.	
	Total for prior years 20 13 ,20 12 ,20 11				
	Excess distributions carryover, if any, to 2015				
а	From 2010				
	From 2011				
С	From 2012				
d	From 2013				
е	From 2014				
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 20,280.				
а	Applied to 2014, but not more than line 2a			19,188.	
b	Applied to undistributed income of prior years (Election required - see instructions),				
С	Treated as distributions out of corpus (Election required - see instructions)				
ď	Applied to 2015 distributable amount,				1,092.
	Remaining amount distributed out of corpus				
	Excess distributions carryover applied to 2015.				
	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
е	amount - see instructions				
f	Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016				18,552.
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. Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9				
	Excess from 2011		1		
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				· · · · · · · · · · · · · · · · · · ·

Рa	rt XIV Private Op	erating Foundations	i (see instructions a	<u>nd Part VII-A, quest</u>	ion 9)	NOT APPLICABL
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private oper	ating	
	foundation, and the rulin	g is effective for 2015, ei	nter the date of the ruling		▶	
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	n section	4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(-,
	I or the minimum investment return from Part X for each				1	
	year listed					
ь	85% of line 2a				<u> </u>	
С	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					
е	Qualifying distributions made				ļ	
	directly for active conduct of exempt activities. Subtract line					
	2d from line 2c				İ	
3	Complete 3a, b, or c for the					
а	"Assets" alternative test - enter					
	(1) Value of all assets	j				
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-	<u> </u>				
	ment return shown in Part X, line 6 for each year listed					
С	"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		<u>-</u> : :			
	public and 5 or more exempt organizations as				}	
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-			-		
	port from an exempt organization					
	(4) Gross investment income					
Pa		•		only if the founda	tion had \$5,0	00 or more in assets at
		uring the year - see				
	Information Regarding	-		- 4b 20/ -f 4b- 4-4	-14	and a second by the formulation
а	before the close of any	the foundation who h tax vear (but only if th	ev have contributed mor	e than 2% of the total nore than \$5.000) (S	ee section 5076	received by the foundation d)(2))
			-,			-,(-, ,
h	N/A	the foundation who	own 10% or more o	f the stock of a corn	oration (or an	equally large portion of the
D	ownership of a partner					equally large portion of the
	тине при при при при при при при при при при	-		3		
	N/A					
2	Information Regarding	g Contribution, Grant.	Gift, Loan, Scholarsh	nip. etc Programs:		-
_	<u> </u>	<u>-</u>		· -	itable erganiza	tions and does not accep
	unsolicited requests for	or funds if the found	ation makes difts, dra	ants etc (see instruc	tions) to individ	luals or organizations under
	other conditions, comp			(000	,	
а	The name, address, a			he person to whom ap	plications should	be addressed
_						
b	The form in which app	lications should be sub	mitted and information	on and materials they	should include	
			···			
С	Any submission deadli	nes				
	A		t t		abla falle l	d
đ	Any restrictions or li	mitations on awards,	such as by geogra	apriicai areas, charita	able fields, Kin	ds of institutions, or other

rm 990-PF (2015)	(continued)			Page
art XV Supplementary Information Grants and Contributions Paid Dur	ing the Year or Anni	oved for F	uture Payment	
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ATCH 7				
	}			
Total			▶ 3a	19,19
Approved for future payment				
Total	1	<u> </u>	▶ 3b	

JSA 5E1491 1 000

nter gross amounts	unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exemp
Program service re	evenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
а						
f						· · · ·
g Fees and contra	cts from government agencies					
Membership dues	and assessments		·			
nterest on savings a	and temporary cash investments -					
Dividends and int	erest from securities			14	7,757.	
Net rental income	or (loss) from real estate					
a Debt-financed	property					
Not debt-finan	ced property					
Net rental income o	r (loss) from personal property					
Other investment	income			1.0	00.036	<u></u>
Sain or (loss) from s	ales of assets other than inventory			18	22,036.	
Net income or (lo:	ss) from special events					
Gross profit or (lo	ss) from sales of inventory					
Other revenue a						
						
