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## **Return of Private Foundation**

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

For	calen	dar year 2015 or tax year beginning		, 2015, an	dending	<u> </u>	, 20
	me of fou			***********	A Employe	er identification numb	er
	BAIN	MGARTNER FOMILY FOUNDATION			734-	-1908139	
Nu	mber and	MGARTNER FAMILY JOUNDATION d street (or PO box number if mail is not delivered to street address)		Room/suite	B Telephor	- 1908139 ne number (see instruct	tions)
	$\sim$	~	!			1691-3586	,
Cit	y or towr	BOX 0326  n, state or province, country, and ZIP or foreign postal code		<u> </u>			
-					C If exemp	tion application is pend	ling, check here ▶
_	104	EDO, OH 43605-0326	-t - t				
G	Cneck		of a former	public char	ty D 1. Foreig	n organizations, check	here ▶ [_]
		☐ Final return ☐ Amended r				n organizations meetin	
_		Address change Name char		<del></del>		here and attach complete a	
H		type of organization: Section 501(c)(3) exempt p			section 5	foundation status was 507(b)(1)(A), check here	
$\Box$		on 4947(a)(1) nonexempt charitable trust			<u> </u>	· · · · · · · · · · · · · · · · · · ·	_
I		narket value of all assets at J Accounting method	: 🔀 Cash	☐ Accrua		indation is in a 60-mont	th termination
		f year (from Part II, col. (c),			under se	ction 507(b)(1)(B), chec	k here ▶ 📋
	line 16	(Part I, column (d) must be	on cash basis	s <i>)</i>		,	
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue		let investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses p	per (C)	income	income	purposes
_		the amounts in column (a) (see ınstructions).)	000.0				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch. B					
	3	Interest on savings and temporary cash investments			1		
	4	Dividends and interest from securities	14,078	<del>}</del>	4.078		
	5a	Gross rents	· · · · · · · · · · · · · · · · · · ·	<del></del>	11=12	1	
	b	Net rental income or (loss)					4
Reve: nue	6a	Net gain or (loss) from sale of assets not on line 10	(4	}			<u> </u>
	b	Gross sa'es price for all assets on line 6a		W. C. 1	-	James Marian	
Š	7	Capital gain net income (from Part IV, line 2)			73. 7-17.2	har a <del>h Lafer a san a</del> c	k triji de like
Re	8	Net short-term capital gain	-	j	, X7		
_	9	Income modifications		3 c			-,-
	10a	Gross sales less returns and allowances		j			
	b	<del></del>					
		Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)	7:501	1	1 504 \	<b>4</b>	
	11	Other income (attach schedule)	(1,50)	, , , , , , , , , , , , , , , , , , , ,	1,501)	<del> </del>	
	12	Total. Add lines 1 through 11 . RECEIVED	SIE,574	7   1	2,578		***
es	13 14	- 1	<u>\Q\</u>			<del> </del>	
penses		Other employee salaries and wages Pension plans, employee beaefits MAY 1 2018	12			<del> </del>	ļ
be	15	Pension plans, employee benefits with	100	<del></del>		-	ļ <u> </u>
	16a	Legal fees (attach schedule)	<del></del>				ļ
စ္	b	Accounting fees (attach schedule)  Other professional fees (attach schedule)	500		ラウク	<del> </del>	550
ati	C	Other professional lees (attach schedule)	100	<del>'</del>	100		100
Operating and Administrative Ex	17	Interest	i	<del></del>	723	<del> </del>	<del> </del>
_ <u>:</u>	18	Taxes (attach schedule) (see instructions)	308	<del>}</del> _	30B	<del> </del>	,
Ē	19	Depreciation (attach schedule) and depletion	<u> </u>			ļ. <u>.</u>	
Ç Ş	20	Occupancy	<u> </u>		<del></del>		<u> </u>
ָ ס	21	Travel, conferences, and meetings	L				ļ
an	22	Printing and publications	ļ			ļ	ļ
၂	23	Other expenses (attach schedule)	L				
atir	24	Total operating and administrative expenses.	1		A/	i	
er.		Add lines 13 through 23	3/9		959	<u> </u>	650
ğ	25	Contributions, gifts, grants paid	<u> 5.389</u>	7	-		5389
U	26	Total expenses and disbursements. Add lines 24 and 25	5.34	7	979		6039
	27	Subtract line 26 from line 12:			<i>P</i> .		Contract Contract
	а	Excess of revenue over expenses and disbursements	6,227	7			
	Ь	Net investment income (if negative, enter -0-)			1.620		
	_	Adjusted net income (if negative, enter -0-)		سري کي پر			

