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Department of the Treasury

Internal Revenue Service

DLN: 93491207004116

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 $\underline{www.irs.gov/form990pf}$.

Open to Public

For	cale	ndar year 2015, or tax y	ear beginning 01-0	1-2015	, and end	ling 1	12-31-2015	
	e of four		ar 2015, or tax year beginning 01-01-2015 Yoder Charitable O box number if mail is not delivered to street address) Room/suite		A Empl	oyer id	lentification numbe	er
	undation				34-167	7646		
Num	ber and	street (or P O box number if mail is	not delivered to street address)	Room/suite	B Teleph	none nu	mber (see instruction	s)
PO	Box 804	169			(330) 4	78-210	0	
Cıty	or town,	state or province, country, and ZIP o	r foreign postal code		C If exe	emption	application is pendin	g, check here 🕨 🗍
Cant	ton, OH	44708						
G CI	heck al	I that apply Initial return Final return Address chang	☐ Initial return of a fo ☐ A mended return ge ☐ Name change	ormer public charity	2. Fe	oreign o	rganizations, check horganizations meeting	the 85%
		pe of organization 🔽 Section			E If pr	vate fo	undation status was t in 507(b)(1)(A), chec	erminated
		1947(a)(1) nonexempt charital	ole trust Other taxable JAccounting method					
of	year <i>(fr</i>	et value of all assets at end rom Part II, col. (c), \$ 703,663	Other (specify)	<u> </u>			ation is in a 60-montl in 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue a (The total of amounts in columns (necessarily equal the amounts in co instructions)	(b), (c), and (d) may not	Revenue and expenses per (a) books	Net invest (b) incom		Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e	etc , received (attach					
	2	schedule) Check $ rightharpoons$ If the foundation		927,272				
		Sch B						
	3	Interest on savings and temp	oorary cash investments	25		25	25	
	4	Dividends and interest from s	securities	3,222		3,222	3,222	
	5a	Gross rents						
	b	Net rental income or (loss) _						
Ę	6a	Net gain or (loss) from sale o	rassets not on line 10					
Revenue	b	Gross sales price for all asse	ets on line 6a					
ž	7	Capital gain net income (from	n Part IV, line 2)			0		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	ь	Less Cost of goods sold.						
	c	Gross profit or (loss) (attach	schedule)					
	11	Other income (attach schedu	ıle)					
	12	Total.Add lines 1 through 11		930,519		3,247	3,247	
	13	Compensation of officers, dir	ectors, trustees, etc	0		0	0	(
	14	O ther employee salaries and	wages					
φ	15	Pension plans, employee ben						
S L	16a	Legal fees (attach schedule).						
Expenses	Ь	Accounting fees (attach sch	edule)					
	c	Other professional fees (atta	ch schedule)					
ğtiv	17	Interest						
7	18	Taxes (attach schedule) (see	e instructions)	153		0	0	(
	19	Depreciation (attach schedul	e) and depletion					
Administrative	20	Occupancy						
and 4	21	Travel, conferences, and mee	_					
	22	Printing and publications		% 103		0	0	,
Operating	23	Other expenses (attach sche		103		U		
e G	24	Total operating and administ	-	256		0		,
ă	25	Add lines 13 through 23		496,773		0		496,773
_	25 26	Contributions, gifts, grants p		430,773				490,773
		Total expenses and disburser 25	ments.Add lines 24 and	497,029		0	0	496,773
	27	Subtract line 26 from line 12						
	a	Excess of revenue over exper		433,490				
	b	Net investment income (If ne				3,247		
	l c	Adjusted net income(if negat	.ive, enter -U-)				3,247	