				-		·
·		ł				
Subtotal Add colu otal Add line 12 worksheet in lin	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calci	ulations)				29,7
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	ımns (b), (d), and (e)	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in lin rt XVI-B R le No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add column Add Inc. 12 worksheet in linert XVI-B Ren Ren Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add column Add Inc. 12 worksheet in linert XVI-B Ren Ren Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add column Add Inc. 12 worksheet in linert XVI-B Ren Ren Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in line rt XVI-B R e No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 e worksheet in lin rt XVI-B R ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in lin rt XVI-B R le No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 worksheet in lin rt XVI-B R le No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 e worksheet in lin rt XVI-B R ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 e worksheet in lin rt XVI-B R ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 e worksheet in lin rt XVI-B R ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add colu Total Add line 12 e worksheet in lin art XVI-B R ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calcielationship of Activities n below how each activity	ulations) s to the A y for which	ccomplishment of E	Exempt Pur	ooses of Part XVI-A contribu	ted importantly to

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 27-4376195 Page **13**

1		-	•	engage in any of the follow		-	l l	Yes	No
		• •	ode (other than	section 501(c)(3) organizat	ions) or in sec	ction 527, relating to politic	al		
	_	nizations?			_		- 1	1	
а			_	a noncharitable exempt or			ļ		
				. 			1a(1)	4	X
	(2) O	ther assets					1a(2)	4	X
þ		r transactions					ļ		
	(1) S	ales of assets to a no	oncharitable exer	mpt organization			1b(1))	X
				ible exempt organization)	X
	(3) R	ental of facilities, equ	iipment, or other	assets			1b(3))	_X
				. .				<u> </u>	_X_
	(5) Lo	oans or loan guarante	es				1b(5)		X
	(6) P	erformance of service	es or membersh	nip or fundraising solicitations			1b(6)	ļ	X
				ts, other assets, or paid emp					X
d				s," complete the following					
				ces given by the reporting					
	value	in any transaction o	r sharing arrang	gement, show in column (d) the value of	the goods, other assets, o	r service	es rece	ived
(a) L	ine no	(b) Amount involved	(c) Name of n	noncharitable exempt organization	(d) Descri	ption of transfers, transactions, and	shanng am	angeme	nts
		N/A	<u></u>		N/A				
			<u></u>						
		<u> </u>	<u></u>						
		· · · · · · · · · · · · · · · · · · ·							
2a	Is the	foundation directly	or indirectly aff	filiated with, or related to,	one or more	tax-exempt organizations			_
	descr	ibed in section 501(c) of the Code (ot	ther than section 501(c)(3))	or in section 5	527?	. L Y	es 🛚 🗵	No
<u>_b</u> _	If "Ye	s," complete the follo	wing schedule						
		(a) Name of organization	on	(b) Type of organization		(c) Description of rela	ionship		
							····		
				ned this return, including accompanying expayer) is based on all information of wh			ledge and b	belief it	ıs true,
Sigr	1	1/2 0				May the	IRS discus	s this	retum
Her		KAN (Ya	De	5/11/16	TRUSTE	T .	preparer		below
ner	Sig	gnature of officer or trustee	U	Date/	Title	(see instru	ctions)? X	Yes	No
					···-				
Paid	1	Print/Type preparer's na	ame	Preparer's signature			f PTIN		
		JESSICA FREE	MAN	Olssia treera	COA	5/4/16 self-employed	P012	6145	7
_	parer	THING INC.	KD, LLP			Firm's EIN ▶ 44	-01602	60	
Use	Only	Firm's address > 31	102 WEST ENI	D AVENUE, SUITE 105	0				
		N/	ASHVILLE, T	ľN	3720	3-1301 Phone no 615	.988.3	600	
							Form 990	0-PF	2015)

JOHN E. AND SHERYL M. DOWNING FAMILY FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVE						P Date	Date	Date sold		
		<u> </u>				D acquire	d			
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	Gain or (loss)				
		TOTAL CAPIT	AL GAIN DIS	TRIBUTIONS		9,	022.			
		VARIOUS SHO	RT TERM			VAR	VAR			
47,616.		53,526.					910.			
36,956.		VARIOUS LON 32,476.	G TERM			VAR	480. VAR			
120,147.		VARIOUS LON 105,703.	G TERM			VAR 14,	VAR			
OTAL GAIN(L	oss)					22,0	036.			

JOHN E. AND SHERYL M DOWNING FAMILY

27-4376195

ATTACHMENT	1
JUSTED	

FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT <u>INCOME</u>	ADJUSTED NET INCOME	CHARITABLE <u>PURPOSES</u>
BKD TAX PREP FEES		1,090.			1,090.
	TOTALS	1,090.			1,090.