Pa	rt II	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year			f year
		Should be for the or your amounts only. (See instituctions.)	(a) Book Value	(b) Book Valu	e	(c) Fair Market Value
	1	Cash—non-interest-bearing	7,082	17,496		17,496
1	2	Savings and temporary cash investments		<u> </u>		·
	3	Accounts receivable ►				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ►			٠, .	
		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) ▶	<u> </u>			
Assets		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				<u> </u>
Ř	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)		<del> </del>		
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	431,837	431637		714,928
	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				-740 11011
		instructions. Also, see page 1, item l)	438,919	449,333		132424
	17	Accounts payable and accrued expenses	1,146	2,333		
S	18	Grants payable . *	ļ	<del></del>		A Part of the Part
≝	19	Deferred revenue				A. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Ē	20	Loans from officers, directors, trustees, and other disqualified persons				الميا
Ë	21	Mortgages and other notes payable (attach schedule)				1.7
Liabilities	22	Other liabilities (describe ► )	1 112	<del></del>		1. 40
	23	Total liabilities (add lines 17 through 22)	1,146	2,33,3		
S		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				
ances	24	· · · · · · · · · · · · · · · · · · ·				
	<u>-</u> -	Unrestricted		<del></del>		
ä	25 26	Permanently restricted		<del></del>		•
Net Assets or Fund Ba	20	Foundations that do not follow SFAS 117, check here ►		-		
교		and complete lines 27 through 31.				147
ō	27	Capital stock, trust principal, or current funds				
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund				-
Se	29	Retained earnings, accumulated income, endowment, or other funds	<del></del>			
Ä	30	Total net assets or fund balances (see instructions)	1137773	447,000		
<u>e</u> t	31	Total liabilities and net assets/fund balances (see	<del></del>	- 117,000		٠,٠
_		instructions)	436,919	449,333		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		al net assets or fund balances at beginning of year-Part II, colu				45
		-of-year figure reported on prior year's return)			1_	437.773
2		er amount from Part I, line 27a			2	6,227
3		er increases not included in line 2 (itemize)			3	3,000
4	Add	d lines 1, 2, and 3			4	447,000
5	Dec	Procese not included in line 2 (itemize)			5	1./-
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30	6	447,000
						Form <b>990-PF</b> (2015)

Part	(a) List and describe the	kind(s) of property sold (e.g., real estate e; 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.)
<u>1a</u>			····			
b_						
<u> </u>						
<u>d</u>		·	<del></del>			
е		40.0	(10.		#1 C	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		ain or (loss) i (f) minus (g)
a						
<u> </u>			-			<u> </u>
<u>c</u> _			· - · · · · · · · · · · · · · · · · · ·			
<u>d</u>				<del></del>		
е	Complete only for accets show	wing gain in column (h) and owned	by the foundation	on 10/21/60		
	Complete only for assets show	_ <del></del>	T			ol (h) gain mínus ot less than -0-) <b>or</b>
	(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	over col	s of col (i) (i) (ii) (iii)		(from col (h))
a				·		
<u>b</u>						
<u>C</u>						
d				·		
е			<u> </u>	<del></del>		
2	Capital gain net income or		also enter in Pa , enter -0- in Pa		2	
3		n or (loss) as defined in sections I, line 8, column (c) (see instru				
	Part I, line 8			}	3	
, Part	V. Qualification Und	er Section 4940(e) for Redu	uced Tax on N	let Investment	Income	
Was t		e this part blank. section 4942 tax on the distribu qualify under section 4940(e). D			base period?	Yes No
1		unt in each column for each ye		•	aking any entries	
Cal	(a) Base period years	(b)		(c) f noncharitable-use a	csets Di	(d) stribution ratio
	endar year (or tax year beginning in)				(00) (0	) divided by col. (c))
	2013				<del></del>	
<del>,</del>	2012		<del></del>	<del></del>		
	2011					······································
	2010			<del></del>		
2	Total of line 1, column (d)				. 2	- ;
3		for the 5-year base period—div				
	number of years the found	lation has been in existence if le	ess than 5 years		. 3	
4	Enter the net value of none	charitable-use assets for 2015 f	from Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b	o)		. 6	<del></del>
7	Add lines 5 and 6				. 7	
8	Enter qualifying distribution If line 8 is equal to or great Part VI instructions.	ns from Part XII, line 4 Iter than line 7, check the box i	 n Part VI, line 1t	o, and complete	. 8 that part using a	1% tax rate. See th