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
Ī	1	Cash—non-interest-bearing	121,715	555,205	555,205
	2	Savings and temporary cash investments	, -	,	
	3	Accounts receivable			
	,	Less allowance for doubtful accounts			
	4	Pledges receivable			
	7	Less allowance for doubtful accounts			
	5	Grants receivable			_
	_	Receivables due from officers, directors, trustees, and other			
	6	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	7	· · · · · · · · · · · · · · · · · · ·			
		Less allowance for doubtful accounts			
ا چ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹	10a	Investments—U S and state government obligations (attach schedule)	222.225	S	
	b	Investments—corporate stock (attach schedule)	233,285	233,285	148,458
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) ▶			
		Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
	15	Other assets (describe 🟲)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	355,000	788,490	703,663
	17	Accounts payable and accrued expenses			
ا ؞	18	Grants payable			
abilities	19	Deferred revenue			
틝	20	Loans from officers, directors, trustees, and other disqualified persons			
盲	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.			
흥	24	Unrestricted			
or Fund Balances	25	Temporarily restricted			
힏	26	Permanently restricted			
亄		Foundations that do not follow SFAS 117, check here ▶ ▽			
ᇹ		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
3	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
ď	29	Retained earnings, accumulated income, endowment, or other funds	355,000	788,490	
Net Assets	30	Total net assets or fund balances(see instructions)	355,000	788,490	
	31	Total liabilities and net assets/fund balances(see instructions)	355,000	788,490	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	•		
1		Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must ag	ree	
		with end-of-year figure reported on prior year's return)			355,000
2		Enter amount from Part I, line 27a			433,490
3		Other increases not included in line 2 (itemize)		 	. 0
4		Add lines 1, 2, and 3			788,490
5		Decreases not included in line 2 (itemize)		5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II. column (h) lin	e 30 . 6	788.490

		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase (b) D—Donation		Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)
1a							
b							
С .							
d							
е е							
(e) Gross sales price	Depreciation allowed (f) (or allowable)		or other basis expense of sale			or (loss) (f) minus (g)
a							
b							
с							
d							
е							
Col	mplete only for assets	showing gain in column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gain minus
(i)	FMV as of 12/31/69	A djusted basis (j) as of 12/31/69		cess of col (ı) r col (j), ıf any	(1)		t less than -0-) or from col (h))
а							
b							
С							_
d							
е							
3	Net short-term capit If gain, also enter in in Part I, line 8	me or (net capital loss) { al gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru	ctions) If (loss), e) nter - 0 - 	. 3	ı	
Part '	V Qualification (Jnder Section 4940(e) for R	educed Tax on	Net Investme	nt I	ncome	_
	ional use by domestic on 4940(d)(2) applies,	private foundations subject to the se leave this part blank	ection 4940(a) tax	on net investment	ıncor	me)	
		e section 4942 tax on the distributa ot qualify under section 4940(e) Do			eriod	?	Γ Yes Γ No
1 Ent		unt ın each column for each year, se	ee instructions befo	ore making any ent	ries	(1)	
	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar	ritable-use assets		(d) Distributio (col (b) divided	n ratio
	2014	293,773		286,084			1 026877
	2013	206,126		245,478			0 839692
	2012	207,228		180,638			1 147200
	2011	203,315		303,924			0 668967
	Z010	216,000		376,274			0 574050
2	•	1 (d)			2		4 256786
3	the number of years	ratio for the 5-year base period—divide foundation has been in existence	e if less than 5 year	rs	3		0 851357
4		f noncharitable-use assets for 2015		<u> </u>	4		428,427
5		23		<u> </u>	5		364,744
6		stment income (1% of Part I, line 2)	/ D)		6		32
7	Add lines 5 and 6.	estment income (1% of Part I, line 27b)					