JOHN E. AND SHERYL M. DOWNING FAMILY

27-4376195

ATTACHMENT 2

FORM 990PF, PART I - TAXES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT <u>INCOME</u>	ADJUSTED NET INCOME	CHARITABLE PURPOSES
FOREIGN TAXES 2014 FORM 990PF TAX		174. 263.	174.		
	TOTALS	437.	174.		

JOHN E AND SHERYL M. DOWNING FAMILY

27-4376195

ATTACHMENT 3

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	ENDING <u>BOOK VALUE</u>	ENDING <u>FMV</u>
FIXED INCOME DOMESTIC LARGE CAP DOMESTIC SMALL CAP INTERNATIONAL EQUITIES FLEXSHARES UPSTREAM	65,446. 124,649. 42,233. 92,138. 17,324.	64,037. 166,247. 42,034. 84,481. 16,398.
TOTALS	341,790.	373, 197.

JOHN E. AND SHERYL M. DOWNING FAMILY

27-4376195

ATTACHMENT 4

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

ENDING BOOK VALUE ENDING <u>FMV</u>

SCHWAB US TIPS ETF

3,982.

3,985.

TOTALS

3,982.

3,985.

27-4376195

ATTACHMENT	5		

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

OTHER DECREASE 15.

TOTAL _____15.

JOHN E. AND SHERYL M. DOWNING FAMILY

985 MATLOCK RD

J ERIC DOWNING

985 MATLOCK RD

BOWLING GREEN, KY 42104

BOWLING GREEN, KY 42104

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

27-4376195

ATTACHMENT 6

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	
KIM MILLS PAPP	CO-TRUSTEE	0	0	0	

1 00

CO-TRUSTEE 0 0 0 0 0 0 1.00 GRAND TOTALS 0. 0 0 0

JOHN E AND SHERYL M DOWNING FAMILY

27-4376195

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DO	URING THE YEAR		ATTACHMENT 1
RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WOUNDED WARRIORS	NONE	GENERAL SUPPORT	7,887
4899 BELFORT ROAD	PC		
SUITE 300			
JACKSONVILLE, FL 32256			
KY LIONS EYE FOUNDATION 301 E MUHAMMAD ALI BLVD LOUISVILLE, KY 40202	NONE PC	GENERAL SUPPORT	3,000
SEE INTERNATIONAL	NONE	MISSION TRIPS	В, 303
5638 HOLLISTER AVENUE, SUITE 210	PC		
SANTA BARBARA, CA 93117			
		TOTAL CONTRIBUTIONS	PAID19,190.



Account Number 3626-5018

TAX YEAR 2015 YEAR-END SUMMARY

Date Prepared February 19, 2016

YEAR-END SUMMARY INFORMATION IS NOT PROVIDED TO THE IRS.

The information in this and all subsequent sections is not provided to the IRS by Charles Schwab It is provided to you as additional tax reporting information you may need to complete your tax return

Detail Information of Dividends and Distributions (continued)

_		CUSIP	 	Paid/Adjusted in	
Description	Symbol	Number	 Paid in 2015	 2016 for 2015	 Amount
Foreign Tax Paid	Country				
FLEXSHARES UPSTREAM	Not Provided	33939L407	\$ 0 00	\$ (17 93)	\$ (17 93)
OAKMARK INTL FD CLASS I	RIC	413838202	\$ 0 00	\$ (59 89)	\$ (59 89)
VANGUARD FTSE ALL WORLD	Not Provided	922042775	\$ 0 00	\$ (17 20)	\$ (17 20)
VANGUARD TOTAL	Not Provided	921909768	\$ 0 00	\$ (79 38)	\$ (79 38)
Total Foreign Tax Paid (Box 6)			\$ 0.00	\$ (174 40)	\$ (174.40)

REALIZED GAIN OR (LOSS)

The information in the following sections include all your realized gain or (loss) transactions during the tax year. They may be helpful for, but not limited to, Schedule D. Please consult with your tax advisor or financial advisor regarding specific questions.