Part \		) instruc	แบบรา			
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)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0			
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
3	Add lines 1 and 2		<u> </u>			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0			
6	Credits/Payments: 2015 estimated tax payments and 2014 overpayment credited to 2015   6a					
a b	2015 estimated tax payments and 2014 overpayment credited to 2015  Exempt foreign organizations—tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868) . 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d		Part of the last o			
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  from 2220 is attached 8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		0			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10		-,			
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11					
Part	VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did i	t Y	Yes No			
	participate or intervene in any political campaign?	1a	X_			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b	×			
	If the answer is "Yes" to 1a or 1b. attach a detailed description of the activities and copies of any materials	5				
	published or distributed by the foundation in connection with the activities.					
C						
d	<ul> <li>Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:</li> <li>(1) On the foundation. ► \$</li> <li>(2) On foundation managers. ► \$</li> </ul>					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-				
C	on foundation managers. ► \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X			
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.					
<b>4</b> a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a	<del>-+&gt;</del>			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	NA			
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 the	.t				
_	conflict with the state law remain in the governing instrument?	6	$X \vdash$			
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	X			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► ○ H10					
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	$\sqrt{1}$			
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	×			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the					
	names and addresses	10	_   X			

Part	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 .
12	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X_
12	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ►			
14	The books are in care of ► Dan J BAUMGARTAIER Telephone no. ► (+19) Cocated at ► 10. Box 9326 STA - A TOLEDO, OH ZIP+4 ► 4360	271	3101	5
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here	2- 0	/JE@	<i>)</i> ▶ □
	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 authorit	у	Yes	1
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	'		
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
ı cı	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):			
	<ul><li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes No</li><li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li></ul>			· -
	disqualified person?			
	<ul> <li>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? □ Yes ⋈ No</li> <li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? □ Yes ⋈ No</li> </ul>			
	(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)?			d Line i
	(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.)			
b		1b	11	A
	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	i		
	6e, Part XIII) for tax year(s) beginning before 2015?			r. 1. 7. see
b				
_	(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	NI	A.
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	▶ 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?			
b				
	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.)	01	Α.	/Λ
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a	<u> </u>	17
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-√a		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 N	∕lay Be R	equire	d (contin	ued)		
5a	During the year did the foundation pay or incur ar			_	_	-			1	
	(1) Carry on propaganda, or otherwise attempt to	o influei	nce legislatio	n (secti	on 4945(e)	)? .	Yes	<b>⊠</b> No		
	(2) Influence the outcome of any specific public		on (see section	on 495	5); or to ca	irry on,				
	directly or indirectly, any voter registration dri	ve?					☐ Yes	⊠ No		
	(3) Provide a grant to an individual for travel, stud	dy, or o	ther similar p	urpose	s?		☐ Yes	⊠ No		
	(4) Provide a grant to an organization other than									
							TYes	⊠ No		
	(5) Provide for any purpose other than religious,									
	purposes, or for the prevention of cruelty to c						☐Yes	⊠ No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ibed in		
	Regulations section 53.4945 or in a current notice r		-			uctions)			5b /	V 119
	Organizations relying on a current notice regarding						N/H.	ightharpoons		! .
C	If the answer is "Yes" to question 5a(4), does the					4 2 . / -				
	because it maintained expenditure responsibility		_			N/.71	CYes	☐ No		
	If "Yes," attach the statement required by Regula									
6a	Did the foundation, during the year, receive any t						_	_		
	on a personal benefit contract?	•	•					⊠ No		
ь	Did the foundation, during the year, pay premium	ns, dire	ctly or indired	tly, on	a personal	benefit	contract	?.	6b_	<u> </u>
<b>-</b> -	If "Yes" to 6b, file Form 8870.						C7.4	<b>53</b>		
7a h	At any time during the tax year, was the foundation a If "Yes," did the foundation receive any proceeds						Yes			1 10
Par	VIII Information About Officers, Direct								7b	V JA
i (ai	and Contractors	.0.0, .	1431003, 11	Juliua	LIOII MIGIIL	igers,	ingin <b>y</b> i	aid Li	inployed	,
1	List all officers, directors, trustees, foundation	n mana	gers and the	eir con	pensation	ı (see ir	struction	ns).		
		(b) Title	e, and average	(c) Cor	npensation	(d) C	Contributions	s to	(e) Expens	e account
	(a) Name and address		rs per week ed to position		ot paid, ter -0-)	emplo and defe	yee benefit erred compe	plans   nsation	other allo	
1)0	J J. BAUMGARINER	^	- · <u>·</u>			· · · - ·	<del></del>			
RC	BOX 8326 TOLEDO, OH	XX.	ESIDENT		0-		ONE	ļ	Non	15
			PRESIDENT		<del></del>		1			<del></del>
Pic	Box A326 TOLEDO,OH	TRE	EASURER	_	0-	$\wedge$	ONE		No	NE :
H	LLY HAUMGARINER					,			4 7	
	PG EDDINGTON CT. JOLFOD, OH	SEC	RETARY		0-	$\square N$	ONE		/\0/	VE
	,					,				
	<u>-</u>									
2	Compensation of five highest-paid employee	es (oth	er than thos	se inclu	ıded on li	ne 1—:	see instr	uctions	s). If nor	e, enter
	"NONE."		,				<del></del>			
	(a) Name and address of each employee paid more than \$50,00	10	(b) Title, and a	verage	(a) Compos		(d) Contribu employee	itions to benefit	(e) Expens	e account,
	(a) Name and address of each employee paid more than \$50,00	10	devoted to pe		(c) Comper	isation	plans and compens	deferred		wances
	Λ 1									<del></del>
	1 Vanz									
	7 10/10									
			Ì	· ·						
							ı			
					<del></del>					
				İ						
							ı			
otal	number of other employees paid over \$50,000 .							. ▶		
	· · ·									