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

the Part VI instructions

496,773

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	940(e).	. or 4948—se	e pag	= 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here			 ۱ ع					
Ia	and enter "N/A" on line 1	,							
	Date of ruling or determination letter			\					
	(attach copy of letter if necessary-see instructions)								
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V	, check		J	1				32
	here Fand enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations and 1, line 12, col (b)	ations 6	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Othe	ers	2				0
3	Add lines 1 and 2			•	3				32
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou	ndation	s only Oth	ers	4				0
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	ntar - O	1_		5				32
	Credits/Payments	inter - o	·- · · ·	•	5				32
6 a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1						
a b	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
u 7	Total credits and payments Add lines 6a through 6d				7				0
_	Enter any penalty for underpayment of estimated tax. Check here if Form 2				8				
8 9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed.				9				32
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount				10			-	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	ic over	Refunded		11				
	t VII-A Statements Regarding Activities		Kerunaca		++				
1a	During the tax year, did the foundation attempt to influence any national, state	a orloc	al legiclatio	n or d	d			Yes	No
Lu	it participate or intervene in any political campaign?	2, 01 100	ar registatio	ii oi ui	u		1a	103	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for j	nolitica	I nurnoces /	cee In	etructi	one			110
	for definition)?	pontica	i puiposes (366 11	Structi	0115	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	nues of any i	nateria	ı Is	-			
	published or distributed by the foundation in connection with the activities.	and co	pres or any r	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,5				
С	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) impo			r					
	(1) On the foundation \blacktriangleright \$ 0 (2) On foundation managers								
e	Enter the reimbursement (if any) paid by the foundation during the year for pol	. –			osed				
	on foundation managers 🕨 \$0		•						
2	Has the foundation engaged in any activities that have not previously been re	ported	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 i	ts gove	erning instru	ment,	articles	5			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	formed o	copy of the c	hanges			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more of						4a		No
b	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 du	iring the	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	45)sa	tisfied eithe	r					
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so the	nat no n	nandatory d	ırectıo	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	?If "Yes	s," complete	Part II	, col. (c),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ($\!\!\!$	(see ins	structions)						
	№ ОН								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9								
	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		_						
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (s	see inst	ructions for	Part X	1 A) 3		_		
10	If "Yes," complete Part XIV	" atta - '	المناسم و و	lict.	• •		9	\vdash	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes, and addresses.</i>		і а ъспеаше	nsting	uieir n	annes	10		No
	and addresses.						10		.10

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►Esther Yoder Telephone no ►(330	1478	-2100	
	Located at ▶PO Box 80469 Canton OH ZIP+4 ▶44708	7		
			<u> </u>	
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 over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country 🟲			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? 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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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 V No			
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		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 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		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	► 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
ь	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		No

Pa	rt VII-B	Statements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (Con	tinue	d)	
5a	During th	e year did the foundation	n pay	or incurany amoun	t to						
	(1) Carry	on propaganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (sectıon 49	45(e))?	√ No		
	(2) Influe	nce the outcome of any	spec	ıfıc publıc election (see	section 4955), or to	car	ry			
	on, dı	rectly or indirectly, any	vote	registration drive?				T Yes 「	√ No		
	(3) Provid	de a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		☐ Yes 「	√ No		
		de a grant to an organiza									
	ın sec	tion 4945(d)(4)(A)? (se	ee in:	structions)				T Yes 「	√ No		
		de for any purpose other									
		itional purposes, or for t									
b								exceptions described in			
								ınstructions)?		5b	
	_	· -						▶	_		
C		wer is "Yes" to question							_		
							•	\ \ Yes \	No		
		ttach the statement requ									
6a		undation, during the yea	•	, ,					_		
_		Il benefit contract?			✓ No						
Ь			ar, pa	y premiums, directl	yorı	ndirectly, on a perso	onal	benefit contract?	•	6b No	
		6b, file Form 8870.							_		
7a	· ·	ne during the tax year, v		•		•					
_ь								the transaction?		7b	
Pa	rt VIII	and Contractors	t Of	ncers, Directors	5, II	ustees, Founda	itio	n Managers, Highly	Paid	Employees,	
=	List all off	icers, directors, trustee	s. foi	ındation managers a	nd t	heir compensation (see i	nstructions).			
	LIST UII OI I	rearry undecessor, tradede	<u> </u>					(d)			
	(a) Nai	me and address		Title, and average hours per week	(c)	Compensation(If not paid, enter		Contributions to		Expense account,	
	(a) ivai	ne ana adaress	(b)	devoted to position		-0-)		mployee benefit plans I deferred compensation	(e) other allowances		
Abne	r Yoder		Broo	sident		0	and		0		
	3ox 80469		2 00			0		V		0	
	ton,OH 44										
Wend	ly Spillman		Trea	surer		0		0		0	
	3ox 80469		2 00)							
	ton,OH 44	708									
	r Yoder		Sec 2 00	retary		0		0		0	
	3ox 80469 ton,OH 44	1708	2 00)							
			lemr	lovees (other than	thos	e included on line 1-	-500	instructions). If none, e	nter"l	NONE "	
	compensat		Citiq				300	Contributions to		TO NE.	
Nai	me and add	(a) ress of each employee ¡	haid	Title, and aver hours per we		(c) Compensation	n	employee benefit		Expense account,	
		re than \$50,000	Julu	(b) devoted to pos		(c) companion		plans and deferred (d) compensation	(e)	other allowances	
NON	J.F.							(d) compensation			
1101	V L										
									+		
									-		
									<u> </u>		
Tota	I number of	f other employees paid o	ver	\$50,000						0	