Short-Term Realized Gain or (Loss)

This section is for covered securities and corresponds to transactions reported on your 1099B as "cost basis is reported to the IRS" Report on Form 8949, Part I, with Box A checked

Description OR Option Symbol		CUSIP Number	Quantity/Par		Date Sold	Total Proceeds	(-)Cost Basis	(+)Wash Sale Loss Disallowed	(=)Realized Gain or (Loss)
CHEVRON CORPORATION		166764100	100 00	03/27/15 08/2	7/15 \$	7,668 11\$	10,436 85	\$ 0 00	\$ (2,768 74)
Security Subtotal					\$	7,668.11 \$	10,436.85	\$ 0.00	\$ (2,768.74)
HEARTLAND VALUE FUND SHRS	INST	422352831	29 21	12/30/14 03/2	7/15 \$	1,298 81\$	1,297 63	\$ 0 00	\$ 1 18
HEARTLAND VALUE FUND SHRS	INST	422352831	108 09	12/30/14 03/2	7/15 \$	4,805 10\$	4,800 69	\$ 0 00	\$ 4 41
Security Subtotal					\$	6,103.91\$	6,098.32	\$ 0.00	\$ 5.59



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Short-Term Realized Gain or (Loss) (continued)

This section is for covered securities and corresponds to transactions reported on your 1099B as "cost basis is reported to the IRS" Report on Form 8949, Part I, with Box A checked

Description OR Option Symbol	CUSIP Number	Quantity/Par	Date Acquired	Date Sold	Total Proceeds	(-)Cost Basis	(+)Wash Sale Loss Disallowed	(=)Realized Gain or (Loss)
OAKMARK SELECT FUND	413838608	170 74	12/18/14 0	3/27/15 \$	6,823 00 \$	6,915 23	\$ 0 00	\$ (92 23)
Security Subtotal				\$	6,823 00 \$	6,915.23	\$ 0.00	\$ (92.23)
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	1 63	03/26/15 1	2/31/15 \$	151 89\$	155 70	\$ 0 00	\$ (3 81)
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	13 36	03/26/15 1	2/31/15 \$	1,239 61 \$	1,270 38	\$ 0 00	\$ (30 77)
Security Subtotal	*			\$	1,391.50\$	1,426.08	\$ 0.00	\$ (34.58)
VANGUARD TOTAL INTERNTL STO	OCK 921909768	566 00	03/27/15 1	2/31/15 \$	25,629 34 \$	28,649 51	\$ 0 00	\$ (3,020 17)
Security Subtotal				\$	25,629.34 \$	28,649.51	\$ 0.00	\$ (3,020 17)
Total Short-Term (Cost basis is	reported to the IRS)	······································	,	\$	47,615.86\$	53,525.99	\$ 0 00	\$ (5,910.13)
Total Short-Term	- · · · · · · · · · · · · · · · · · · ·			\$	47,615.86\$	53,525.99	\$ 0.00	\$ (5,910.13)



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Long-Term Realized Gain or (Loss)

This section is for covered securities and corresponds to transactions reported on your 1099B as "cost basis is reported to the IRS" Report on Form 8949, Part II, with Box D checked

Description OR Option Symbol	CUSIP Number	Quantity/Par	Date Acquired	Date Sold	Total Proceeds	(-)Cost Basis	(+)Wash Sale Loss Disallowed	(=)Realized Gain or (Loss)
CISCO SYSTEMS INC	17275R102	400 00	02/03/11 03	/27/15 \$	10,805 81 \$	8,732 15	\$ 0 00	\$ 2,073 66
Security Subtotal				\$	10,805.81 \$	8,732 15	\$ 0.00	\$ 2,073.66
HEARTLAND VALUE FUND INST	422352831	4 31	12/27/12 03	/27/15 \$	191 94 \$	176 41	\$ 0 00	\$ 15 53
HEARTLAND VALUE FUND INST	422352831	66 78	12/27/12 03	/27/15 \$	2,968 56 \$	2,728 79	\$ 0 00	\$ 239 77
HEARTLAND VALUE FUND INST	422352831	25 64	12/27/13 03	/27/15 \$	1,139 76 \$	1,248 96	\$ 0 00	\$ (109 20)
HEARTLAND VALUE FUND INST	422352831	87 24	12/27/13 03	/27/15 \$	3,877 93 \$	4,274 48	\$ 0 00	\$ (396 55)
Security Subtotal				\$	8,178.19 \$	8,428.64	\$ 0.00	\$ (250.45)
OAKMARK SELECT FUND	413838608	109 43	12/13/12 03	/27/15 \$	4,372 82 \$	3,322 29	\$ 0 00	\$ 1,050 53
OAKMARK SELECT FUND	413838608	66 10	12/19/13 03	/27/15 \$	2,641 67 \$	2,585 50	\$ 0 00	\$ 56 17
Security Subtotal				\$	7,014.49 \$	5,907 79	\$ 0.00	\$ 1,106.70
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	0 19	03/21/12 03	/27/15 \$	18 60 \$	11 11	\$ 0 00	\$ 7 49
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	0 58	12/17/12 03	/27/15 \$	55 89 \$	35 61	\$ 0 00	\$ 20 28
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	6 62	12/17/12 03	/27/15 \$	634 76 \$	404 29	\$ 0 00	\$ 230 47
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	0 65	03/19/13 03	/27/15 \$	62 51 \$	42 82	\$ 0 00	\$ 19 69
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	11 60	03/19/13 03	/27/15 \$	1,112 86 \$	762 23	\$ 0 00	\$ 350 63



