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Department of the Treasury

Internal Revenue Service

DLN: 93491235000556

OMB No 1545-0052

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>.

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

	e of four RDING F	ndation AMILY CHARITABLE TRUST	A Employer identification number 30-0021471		
				BTelephone number (see instructions)	
	ber and s BOX 609	street (or P O box number if mail is not delivered to street address)	Room/suite		
				(216) 257-4701	
		state or province, country, and ZIP or foreign postal code PA 152309738		C If exemption application is pending,	check here ▶
G Cł	neck all	that apply Initial return Initial return of a fo	rmer public charity	D 1. Foreign organizations, check here	· • -
		Final return A mended return Address change Name change		2. Foreign organizations meeting th	• •
H C b	eck tyr	pe of organization	foundation	test, check here and attach comp E If private foundation status was ten	
		947(a)(1) nonexempt charitable trust \bigcap Other taxable		under section 507(b)(1)(A), check	
		t value of all assets at end JAccounting method	Cash Accrual	F If the foundation is in a 60-month t	
		om Part II, col. (c),	be on cash basis.)	under section 507(b)(1)(B), check	here F I
	τι I	Analysis of Revenue and Expenses			Disbursements
Га		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	Revenue and expenses per (a) books	Net investment (c) income (c)	for charitable purposes d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach			
		schedule)	211,725		
	2	Check ► ┌─ If the foundation is not required to attach			
		Sch B			
	3	Interest on savings and temporary cash investments			
	4	Dividends and interest from securities	398,733	391,733	
	5a	Gross rents			
	b	Net rental income or (loss)			
₽	6a	Net gain or (loss) from sale of assets not on line 10	69,618		
Revenue	b	Gross sales price for all assets on line 6a 1,227,633			
	7	Capital gain net income (from Part IV, line 2)		69,618	
	8	Net short-term capital gain		0	
	9	Income modifications			
	10a	Gross sales less returns and allowances			
	b	Less Cost of goods sold			
	C	Gross profit or (loss) (attach schedule)			
	11	· · · · · · · · · · · · · · · · · · ·	8,664	7,000	
	12	Total.Add lines 1 through 11	688,740	468,351	15.540
	13	Compensation of officers, directors, trustees, etc	91,137	45,568	45,568 0
	14	Other employee salaries and wages		0 0	
Š	15	Pension plans, employee benefits	% 498	0 0	498
Ψ	16a	· · · · · · · · · · · · · · · · · · ·	490	- J	470
Expenses	b	Accounting fees (attach schedule)			0
	C	Other professional fees (attach schedule)			
and Administrative	17	Interest	19,016		0
Ī	18	Taxos (attash sonoaans) (see mothasiasins)	19,010	0	0
Ę	19	Depreciation (attach schedule) and depletion	-	٥	
Ą	20	Occupancy		0 0	
2	21 22	Travel, conferences, and meetings		0 0	
	23		% 56,931	56,931	
Ħ.		Total operating and administrative expenses.	39,551	55,751	
Operating	24	Add lines 13 through 23	167,582	102,499	46,066
ಿ	25	Contributions, gifts, grants paid	869,293		869,293
	26	Total expenses and disbursements. Add lines 24 and	,		
		25	1,036,875	102,499 0	915,359
	27	Subtract line 26 from line 12			
	a	Excess of revenue over expenses and disbursements	-348,135	265.252	
	b	Net investment income (if negative, enter -0-)		365,852	
	С	Adjusted net income(If negative, enter -0 -)		0	