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

Part X Minimum Investment Return

Ра	(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		
а	Average monthly fair market value of securities	1a	147,720
b	Average of monthly cash balances	1b	287,231
c	Fair market value of all other assets (see instructions)	1 c	0
d	Total (add lines 1a, b, and c)	1d	434,951
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	0
3	Subtract line 2 from line 1d	3	434,951
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	6,524
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	428,427
6	Minimum investment return.Enter 5% of line 5	6	21,421
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cei check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	21,421
2a	Tax on investment income for 2015 from Part VI, line 5 2a 32		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	32
3	Distributable amount before adjustments Subtract line 2c from line 1	3	21,389
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	21,389
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	21,389
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	496,773
	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	496,773
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	32
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	496,741
	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 XIIII Undistributed	Income (see instr	uctions)				
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015	
1	Distributable amount for 2015	from Part XI, line 7				21	,389
2	Undistributed income, if any, a	s of the end of 2015					
а	Enter amount for 2014 only.				0		
b	Total for prior years 20	, 20, 20		0			
3	Excess distributions carryove	r, ıf any, to 2015					
а	From 2010	197,202					
b	From 2011	188,140					
С	From 2012	198,240					
d	From 2013	193,900					
	From 2014	279,523	4.057.005				
	Total of lines 3a through e		1,057,005				
4	Qualifying distributions for 201						
	XII, line 4 🕨 \$				0		
	Applied to 2014, but not more				0		
	Applied to undistributed incom (Election required—see instruc	tions)		0			
С	Treated as distributions out of required—see instructions).		0				
d	Applied to 2015 distributable	amount				21	,389
е	Remaining amount distributed	out of corpus	475,384				
5	Excess distributions carryove	r applied to 2015	0				0
	(If an amount appears in column same amount must be shown						
6	Enter the net total of each col	lumn as					
	indicated below:						
	Corpus Add lines 3f, 4c, and 4		1,532,389				
b	Prior years' undistributed incor			0			
	line 4b from line 2b			Ů			
С	Enter the amount of prior years income for which a notice of de						
	been issued, or on which the se	•					
	tax has been previously asses	sed		0			
d	Subtract line 6c from line 6b T	axable amount		0			
	—see instructions			0			
е	Undistributed income for 2014 4a from line 2a Taxable amou						
	instructions				0		
f	Undistributed income for 2016	Subtract		•			
	lines 4d and 5 from line 1 This	amount must					
	be distributed in 2015						0
7	Amounts treated as distribution						
	corpus to satisfy requirements section 170(b)(1)(F) or 4942(
	be required - see instructions)		0				
8	Excess distributions carryover	t t	107 202				
	applied on line $5\ \mathrm{orline}\ 7$ (see	·	197,202				
9	Excess distributions carryover		1,335,187				
	Subtract lines 7 and 8 from line	еба	1,333,107				
	Analysis of line 9	188,140					
	Excess from 2011 Excess from 2012	198,240					
	Excess from 2012 Excess from 2013	193,900					
	Excess from 2014	279,523					
	Excess from 2015	475,384					