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Long-Term Realized Gain or (Loss) (continued)

This section is for covered securities and corresponds to transactions reported on your 1099B as "cost basis is reported to the IRS" Report on Form 8949, Part II, with Box D checked

Description OR Option Symbol	CUSIP Number	Quantity/Par	Date Date Acquired Solo		(-)Cost Basis	(+)Wash Sale Loss Disallowed	(=)Reafized Gain or (Loss)
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	1 89	12/17/13 03/27/1	5\$ 181 39\$	143 42	\$ 0 00	\$ 37 97
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	26 76	12/17/13 03/27/1	5 \$ 2,565 58 \$	2,028 65	\$ 0 00	\$ 536 93
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	1 56	03/21/14 03/27/1	5\$ 149 75 \$	128 23	\$ 0 00	\$ 21 52
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	21 23	03/21/14 03/27/19	2,035 80 \$	1,793 37	\$ 0 00	\$ 242 43
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	1 54	09/30/14 12/31/1	5\$ 143 26 \$	138 60	\$ 0 00	\$ 4 66
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	2 64	12/22/14 12/31/1	5\$ 245 79 \$	240 98	\$ 0 00	\$ 4 81
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	40 43	12/22/14 12/31/15	3,751 59 \$	3,678 63	\$ 0 00	\$ 72 96
Security Subtotal		<u> </u>		\$ 10,957.78\$	9,407.94	\$ 0.00	\$ 1,549 84
Total Long-Term (Cost basis is	reported to the IRS)		\$ 36,956.27 \$	32,476.52	\$ 0.00	\$ 4,479.75

Long-Term Realized Gain or (Loss)

This section is for noncovered securities and corresponds to transactions reported on your 1099B as "cost basis is available but not reported to the IRS" Report on Form 8949, Part II, with Box E

Description OR Option Symbol	CUSIP Number	Date Quantity/Par Acquired	Date Sold	Total Proceeds	(-)Cost Basis	(+)Wash Sale Loss Disallowed	(=)Realized Gain or (Loss)
HEARTLAND VALUE FUND INST	422352831	219 95 02/03/11 0	3/27/15 \$	9,776 95 \$	10,000 00 \$	0 00 \$	(223 05)



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Long-Term Realized Gain or (Loss) (continued)

This section is for noncovered securities and corresponds to transactions reported on your 1099B as "cost basis is available but not reported to the IRS" Report on Form 8949, Part II, with Box E