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(-)	(0, 00000000000000000000000000000000000	(-,
	2	Savings and temporary cash investments	1,277,547	896,932	896,932
	3	Accounts receivable -			
		Less allowance for doubtful accounts 🟲		0	0
	4	Pledges receivable 🟲			
		Less allowance for doubtful accounts 🟲			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) 🟲			
		Less allowance for doubtful accounts 🟲0			_
	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	8,686,323	8,688,950	10,523,409
	C	Investments—corporate bonds (attach schedule)	2,957,103	2,931,132	2,803,737
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) ▶			_
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	2,056,107	1,425,738	1,330,066
	14	Land, buildings, and equipment basis 🕨744,000			
		Less accumulated depreciation (attach schedule) ▶		744,000	407,000
	15	O ther assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	14,977,080	14,686,752	15,961,144
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Liat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)		0	
. 0		Foundations that follow SFAS 117, check here 🕨 🦵			
ě		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted			
Ва	25	Temporarily restricted			
or Fund Balances	26	Permanently restricted			
E		Foundations that do not follow SFAS 117, check here 🕨 🔽			
5		and complete lines 27 through 31.			
šţ	27	Capital stock, trust principal, or current funds	14,977,080	14,686,752	
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
4	29	Retained earnings, accumulated income, endowment, or other funds			
₹	30	Total net assets or fund balances(see instructions)	14,977,080	14,686,752	
	31	Total liabilities and net assets/fund balances(see instructions)	14,977,080	14,686,752	
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 agree	• _	_
		with end-of-year figure reported on prior year's return)		- t	14,977,080
2		Enter amount from Part I, line 27a			-348,135
3		Other increases not included in line 2 (itemize)		<u>85</u> 3 1 −	64,808
4		Add lines 1, 2, and 3		_ · · 4	14,693,753
5		Decreases not included in line 2 (itemize) ▶		5	7,001
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II. column (b) line	30. l 6 l	14.686.752

Part 1	V Capital Gains a	nd Los	ses for Tax on Inve	stment Income	e				
	(b) D—Donation						Date acquired Date sold (c) (mo , day, yr)		
1a	See Additional Data T	able							
b									
С									
d									
e									
(e	e) Gross sales price		Depreciation allowe (f) (or allowable)		t or other basıs expense of sale			or (loss) (f) mınus (g)	
а	See Additional Data T	able							
b									
С									
d									
е									
Со	mplete only for assets s	howing g	aın ın column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gain minus	
(i)	FM V as of 12/31/69		Adjusted basis (j) as of 12/31/69		cess of col (ı) er col (j), ıf any	(1)	ol (k), but no	ot less than -0-) or (from col (h))	
а	See Addıtıonal Data T	able							
b									
С									
d									
e									
3		l gaın or	(loss) as defined in sectio e 8, column (c) (see instru)	2		69,618	
Dowl		· ·			· · · j	3			
Part	Qualification U	naer S	ection 4940(e) for R	educed lax or	net Investme	ent Tr	icome		
	cional use by domestic p on 4940(d)(2) applies, l		undations subject to the se part blank	ection 4940(a) tax	on net investment	incom	ne)		
			4942 tax on the distribute under section 4940(e) Do			erıod?		│ Yes	
1 En	ter the appropriate amou	ınt ın ead	ch column for each year, s	ee instructions bef	ore making any ent	ries			
Base year ((a) period years Calendar or tax year beginning in)	Adjust	(b) ed qualifying distributions	(c) Net value of noncha			(d) Distributio (col (b) divideo	n ratio	
	2014		813,064		13,315,364		. ,	0 061062	
	2013		81,931		9,542,800			0 008586	
	2012		518,592		1,189,387			0 436016	
	2011		32,141		184,731			0 173988	
	2010	(1)	318,287		271,321			1 173101	
2	·				<u> </u>	2		1 852753	
3	the number of years t	he founda	the 5-year base period—divation has been in existence	e ıf less than 5 yea	rs	3		0 370551	
4			itable-use assets for 2015	•	<u> </u>	4		16,416,495	
5					<u> </u>	5		6,083,149	
6			come (1% of Part I, line 2	-		6		3,659	
7	Add lines 5 and 6					7		6.086.808	

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

Enter qualifying distributions from Part XII, line 4.