P	art XIV	Private Operating Foundat	tions (see ınstrı	uctions and Part	VII-A, questior	າ 9)	
1a		dation has received a ruling or deterr					
_		and the ruling is effective for 2015,					
		to indicate whether the organization		ting foundation de:		1 4942(j)(3) or	1 4942(j)(5)
2a		esser of the adjusted net m Part I or the minimum	Tax year		Prior 3 years		(e) Total
		t return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
		2a					
C		distributions from Part XII, ach year listed					
d		ncluded in line 2c not used					
	directly for	active conduct of exempt					
е		distributions made directly conduct of exempt activities					
		ne 2d from line 2c					
3	Complete 3	a, b, or c for the					
		test relied upon					
а		Iternative test—enter					
		of all assets					
		of assets qualifying section 4942(j)(3)(B)(i)					
b		nt" alternative test— enter 2/3				1	1
-	of minimun	n investment return shown in					
		6 for each year listed			-	1	
C		alternative test—enter					
		support other than gross ment income (interest,					
		nds, rents, payments					
		curities loans (section					
)(5)), or royalties)					
		rt from general public or more exempt					
		zations as provided in					
		n 4942(j)(3)(B)(III)					
		st amount of support					
		n exempt organization investment income					
Pa	_ `	upplementary Information (Complete this	part only if th	e organizatio	n had \$5.000 c	r more in
		sets at any time during the					
1		n Regarding Foundation Managers:					
а		anagers of the foundation who have c close of any tax year (but only if they					dation
	belore the	close of any tax year (but only if the)	y nave contributed	more than \$5,000	o) (See section s	07(d)(2))	
	See Addıtı	onal Data Table					
ь		anagers of the foundation who own 10				y large portion of th	ne
	ownership	of a partnership or other entity) of wh	nich the foundation	n has a 10% or gre	eater interest		
	Informatio	on Regarding Contribution, Grant, Gif	t Loan Scholarch	in etc. Programe:			
_		e ► If the foundation only makes co				nd does not assent	-
		requests for funds. If the foundation					
		itions, complete items 2a, b, c, and c		, ,	•	J	
а	The name,	address, and telephone number or e	-mail address of t	he person to whom	n applications sho	uld be addressed	
	EstherYo						
	PO Box 80						
	(330)478	H 447080469 -2100					
		n which applications should be subm	itted and informati	on and materials t	hey should includ		
U		n which applications should be submit c form of application required	receu anu miorinali	on and materials t	.ney anoulu miciuc		
С	•	ssion deadlines					
		no submission deadlines					
d	factors	ctions or limitations on awards, such					
		der unusual cırcumstances, grants a ons qualıfıed under IRC section 501(poses to

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 Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 496,773 **b** Approved for future payment

Form 990-PF (2015) Part XVI-A Analysis of Income-Production	ing Activitie				Page 1 2
Enter gross amounts unless otherwise indicated		isiness income	Excluded by section	1 512, 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			14 14	25 3,222	
8 Gain or (loss) from sales of assets other than inventory					
d e 12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to the accomplishment of the foundation instructions)	calculations) o the Accomp ich income is rep	plishment of E	Exempt Purpos (e) of Part XVI-A co	ontributed importa	3,247 ntly to

Part >	(VII	Information Re Noncharitable					sactio	ns and I	Relationships	With			
		nization directly or ii (c) of the Code (othe	ndırectly (engage in	any of t	he following wi						Yes	No
orgar	nızatıon	s?											
a Trans	sfers fro	om the reporting four	ndation to	a noncha	rıtable e	exempt organiz	ation of						
(1)	Cash.										1a(1)		No
(2)	Othera	ssets									1a(2)		No
b Othe											, ,		
		fassets to a noncha	ritable ex	empt orga	nızatıor	1					1b(1)		No
		ses of assets from a									1b(2)		No
		of facilities, equipme									1b(3)		No
		rsement arrangemen									1b(4)		No
		r loan guarantees.									1b(5)		No
		nce of services or m									1b(5)		No
													No
	_	cilities, equipment, i r to any of the above	_								1c		NO
	y trans:	, other assets, or se action or sharing arra (b) Amount involved	angement	, show in	column		of the go	ods, other		es receive	ed		nts
	_												
							-						
							+						
							+						
							1						
desc	rıbed ın es," cor	ation directly or indi section 501(c) of th mplete the following : (a) Name of organization	ne Code (d schedule		section		rın secti			otion of relati		s 🔽	No
				+									
Sign Here	the be	penalties of perjury, st of my knowledge a ation of which prepar ****	ınd belief,	ıt ıs true,	correct		e Declar			n taxpaye May t return	r) is bas he IRS di	sed on	all
	Sig	nature of officer or t	rustee			Date	— y	Title		below	he prepai nstr)२ 🗸		
	Pı	rınt/Type preparer's Dan Kloha CPA	name	Prepare	r's Sıgnı	ature	Date 201	6-07-25	Check if self- employed ►	PTIN	001151	26	
Paid Prepa Use	rer 4	rm's name ► 15 Group Inc rm's address ►	Inc				Firm's EIN ► 34				0		
Only		rm's address F	NW Ste 10	0 Canton	n, OH 4	4718	Phone no (330)492-0094						