	-
Page	1

`Form 990-PF (2015)

and Contractors (continued)  Five highest-paid independent contractors for professional services (see instructions). If none, enter "NC	NF."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
N /	
TYONE	
al number of others receiving over \$50,000 for professional services	<u> </u>
art IX-A Summary of Direct Charitable Activities	
ust the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	of _
organizations and other beneficiaries served, conferences convened, research papers produced, etc	" Expenses
VAIL MEADOWS - DONATION	
·	 
Aut Out Division Divi	
NW OH'10 SCHOLARSHIP FUND - DONATION	
	<del></del>
WAITE ALUMANI ASSOC - DONATION	
WAITE SCHOLARSHIP, INC DONATION	
·	- <b>-</b>
art IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
]	
$\Lambda I / \Lambda$	
/ Y / J	
?	
All other program-related investments. See instructions	
tal. Add lines 1 through 3	
t Autol Porton Automorphia	

Part		gn τοι	indations,
	see instructions.)  Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<del></del>
1	· · · · · · · · · · · · · · · · · · ·		
	purposes:	4.	9 -
a	Average monthly fair market value of securities	1a	-0-
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
ď	<b>Total</b> (add lines 1a, b, and c)	1d	
е			
_	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3 4	Subtract line 2 from line 1d	3	-0-
4	· · · · · · · · · · · · · · · · · · ·		
_	instructions)	4	
5 6	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	-0-
	Minimum investment return. Enter 5% of line 5	6	-0-
Part	and certain foreign organizations check here $ ightharpoonup$ and do not complete this part.)	ounda	เนอกร
1	Minimum investment return from Part X, line 6	1	
2a			
b	Income tax for 2015. (This does not include the tax from Part VI.)	0.	^ -
c	Distributable amount before adjustments. Subtract line 2c from line 1	2c	-0-
3 4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	-0-
6	Deduction from distributable amount (see instructions)	6	-0-
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	0	
•	line 1	7	-0-
		<u></u>	
Part	XII 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	6,039
b	Program-related investments—total from Part IX-B	1b	- 0,001
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	"	<del></del>
	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	6,039
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>  </del>	
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,039
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