the Part VI instructions

915,359

ĽŒΙ	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49		, UI 4340—SC	e page	= 10 OL	the ms	LIUCLIO	115)	
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	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '								7,317
_	here ► Tand enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line $27b$ Exempt foreign organiza Part I, line 12 , col (b)	itions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	ndation	s only Othe	rs	2				0
3	Add lines 1 and 2				3				7,317
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	is only Othe	ers	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - 0		•	5				7,317
6	Credits/Payments		•						
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	6,664					
b	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6c		0					
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7			16	6,664
8	Enter any penalty for underpayment of estimated tax Check here $\ \ \ \ \ \ \ \ \ \ \ \ \ $	2220 is	attached		8				0
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	F	10				9,347
11		3,660	Refunded	•	11				5,687
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 di	d			Yes	No
	it participate or intervene in any political campaign?						1a	igsquare	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p		-	see In	structi	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	pies of any n	nateria	ls				
	published or distributed by the foundation in connection with the activities.								
	Did the foundation file Form 1120-POL for this year?					•	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos			-					
	(1) On the foundation \$ (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	itical e	xpenditure t	ax ımp	osed				
_	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been rep	oorted	to the IRS?		• •		2		No
_	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in it	_	=	-		5			
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo						3	-	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	_					4a	\vdash	No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?						4b	\vdash	
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the	e year?				5		No
_	If "Yes," attach the statement required by General Instruction T.	45\	* 6 d *b	_					
6	Are the requirements of section 508(e) (relating to sections 4941 through 49. • By language in the governing instrument, or	45)Sa	tisiied eitiie	ſ					
	 By state legislation that effectively amends the governing instrument so the 	at no n	nandatorv di	rectio	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year?)			
•	and Part XV.					,, 	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)						
	<u>▶oh</u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attori	ney					
	General (or designate) of each state as required by General Instruction G? If '						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r				(3)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee ınst	ructions for	Part X	(IV)?				
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach	a schedule	lıstıng	their na	ames			
	and addresses.						10		No

Pal	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	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ▶PNC BANK NA Telephone no ▶(216) 257	-4701	
	Located at PO BOX 94651 CLEVELAND OH ZIP+4 P4410146			
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			Yes	L
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	res	No No
		10		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			
Dat				
Pal	, ,			
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
la	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes ✓ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ✓ Yes ✓ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
_	If the foundation had excess business holdings in 2015.).	3b	 	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1 '	No

Pai	Statements Rega	rding Activities for	which Form 4/20	May Be Required (Cont	tinuea)		
5a	During the year did the foundation	n pay or incur any amoun	t to				
	(1) Carry on propaganda, or other	wise attempt to influenc	e legislation (section 49	45(e))? Yes	√ No		
	(2) Influence the outcome of any	specific public election ((see section 4955), or to	o carry			
	on, directly or indirectly, any				√ No		
	(3) Provide a grant to an individua	al for travel, study, or oth	ner sımılar purposes?	⊤ Yes ि			
	(4) Provide a grant to an organiza			, ,			
	in section 4945(d)(4)(A)? (se				√ No		
	(5) Provide for any purpose other			, ,			
	educational purposes, or for t	- •		Г Yes Г	√ No		
ь				, ,			
_	Regulations section 53 4945 or i						
	Organizations relying on a curren			_	_		
c	If the answer is "Yes" to question						
Ī	tax because it maintained expend				- _{No.}		
	If "Yes," attach the statement requi	,,					
6a	Did the foundation, during the year			nremilims on			
Ou .	a personal benefit contract?			•	√ No		
ь	Did the foundation, during the yea			·			
	If "Yes" to 6b, file Form 8870.	ir, pay premiums, anced	y or maneetry, on a pers	onar benefit contract.	. 05 110		
7a	At any time during the tax year, w	as the foundation a party	v to a probabited tay cho	Iter transaction?			
	If yes, did the foundation receive	·	•	,			
				ation Managers, Highly			
Pa	and Contractors	t Officers, Directors	s, Trustees, Found	ation managers, mgmy	Paid Employees,		
1	List all officers, directors, trustees	s, foundation managers a	nd their compensation (see instructions).			
		Title, and average	(c) Compensation(If	(d)			
	(a) Name and address	hours per week	not paid, enter	Contributions to	Expense account,		
		(b) devoted to position		employee benefit plans and deferred compensation	(e) other allowances		
PNC I	BANK NA	TRUSTEE	91,137	i i			
O E	30 X 94651	3					
CLE	VELAND,OH 441014651						
2	Compensation of five highest-paid	employees (other than	those included on line 1-	-see instructions). If none, e	nter "NONE."		
	(a)	Title, and aver	age	Contributions to			
Nar	me and address of each employee p	paid hours per wee	ek (c) Compensation	employee benefit	Expense account, (e) other allowances		
	more than \$50,000	(b) devoted to pos	ition	(d) compensation	(c) other unonunces		
10 N	IE						
		$\overline{}$					
rat-	I number of other employees paid o	 					

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

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	ıs.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		1
а	A verage monthly fair market value of securities	1a	16,666,492
b	A verage of monthly cash balances	1b	0
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	16,666,492
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		1
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	16,666,492
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	249,997
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	16,416,495
6	Minimum investment return. Enter 5% of line 5	6	820,825
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cerebeck here ► and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	820,825
2a	Tax on investment income for 2015 from Part VI, line 5 2a 7,317		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		1
c	Add lines 2a and 2b	2c	7,317
3	Distributable amount before adjustments Subtract line 2c from line 1	3	813,508
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	813,508
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	813,508
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	915,359
Ь	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		1
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the		1
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	915,359
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	915,359
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII Undistributed Income (se	e instruction:	กร)			
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, I	line 7				813,508
	Undistributed income, if any, as of the end of					
	Enter amount for 2014 only				0	
	Total for prior years 2013, 20, 20			0		
	Excess distributions carryover, if any, to 201					
	From 2010	28,537				
b	From 2011	22,904				
c	From 2012	460,321				
d	From 2013	0				
е	From 2014	159,730				
f	Total of lines 3a through e		671,492			
4	Qualifying distributions for 2015 from Part					
	XII, line 4 🕨 \$ 915,359					
а	Applied to 2014, but not more than line 2a				0	
b	Applied to undistributed income of prior years			0		
	(Election required—see instructions)					
C	Treated as distributions out of corpus (Election	on	0			
	required—see instructions)					913 509
	Applied to 2015 distributable amount		101.951			813,508
	Remaining amount distributed out of corpus		101,851			
5	Excess distributions carryover applied to 20:	15	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:		772.242			
	Corpus Add lines 3f, 4c, and 4e Subtract line	a 5	773,343			
b	Prior years' undistributed income Subtract			0		
_	line 4b from line 2b			-		
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					
•	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must					
	be distributed in 2015					0
7	Amounts treated as distributions out of					
	corpus to satisfy requirements imposed by		,			
	section 170(b)(1)(F) or 4942(g)(3) (Election		0			
_	be required - see instructions)					
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).		28,537			
۵	Excess distributions carryover to 2016.	· ·				
>	Subtract lines 7 and 8 from line 6a		744,806			
10	Analysis of line 9	• •				
	Excess from 2011	22,904				
		460,321				
	Excess from 2013	0				
		159,730				
		101,851				

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
	year listed					
b 8	35% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt activities					
e	Qualifying distributions made directly					
•	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section $4942(j)(3)(B)(iii)$					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	Information Regarding Foundation Managers: List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 869,293 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	:S	_		Page 12
Enter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a					,
b					
c					
d e					
f					
${f g}$ Fees and contracts from government agencies					
Membership dues and assessments					
investments					
Dividends and interest from securities			14	398,733	
Net rental income or (loss) from real estate					
a Debt-financed propertyb Not debt-financed property				-15,971	
Net rental income or (loss) from personal				-13,971	
property					
Other investment income			14	7,000	
Gain or (loss) from sales of assets other than inventory			10		
Net income or (loss) from special events			18	69,618	
Gross profit or (loss) from sales of inventory					
•					
Other revenue a					
b					
d					
e					
Subtotal Add columns (b), (d), and (e).				461,044	l .
3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify				13	461,044
Part XVI-B Relationship of Activities to		plishment of I	Exempt Purpos	es	
Explain below how each activity for wh the accomplishment of the foundation's instructions)					
, , , , , , , , , , , , , , , , , , , ,					