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

<u> </u>	· ·
A bner Yoder	
Wendy Spillman	
Esther Yoder	

f recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient Public	Purpose of grant or contribution	A mount
one	Public		
one	Public		
		General Support	900
one	Public	General Support	3,200
one	Public	General Support	17,500
one	Public	General Support	4,400
one	Public	General Support	1,200
one	Public	General Support	2,200
one	Public	General Support	1,700
one	Public	General Support	3,200
one	Public	General Support	5,600
one	Public	General Support	1,200
one	Public	General Support	8,000
one	Public	General Support	2,200
one	Public	General Support	1,200
one	Public	General Support	5,000
one	Public	General Support	4,400
	one	pone Public Public	Public General Support Dine Public General Support

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				
Joe Purcell Ministries PO Box 3343 Bartlesville,OK 74006	None	Public	General Support	11,000
Kate McVeigh Ministries PO Box 1688 Warren, MI 48090	None	Public	General Support	3,200
Kelly Duininck Ministries 23645 Clubhouse Drive Rapid City,SD 57702	None	Public	General Support	2,400
Kenneth Copeland Ministries PO Box 961010 Fort Worth,TX 761619984	None	Public	General Support	11,000
Kenneth Hagin Ministries PO Box 50126 Tulsa,OK 741500126	None	Public	General Support	100,000
Larry & Angela Keeton (Mark Brazee Keeton) Ministries PO Box 470308 Tulsa,OK 741470308	None	Public	General Support	2,400
Larry Hutton Ministries PO Box 822 Broken Arrow, OK 740130822	None	Public	General Support	1,200
Maoz PO Box 535788 Grand Praire,TX 750535788	None	Public	General Support	5,400
Mark Hankins Ministries PO Box 12863 Alexandria, LA 71315	None	Public	General Support	11,800
Max Dahm Ministries PO Box 433 Broken Arrow, OK 74013	None	Public	General Support	1,200
Men's Challenge 701 Walnut Ave Canton, OH 44702	None	Public	General Support	6,000
Moore Life Ministries PO Box 1010 Branson, MO 656151010	None	Public	General Support	6,000
Mylon LeFevre Ministries PO Box 822148 Fort Worth,TX 761822148	None	Public	General Support	1,200
New Covenant World Missions PO Box 35968 Canton, OH 44735	None	Public	General Support	62,400
Oasis Radio Network PO Box 1924 Tulsa, OK 74101	None	Public	General Support	1,800
Total				496,773

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				
Pregnancy Support Center 4500 22nd St NW Canton, OH 44708	None	Public	General Support	11,200
Randy Grier Ministries PO Box 140516 Broken Arrow, OK 740140516	None	Public	General Support	4,400
Rhema Wright PO Box 50126 Tulsa,OK 741500126	None	Public	General Support	3,800
Rick Renner Ministries PO Box 702040 Tulsa,OK 741709900	None	Public	General Support	22,000
Shining Light Ministries PO Box 452 Independence,IA 50644	None	Public	General Support	3,800
South American Touch 2384 New Holland Pike Lancaster, PA 17601	None	Public	General Support	1,000
Sowers Club co Matt & Julie Beemer PO Box 414 Broken Arrow,OK 740130414	None	Public	General Support	27,000
Stan Mathias Ministries PO Box 622706 O viedo, FL 32762	None	Public	General Support	100
Terry Mize Ministries PO Box 35044 Tulsa,OK 741530044	None	Public	General Support	1,200
Tim Rogers Ministries PO Box 572 Broken Arrow, OK 740120572	None	Public	General Support	3,200
Willis Horton Ministries 1320 Julian Drive Watkinsville,GA 30677	None	Public	General Support	2,400
Andrew Wommack Ministries 850 Elkton Drive Colorado Springs, CO 80907	None	Public	General Support	2,323
Antı Vırus Character Education ProgramAntı Vırus Character Education Prog 850 Elkton Drive Colorado Springs, CO 80907	None	Public	General Support	5,000
Barry Mitchell Ministries PO Box 2592 Broken Arrow, OK 74013	None	Public	General Support	47,500
Fortress of Hope PO Box 200 Hartville,OH 44632	None	Public	General Support	450
Total			▶ 3a	496,773