	90-PF (2015)			· · · · · · · · · · · · · · · · · · ·	Page <b>9</b>
Part	XIII Undistributed Income (see instruction	T	(h)	(2)	(4)
1	Distributable amount for 2015 from Part XI, line 7	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
2	Undistributed income, if any, as of the end of 2015:				
2 a	Enter amount for 2014 only			-0/	
a b	Total for prior years: 20 ,20 ,20		-0-		
3	Excess distributions carryover, if any, to 2015:		<u></u>		
а	From 2010				
b	From 2011				
С	From 2012				
d	From 2013	-			
e	From 2014				
f 4	<b>Total</b> of lines 3a through e				
а	Applied to 2014, but not more than line 2a .			-01	
	Applied to undistributed income of prior years (Election required—see instructions)		-0-		
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				-0-
е	Remaining amount distributed out of corpus				·
5	Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)		· ·		-0-
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5			, p	
b	Prior years' undistributed income. Subtract line 4b from line 2b		-0-		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		-01		
е	Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount—see instructions			-0~	
f	Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				-0/
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				
8	required—see instructions)				
9	applied on line 5 or line 7 (see instructions).  Excess distributions carryover to 2016.  Subtract lines 7 and 8 from line 6a				A.m.
10	Analysis of line 9:				
а	Excess from 2011				
b	Excess from 2012				
C	Excess from 2013				
d	Excess from 2014				
e	Excess from 2015				

Page	10
Page	7

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-orm	990-PF	(2015)	

Part 2					)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for				NA	
	•				_ ' ' ' '	3) or 4942(j)(5)
	Check box to indicate whether the four		r operating foundat		4942()(	3) 01 4942()(3)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	#12001	Prior 3 years		(e) Total
	investment return from Part X for	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	
	each year listed					
b	85% of line 2a	<u> </u>	<u> </u>	<u> </u>		
С	Qualifying distributions from Part XII,					
	line 4 for each year listed		<del> </del>	\		
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	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					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
þ	"Endowment" alternative test—enter 2/3 of minimum investment 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 public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	on (Complete th	nis part only if t	he foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-	-see instruction	ns.)			
1	Information Regarding Foundation					
а	List any managers of the foundation	who have contrib	uted more than 29	% of the total cont	ributions received	by the foundation
	before the close of any tax year (but o	only if they have c	ontributed more th	nan \$5,000). (See s	section 507(d)(2).)	
<del></del> -	NONE		<del></del>	·	<del></del>	<del></del>
b	List any managers of the foundation ownership of a partnership or other e					rge portion of the
	NONE			. 5.75 Si gi Satoi ilit		
	Information Regarding Contribution	n, Grant. Gift. Loa	an, Scholarship.	etc Programs:		
_	Check here ► X if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the	foundation makes	gifts, grants, etc.	(see instructions)	to individuals or or	ganizations under
	other conditions, complete items 2a,			`		
а	The name, address, and telephone no	umber or e-mail a	ddress of the pers	on to whom applic	ations should be a	iddressed:
	•		•		-	
b	The form in which applications should	d be submitted an	d information and	materials they sho	ould include:	
С	Any submission deadlines:			<del>,</del>		
d	Any restrictions or limitations on av	wards, such as b	by geographical a	reas, charitable fi	elds, kinds of ins	titutions, or other

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or status of **Amount** any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year 35 DONATION SYLVANIA AREA FAMILY SERV. COVENANT HOUSE NATIONAL WWIL MUSEUM HOSPICE OF NW OHIO DONATION DONATION DONATION DONATIONS MAYO CLINIC DONATION 1/ALL MEADOWS DONATION MDA 100 DONATION UT FOUNDATION DONATION MAYO CHUIC 1,000 DONATION NW OHIO SCHOLARSHIP FUND NOW OHIO FLOSPICE 50 DONATION 100 DONATION ST JUDES HOSBITAL 250 DONATION MAYO CLINIC NW OHIO SCHOLARSHIP FLAD 250 DONATION CALVIN CHURCH WAKE ALUMNI ASSOC DONATION 1:000 DONATION 300 DONATION MAYO CLINIC WATTE SCHOLARSHIP, INC. 500 DONATION Approved for future payment