Form 990-PF	(2015)								Pag	ge 13
Part XVII	Information Re Noncharitable				sactio	ns and Relatio	nships With			
	ganization directly or i							,	res	No
organızatı	ons?									
	from the reporting four									
• •								1a(1)	_	No
	rassets				• •			1a(2)		No
b Other trai										
	s of assets to a noncha							-		No
	hases of assets from a							1b(2)	\dashv	No
	al of facilities, equipme							-		No
	bursement arrangemer							1b(4)	\dashv	No
	s or loan guarantees.							1b(5)	\dashv	No
	mance of services or m f facilities, equipment,		=					1b(6)	\dashv	No No
d If the ans of the goo	wer to any of the above ds, other assets, or se nsaction or sharing arr	e is "Yes," co ervices given	mplete the fol by the reporti	lowing schedule ng foundation I	e Colu f the fo	mn (b) should alwa	lys show the fair ma less than fair mark	rket valu et value	e	NO
(a) Line No	(b) Amount involved	(c) Name of n	oncharitable exe	mpt organization	(d)) Description of transfe	rs, transactions, and sh	arıng arrang	emen	ts
-										
-										
-										
described	ndation directly or indi in section 501(c) of ti complete the following	he Code (othe						. ┌Yes	V	No
	(a) Name of organizatio		(b) Type of organiza	tion		(c) Description of relati	onship		
Sign the info	er penalties of perjury, best of my knowledge a rmation of which prepar *****	and belief, it is	s true, correct				(other than taxpaye	yer) is based by the IRS discu		all is
 	Signature of officer or t	trustee		Date	,	Title	below			
	Print/Type preparer's	s name	Preparer's S	ignature		Date	Check if self- employed ▶	PTIN		
Paid Preparer	Firm's name ▶		l				Firm's EIN ▶	1	_	
Use Only	Firm's address 🕨								_	
							Phone no			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
200000 GENERAL ELEC CAP CORP SR UNSEC			2015-01-09
732 COVIDIEN PLC MERGED 01/27/15 @ \$35 19 P/S		2011-11-24	2015-01-27
792 MEDTRONIC PLC		2015-01-27	2015-02-04
49000 HSBC GLOBAL EQUITY NOTE 20% BUFFER 151 85% CAP140% PARTIC			2015-04-17
100000 URBANA OHIO REF VAR PURP GEN OBLIG LTD FSA			2015-08-01
5665 081 BLACKROCK FDS US OPPORTUNITIES PORTFOLIO			2015-08-12
11479 591 PIMCO COMMODITY REALRETURN STRATEGY FUND		2011-04-05	2015-08-12
1500 CONOCOPHILLIPS		2013-11-12	2015-08-20
250000 COCA-COLA ENTERPRISES SR UNSEC			2015-09-15
CAPITAL GAIN DIVIDENDS	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
200,000		200,000	
25,759		28,880	-3,121
59		59	
82,312		45,642	36,670
100,000		100,000	
234,988		198,334	36,654
88,393		225,000	-136,607
70,762		110,100	-39,338
250,000		250,000	
			175,360

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
Adjusted basis (j) as of 12/31/69	Excess of col (ı) (k) over col (j), ıf any	col (k), but not less than -0-) c (l) Losses (from col (h))		
		-3,121		
		36,670		
		36,654		
		-136,607		
		-39,338		
	Adjusted basis	Adjusted basis Excess of col (i)		

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		
a Paid during the year				
SOUTHWEST COMMUNITY HEALTH FOUNDATION 18697 BAGLEY ROAD MIDDLEBURG HTS,OH 44133	NONE	PUBLIC CHARITY	CRITICAL CARE UNIT	250,000
GREATER CLEVELAND BOY SCOUTS 2241 WOODLAND AVENUE CLEVELAND,OH 44115	NONE	PUBLIC CHARITY	HEALTH LODGE FURNITURE	5,300
UNITED CHURCH OF CHRIST 700 PRESPECT AVE CLEVELAND,OH 44114	NONE	PUBLIC CHARITY	REPAIRS TO STEEPLE AND	88,993
LEUKEMIA & LYMPHOMA SOCIETY 5700 BRECKSVILLE ROAD INDEPENDENCE,OH 44131	NONE	PUBLIC CHARITY	BLOOD CANCER EDUCATION	25,000
OHIO FOUNDATION OF INDEPENDENT COLLEGE 250 EAST BROAD STREET COLUMBUS,OH 43215	NONE	PUBLIC CHARITY	2015 TO 2016 SCHOLARSHIP	25,000
BOY SCOUTS OF AMERICA 2241 WOODLAND AVENUE CLEVELAND,OH 44115	NONE	PUBLIC CHARITY	NEWPOOL	400,000
BALDWIN WALLACE UNIVERSITY 275 EASTLAND ROAD BEREA,OH 44017	NONE	PUBLIC CHARITY	VOICE & FLUENCY PROGRAM	75,000
Total				869,293

TY 2015 Legal Fees Schedule

Name: HARDING FAMILY CHARITABLE TRUST

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES - PRINCIPAL (ALLOCA	498			498

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TY 2015 Other Decreases Schedule

Name: HARDING FAMILY CHARITABLE TRUST

Description	Amount
CARRYING VALUE ADJUSTMENTS	6,997
ROUNDING ADJUSTMENT	4

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TY 2015 Other Expenses Schedule

Name: HARDING FAMILY CHARITABLE TRUST

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REAL ESTATE EXPENSES	40,960	56,931		0
Rent and Royalty Expense	15,971			

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TY 2015 Other Income Schedule

Name: HARDING FAMILY CHARITABLE TRUST

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
EXCISE TAX REFUND	1,664	0	
RENTALINCOME	7,000	7,000	

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TY 2015 Other Increases Schedule

Name: HARDING FAMILY CHARITABLE TRUST

Description	Amount
COST BASIS ADJUSTMENTS	64,808

TY 2015 Taxes Schedule

Name: HARDING FAMILY CHARITABLE TRUST

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAX PAYMENT - PRIOR YE	6,580	0		0
FEDERAL ESTIMATES - PRINCIPAL	12,436	0		0

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DLN: 93491235000556

Schedule B

HARDING FAMILY CHARITABLE TRUST

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2015

Employer identification number

			30-0021471
Organ	ization type (checl	k one)	
Filers	of:	Section:	
Form 9	90 or 990-EZ	「 501(c)() (enter number) organization	
			t treated as a private foundation
Form 9	90-PF	▽ 501(c)(3) exempt private foundation	
			ated as a private foundation
		□ 501(c)(3) taxable private foundation	
Gener ⊽			d, during the year, contributions totaling \$5,000 or more (in money or se instructions for determining a contributor's total contributions
Specia	al Rules		
Γ	under sections 509 received from any	$\Theta(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedu	990-EZ that met the 33 ¹ ß% support test of the regulations le A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that s of the greater of (1) \$5,000 or (2) 2% of the amount on (ו) Form 990
Γ	during the year, tot		Form 990 or 990-EZ that received from any one contributor, or religious, charitable, scientific, literary, or educational purposes, or l, and III
Γ	during the year, co this box is checked purpose Do not co	ontributions exclusively for religious, charitable, etc d, enter here the total contributions that were recei complete any of the parts unless the General Rule	Form 990 or 990-EZ that received from any one contributor, so, purposes, but no such contributions totaled more than \$1,000 if eved during the year for an exclusively religious, charitable, etc., applies to this organization because it received nonexclusively the year

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization HARDING FAMILY CHARITABLE TRUST Employer identification number 30-0021471

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1			Person	r
	CLARA HARDING CRAT PO BOX 609	\$ 211,725	Payroll	Г
	PITTSBURGH, PA 15230		Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
	-	\$	Payroll	Г
			Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Г
		\$	Payroll	Γ
			Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
	_		Person	Γ
		\$	Payroll	Г
	-		Noncash	Γ
			(Complete Part II f contributions)	or noncash

Name of organization HARDING FAMILY CHARITABLE TRUST		Employer identification number 30-0021471		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		<u> </u>		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
'		_		

Schedule B (Form 990, 990-E∠, or 990-PF) (2015)

		Page 4		
ARITABLE TRUST		Employer identification number 30-0021471		
ARTIABLE TROST				
than \$1,000 for the year from any or For organizations completing Part II r less for the year. (Enter this inforn	ne contributor. Complete co II, enter the total of <i>exclusive</i> mation once. See instruction	lumns (a) through (e) and the following ly religious, charitable, etc., contributions		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Transferee's name, address, and		t Relationship of transferor to transferee		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
(e) Transfer of gift Transferee's name, address, and ZIP4 Relationship of transferor to transferee				
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Transferee's name, address, and	(e) Transfer of gif	t Relationship of transferor to transferee		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Transferee's name, address, and	(e) Transfer of gif	t Relationship of transferor to transferee		
,	than \$1,000 for the year from any or For organizations completing Part III ress for the year. (Enter this informe copies of Part III if additional space is respectively.) Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift	(e) Transfer of gift (b) Purpose of gift (b) Purpose of gift (c) Use of gift (c) Use of gift (d) Purpose of gift (e) Transfer of gift (e) Transfer of gift (b) Purpose of gift (c) Use of gift (d) Use of gift (e) Transfer of gift (e) Transfer of gift (f) Use of gift (g) Transfer of gift (h) Purpose of gift		