Description OR Option Symbol		CUSIP Number	Quantity/Par	Date Acquired	Date Sold	Total Proceeds	(-)Cost Basis	(+)Wash Sale Loss Disallowed	(=)Realized Gain or (Loss)
HEARTLAND VALUE FUND SHRS	INST	422352831	216 37	02/09/11 0	3/27/15 \$	9,618 22 \$	10,000 00	\$ 0 00	\$ (381 78)
HEARTLAND VALUE FUND SHRS	INST	422352831	211 36	02/16/11 0	3/27/15 \$	9,395 52 \$	10,000 00	\$ 0 00	\$ (604 48)
HEARTLAND VALUE FUND SHRS	INST	422352831	106 55	03/02/11 0	3/27/15 \$	4,736 32 \$	5,000 00	\$ 0 00	\$ (263 68)
HEARTLAND VALUE FUND SHRS	INST	422352831	166 70	03/30/11 0	3/27/15 \$	7,409 99 \$	8,000 00	\$ 0 00	\$ (590 01)
HEARTLAND VALUE FUND SHRS	INST	422352831	16 28	12/29/11 0	3/27/15 \$	723 79 \$	631 34	\$ 0 00	\$ 92 45
HEARTLAND VALUE FUND SHRS	INST	422352831	43 32	12/29/11 0	3/27/15 \$	1,925 65 \$	1,679 57	\$ 0 00	\$ 246 08
Security Subtotal	·				\$	43,586.44 \$	45,310.91	\$ 0.00	\$ (1,724.47)
ISHARES MSCI EAFE ETF		464287465	100 00	02/16/11 0	3/27/15 \$	6,496 89\$	6,133 37	\$ 0 00	\$ 363 52
ISHARES MSCI EAFE ETF		464287465	100 00	02/16/11 0	3/27/15 \$	6,496 89 \$	6,133 38	\$ 0 00	\$ 363 51
ISHARES MSCI EAFE ETF		464287465	200 00	03/16/11 0	3/27/15 \$	12,993 79 \$	11,203 75	\$ 0 00	\$ 1,790 04
Security Subtotal		· · · · · · · · · · · · · · · · · · ·			\$	25,987.57 \$	23,470 50	\$ 0 00	\$ 2,517.07
ISHARES MSCI EMERGING MARKETS ETF		464287234	300 00	02/03/11 0	3/27/15 \$	11,809 88 \$	13,934 65	\$ 0 00	\$ (2,124 77)
Security Subtotal					\$	11,809.88 \$	13,934.65	\$ 0.00	\$ (2,124 77)
OAKMARK SELECT FUND		413838608	154 21	02/16/11 0	3/27/15 \$	6,162 51 \$	4,620 35	\$ 0 00	\$ 1,542 16
Security Subtotal					\$	6,162.51 \$	4,620.35	\$ 0.00	\$ 1,542.16
VANGUARD HEALTH CARE ADMIRAL SHARE	FD	921908885	241 55	02/03/11 0	3/27/15 \$	23,157 86 \$	12,922 21	\$ 0 00	\$ 10,235 65



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Long-Term Realized Gain or (Loss) (continued)

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Description OR Option Symbol	CUSIP Number	Quantity/Par	Date Acquired	Date Sold	Total Proceeds	(-)Cost Basis	(+)Wash Sale Loss Disallowed	(=)Realized Gain or (Loss)
VANGUARD HEALTH CARE FD ADMIRAL SHARE	921908885	101 77	02/03/11 1	2/31/15 \$	9,442 86 \$	5,444 33	\$ 0 00	\$ 3,998 53
Security Subtotal				\$	32,600.72 \$	18,366 54	\$ 0 00	\$ 14,234.18
Total Long-Term (Cost basis is available but not reported to the IRS) \$					120,147.12 \$	105,702.95	\$ 0.00	\$ 14,444.17
Total Long-Term				\$	157,103.39 \$	138,179 47	\$ 0.00	\$ 18,923.92



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Realized Gain or (Loss) Summary

Total Realized Gain or (Loss)

Description	Total Proceeds	(-)Cost Basis	(+)Wash Sale Loss Disallowed	(=)Realized Gain or (Loss)
Total Short-Term Realized Gain or (Loss) (Cost basis is reported to the IRS Report on Form 8949, Part I, with Box A checked.)	\$ 47,615 86 \$	53,525 99	\$ 0 00	\$ (5,910 13)
Total Short-Term Realized Gain or (Loss)	\$ 47,615 86 \$	53,525 99	\$ 0.00	\$ (5,910 13)
Total Long-Term Realized Gain or (Loss) (Cost basis is reported to the IRS Report on Form 8949, Part II, with Box D checked)	\$ 36,956 27 \$	32,476 52	\$ 0 00	\$ 4,479 75
Total Long-Term Realized Gain or (Loss) (Cost basis is available but not reported to the IRS_Report on Form 8949, Part II, with Box E checked)	\$ 120,147 12 \$	105,702 95	\$ 0.00	\$ 14,444 17
Total Long-Term Realized Gain or (Loss)	\$ 157,103 39 \$	138,179 47	\$ 0,00	\$ 18,923 92
TOTAL REALIZED GAIN OR (LOSS)	\$ 204,719.25 \$	191,705 46	\$ 0 00	\$ 13,013 79