Pa	rt XVI-	-A Analysis of Income-Producing Ac	tivities				
Enter gross amounts unless otherwise indicated.		Unrelated bus	siness income	Excluded by section 512, 513, or 514		(e)	
	_		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
1	_	ram service revenue:				<del></del>	
	а b				<del> </del>		
	° –		<del></del>		ł	<del></del>	
	ď –				<del>                                     </del>		
	e —			<del></del>	<del></del>		
	f -				<del> </del>		
	g Fe	ees and contracts from government agencies			<del>                                     </del>		
2	-	bership dues and assessments		<del></del>	<del> </del>		
3		est on savings and temporary cash investments			514	1	
4		ends and interest from securities			1 514	14.078	
5		ental income or (loss) from real estate:					
_		ebt-financed property					
		ot debt-financed property					
6		ental income or (loss) from personal property					
7		r investment income			514	(1501)	
8	Gain o	or (loss) from sales of assets other than inventory				(1)	
9	Net ir	ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
11	Other	r revenue: a					
	b						
	c						
	ď						
	е _						
12	Subto	otal. Add columns (b), (d), and (e)	المواد دران ويؤم كالمارات		Language Company	12,578	
						13 15	2,570
<u> </u>		sheet in line 13 instructions to verify calculation	<u> </u>				<u> </u>
	irt XV ne No.						
LII	e No.  ▼	Explain below how each activity for which accomplishment of the foundation's exempt pu	income is report poses (other that	rted in column n by providing fu	e) of Part XV) nds for such pure	I-A contributed loses) (See instru	mportantly to the ctions )
	<u> </u>						
					<del></del>	<del></del> -	<del></del>
		1 - N / A				<u> </u>	
	·····	<del>                                     </del>				· <del></del>	·
		<del> </del>		<del></del>			
						·-··	
			<del></del>				

Part	XVII		n Regarding Tran	sfers To	and Transa	ctions and	Relationshi	ps With N	lonchar	itable	g
	D: 1.11		ganizations					المال المالية		Va	s No
1		on 501(c) of the	irectly or indirectly e Code (other than							re	S NO
а	Transfe	rs from the rep	orting foundation to	a noncha	ritable exemp	t organizatio	n of:				
	(1) Cas	h							[	1a(1)	X
	(2) Othe	er assets .							[	1a(2)	X
b	Other tr	ansactions:									
			a noncharitable exe						[	1b(1)	X
			ts from a noncharit						[	1b(2)	X
	•		equipment, or other						,	1b(3)	X_
	-		rangements						,	1b(4)	X
		ns or loan gua							•	1b(5)	X
			rvices or membersh	•	-					1b(6)	<del>  X</del>
C			quipment, mailing li							1c	<u> </u>
d	If the a	nswer to any o	of the above is "Ye	s," comple	te the following	ng schedule.	Column (b) s	should alwa	ays show	the fair	market
			ther assets, or servi on or sharing arrang								
/=\		Amount involved	(c) Name of nonc		<del></del>						
(a) Line	e no (b)	Amount involved	(c) Name of nonc	naritable exen	npt organization	(a) Des	cription of transfer	rs, transaction	is, and shar	ing arrange	ments
					<del> </del>		<del></del>			<del></del>	
	<del>-   -</del>										
	<del></del>		<b>A</b> 1	1 ~			<del></del>	<del></del>			
				<del>/ 11</del>				<del></del>			
			7 7	<del></del>							
			<u> </u>		=-						<del></del>
									<del></del>		
						-				=	
			*	~ ·	· · · · · · · · · · · · · · · · · · ·						
							······································				
									_		
							· · · · · · · · · · · · · · · · · ·				
2a			ectly or indirectly af					ot organiza	tions		
			501(c) of the Code (c		section 501(c)	(3)) or in sect	tion 52/?			Yes [	] No
<u>b</u>		<del></del>	following schedule			<del>.</del>	1			<del></del>	
		(a) Name of organ	ization	(1	b) Type of organiz	ation		(c) Description	n of relations	ship	
		/1 ^					<del>-</del>				
		<del>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </del>					<del> </del>				
		<del>-13   -11</del>							-		
						· · · · · · · · · · · · · · · · · · ·	<del></del>				<del></del>
	Under p	enalties of perjury, I	declare that I have examine	ı ed this return, i	ncluding accompar	lying schedules a	nd statements, and	to the best of r	my knowledo	e and belief	, it is true.
Sign		and complete. Decl	aration of preparer (other th	an taxpayer) is	based on all inform	ation of which pro	eparer has any knov	wledge.		S discuss th	
Here	N X	1 Judas	Danne at	they 1	5/15/16)	REA	SURER		with the pr	eparer show	n below
		ure of officer or trus	stee		Date	Title	<del> </del>	<u> </u>	(see instruct	tions)? 🔲 <b>Y</b> e	s⊟No
Paid		rint/Type preparer		Preparer's	signature	لہ ر	Date	Check	/ IVI if I	TIN	
Prep	aror E	DWARD M. Z	IEMIANSKI CPA	Lourn	DIT. Yeen	reaster [	Pa 5-6-1	6 self-er	mployed (	30022	9664
Use	arei -	irm's name			_//			Firm's ElN ▶	4. 1	97318	
	Oilly	irm's address ▶	<ul> <li>Edward M Ziemians</li> <li>5650 West Central A</li> </ul>		$\sim Z$				419)5	79-01	17
			Toledo, OH 43615	TOTAL SIEC	-			•	Fo	m 990-F	<b>PF</b> (2015)

	BAUMGARTINER FAMILY FOUNDATION	34-1908139
	P.O. Box 8326	FORM 990-8F
	TOLEDO, OH 43605-0376	P015
	BAGE 1, BART I - LINE 16b - ACCOUNTING F	EES
	PREPARATION OF FORM 990-8F	#550
·····		
·		
	PAGE 1, BART I - LINE 16 C - OTHER PROFESSIO	ONAL FEES
	SECRETARY OF STATE	# 100
	BAGE 1, BART T- LINE 18 - TAXES	) I-
	FOREIGN TAX PAID	<b></b>
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BAUMGARINER FAMILY FOUNDATION	34-19	08139	
B.O. BOX 8326		990-8F	
TOLEDO, OH 43605-0326	2015		
		-	
BAGE P, BART II - LINE 13- INVESTMENTS END OF YEAR			
	BOOK VALUE	FMV	
336 SH NISOURCE TNC. 1750 SH BWX TECHNOLOGIES CO 215H URETERRED NISOURCE INC. 357 SH COLUMBIA BIFELING GRP INC	<sup>#</sup> 9,666	# 6,555	
215 H PRETERRED NISOURCE INC.		23,828 410 7,140	
1300 SH EXELON CORP 1200 SH EXXON MOBIL CORP	10,080	10553	
3200 SH UNITED HEALTH GROUP INC.	76,144	15,590 376,448	
300 SH ENERGLUS RESOURCES FOTR	14,801	7,026	
100054 URBAN OUTFITTERS INC.	30,910	22,750	
1448H CONOCORHILLIBS	9,866	6,723	
1500SH MCDERMOTT INTL INC.	37,075	5,025	
300SH ABERCROMBIE & FITCH CO.	23,991	18,100	
500SH ELECTRONICS FOR TMAGING	11,240	23,370	
LOOSH STEEL DINAMICS INC.	49,485	35,740	
1505H CHINA PETROLEUM & CHEM	13,501	11,696	
VOOSH CNOOL LTD-ADR	13,174	10,438	
1500SH GOLDCORP INC.	19,140	5,780	
1000SH SINOVAC BIOTECH LTD	6,100	5,720	
BOOSH ALTRIA GROUP INC.	6,246	17,463	
750SH BABCOCK & WILCOX CO.	1,867	7,826	
1300SH ISHARES MSCI BRAZIL INDEX	19,984	6204	
2055H TEUA BHARMACEUTICAL ADR INDS LT	1) 6158 4273	13,456 14,142	
100 SH VANGUARD HEALTH CARE REIT 300 SH PHILLY MORRIS INTL INC.	D 6158 4273 11,725 25,092 835 7369	13,7288 26,373 5,890	
17254 CHILLIES 66	835 7369	5,890 4,613 861	
225H CST BRANDS INC 5005H CEPAR FAIR LP	23,915	27,920	
	#431,037	\$714,928	