If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
None	Public	General Support	5,000
None	Public	General Support	3,100
None	Public	General Support	1,200
None	Public	General Support	500
None	Public	General Support	3,200
None	Public	General Support	500
None	Public	General Support	1,000
None	Public	General Support	1,000
None	Public	General Support	10,000
None	Public	General Support	500
None	Public	General Support	300
None	Public	General Support	9,500
None	Public	General Support	1,000
None	Public	General Support	100
None	Public	General Support	35,600
	show any relationship to any foundation manager or substantial contributor None None	show any relationship to any foundation manager or substantial contributor None None Public None Public	show any relationship to any foundation manager or substantial contributor None Public General Support One One Public General Support One One One One One One One On

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491207004116

TY 2015 Investments Corporate Stock Schedule

Name: The Abner and Esther Yoder Chantable

Foundation

EIN: 34-1677646

	Name of Stock	End of Year Book Value	End of Year Fair Market Value
F	luntington National Bank	233,285	148,458

TY 2015 Other Expenses Schedule

Name: The Abner and Esther Yoder Charitable

Foundation

EIN: 34-1677646

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Bank Service Charges	3	0	0	0
Miscellaneous	100	0	0	0

TY 2015 Taxes Schedule

Name: The Abner and Esther Yoder Charitable

Foundation

EIN: 34-1677646

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
State Taxes	125	0	0	0
Federal Taxes	28	0	0	0

efile GRAPHIC print - DO NOT PROCESS

The Abner and Esther Yoder Charitable

As Filed Data -

DLN: 93491207004116

DEN. 93491207004110

OMB No 1545-0047

Schedule B

(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.

2015

Employer identification number

Founda	ition		34-1677646
Organ	ization type (check or	ne)	
Filers	of:	Section:	
Form 9	90 or 990-EZ	501(c)() (enter number) organization	
		☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		☐ 527 political organization	
Form 9	90-PF	√ 501(c)(3) exempt private foundation	
		501(c)(3) taxable private foundation	
Note.		covered by the General Rule or a Special Rule. '), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule See instructions
V		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a	
Specia	al Rules		
Г	under sections 509(a) received from any one	escribed in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 \Bar{s}\%$ supposes	ll, line 13, 16a, or 16b, and that
Γ	during the year, total of	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions of more than \$1,000 exclusively for religious, charitable, scientific, cruelty to children or animals. Complete Parts I, II, and III	
Γ	during the year, contri this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received butions exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excludete any of the parts unless the General Rule applies to this organization becatic, contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 If usively religious, charitable, etc, ause it received nonexclusively

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its 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)

Name of organization

Employer identification number 34-1677646 The Abner and Esther Yoder Charitable Foundation

art I	Contributors (see instructions) Use duplicate copies of Part I		141	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
1			Person	IZ
'	Abner and Esther Yoder PO Box 80469	\$ 20,000	Payroll	Г
	Canton, OH44708		Noncash (Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
2	Stark Truss Company Inc		Person	দ
	PO Box 80469	\$ 899,772	Payroll	Γ
	Canton, OH44708		Noncash (Complete Part II t	or noncash
(a)	(b)	(c)	contributions)	
No.	Name, address, and ZIP + 4 Dansco Engineering LLC	Total contributions	Type of con	tribution
3	Dansoo Engineering Lice		Person	⊽
	PO Box 80469	\$ 7,500	Payroll	Г _
	Canton, OH44708		Noncash (Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		\$	Payroll	Г
		Ψ	Noncash	Г
			(Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Γ
		\$	Payroll	_ _
			Noncash (Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
IVO.	ivallie, address, allu ZIF † 4	Total Contributions	Person	Г
			Payroll	Г
		\$	Noncash	Г
			(Complete Part II to	or noncash

THE ADDER AND EST	ion	Employer identification n	umber
oundation	her Yoder Charitable	34-1677646	
Part II	Noncas h Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		(c)	

Schedule B (Form 990,	990-EZ,	or 990-PF)	(2015)
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lame of organization he Abner and Esther Yoder Charitable			Employer identification number	
ne Abner and Estner Y oundation	r oder C naritable	3	34-1677646	
total more line entry. of \$1,000 or	than \$1,000 for the year from any o	one contributor. Complete colu III, enter the total of exclusively mation once. See instructions	ped in section 501(c)(7), (8), or (10) that almost (a) through (e) and the following y religious, charitable, etc., contributions .) ► \$	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
. =		(2) Transfer of with		
-	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee	
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
. =	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee	
	Transfered frame, address, an		Tradition of transfer of to transfer oc	
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee	