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153329

Form **990-PF****Return of Private Foundation**

OMB No 1545-0052

Department of the Treasury  
Internal Revenue Service

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 separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf)**2015**

Open to Public Inspection

For calendar year 2015 or tax year beginning

, 2015, and ending

, 20

Name of foundation

ALBERT W. &amp; EDITH V. FLOWERS CHARITABLE

Number and street (or P.O. box number if mail is not delivered to street address)

Room/suite

106 SOUTH MAIN STREET, STE 16

City or town, state or province, country, and ZIP or foreign postal code

AKRON, OH 44308

A Employer identification number

34-6608643

B Telephone number (see instructions)

330-384-7301

C If exemption application is pending, check here. ☐D 1 Foreign organizations, check here. ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

G Check all that apply:

☐ Initial return☐ Final return☐ Address change☐ Initial return of a former public charity☐ Amended return☐ Name change

H Check type of organization:

☐ Section 501(c)(3) exempt private foundation☒ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at

end of year (from Part II, col. (c), line

16) \$ 2,389,442.

J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify)

(Part I, column (d) must be on cash basis.)

**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)				
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	61,989.	61,989.		STMT 1
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	63,114.			
b Gross sales price for all assets on line 6a	909,628.			
7 Capital gain net income (from Part IV, line 2)		63,114.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	125,103.	125,103.		
13 Compensation of officers, directors, trustees, etc.	28,312.	14,156.		14,156.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule) STMT 3	1,000.	500.	NONE	500.
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions) STMT 4	4,345.	402.		
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) STMT 5	2,018.	1,818.		2,018.
24 Total operating and administrative expenses. Add lines 13 through 23.	35,675.	16,876.	NONE	16,674.
25 Contributions, gifts, grants paid	112,050.			112,050.
26 Total expenses and disbursements. Add lines 24 and 25	147,725.	16,876.	NONE	128,724.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-22,622.			
b Net investment income (if negative, enter -0-)		108,227.		
c Adjusted net income (if negative, enter -0-)				

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Revenue

Operating and Administrative Expenses



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing . . . . .	346.	222.	222.
	2	Savings and temporary cash investments . . . . .	51,646.	152,541.	152,541.
	3	Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments - U.S. and state government obligations (attach schedule) . . . . .		150,000.	150,347.
	b	Investments - corporate stock (attach schedule) . . . . .	1,067,736.	929,719.	1,110,883.
	c	Investments - corporate bonds (attach schedule) . . . . .	1,150,882.	1,015,000.	975,449.
	11	Investments - land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) ▶			
	12	Investments - mortgage loans . . . . .			
	13	Investments - other (attach schedule) . . . . .			
	14	Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) ▶			
15	Other assets (describe ▶ )				
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .	2,270,610.	2,247,482.	2,389,442.	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons. .			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
22	Other liabilities (describe ▶ )				
23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		NONE		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>				
	27	Capital stock, trust principal, or current funds . . . . .	2,270,610.	2,247,482.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .			
	29	Retained earnings, accumulated income, endowment, or other funds . .			
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	2,270,610.	2,247,482.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	2,270,610.	2,247,482.		

**Part 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) . . . . .	1	2,270,610.
2	Enter amount from Part I, line 27a . . . . .	2	-22,622.
3	Other increases not included in line 2 (itemize) ▶ 2014 INCOME POSTED TO 2015	3	1,897.
4	Add lines 1, 2, and 3 . . . . .	4	2,249,885.
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 9	5	2,403.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . . .	6	2,247,482.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 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.)
<b>1a PUBLICLY TRADED SECURITIES</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
<b>a</b> 909,628.		846,514.	63,114.		
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
<b>a</b>			63,114.		
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2</b> Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			<b>2</b>	63,114.	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 . . . . .			<b>3</b>		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	123,588.	2,574,271.	0.048009
2013	118,105.	2,503,413.	0.047178
2012	116,125.	2,451,949.	0.047360
2011	118,798.	2,471,228.	0.048072
2010	112,267.	2,401,413.	0.046750
<b>2</b> Total of line 1, column (d) . . . . .			0.237369
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .			0.047474
<b>4</b> Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 . . . . .			2,497,950.
<b>5</b> Multiply line 4 by line 3 . . . . .			118,588.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			1,082.
<b>7</b> Add lines 5 and 6 . . . . .			119,670.
<b>8</b> Enter qualifying distributions from Part XII, line 4 . . . . . 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.			128,724.


**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	1,082.
c 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-)		2	
3 Add lines 1 and 2 . . . . .		3	1,082.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	NONE
5 <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	1,082.
6 Credits/Payments:			
a 2015 estimated tax payments and 2014 overpayment credited to 2015 . . . . .	6a	3,324.	
b Exempt foreign organizations - tax withheld at source . . . . .	6b	NONE	
c Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	NONE	
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d . . . . .	7	3,324.	
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9 <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9		
10 <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	2,242.	
11 Enter the amount of line 10 to be: <b>Credited to 2016 estimated tax</b> ▶ 1,084. <b>Refunded</b> ▶	11	1,158.	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.		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 . . . . .		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .		X
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		X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ OH		
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 . . . . .		X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		X

**Part VII-A Statements Regarding Activities (continued)**

	Yes	No
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	X
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	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13	X
14 The books are in care of <u>FirstMerit Bank, NA</u> Telephone no. <u>(330) 384-7301</u> Located at <u>106 S MAIN ST, STE 500, AKRON, OH</u> ZIP+4 <u>44308</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 . . . . .	15	X
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? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country <u></u>	16	X

**Part 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? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here <u></u>	1b	X
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	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)): a 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? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u></u> 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.) . . . . . c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u></u>	2b	X
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ **5b**Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **6b** ☒

If "Yes" to 6b, file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ **7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
FIRST MERIT BANK NA	Trustee			
106 S Main St #500, Akron, OH 44308	2	28,312.	-0-	-0-
Ronald B. Tynan, Sr	Chairman			
3021 12th Street, NW, Massillon, OH 44646	1	-0-	-0-	-0-
Charles Tyburski	Comm. Member			
1000 United Bank Plaza 220 Market S, Canton, OH 44702	1	-0-	-0-	-0-
F. E. McCullough, CPA	Comm. Member			
3637 McDowell St, NE, North Canton, OH 44721	1	-0-	-0-	-0-

**2** Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

**Total** number of other employees paid over \$50,000 ☐ **NONE**

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services** (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
Total number of others receiving over \$50,000 for professional services . . . . .		NONE

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NONE	
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 the tax year on lines 1 and 2.	Amount
1 NONE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3 . . . . .	




**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	2,461,832.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	74,158.
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	NONE
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	2,535,990.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . . <b>1e</b>		
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	NONE
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	2,535,990.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	38,040.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	2,497,950.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	124,898.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	124,898.
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5 . . . . . <b>2a</b>		1,082.
<b>b</b>	Income tax for 2015. (This does not include the tax from Part VI.) . . . . . <b>2b</b>		
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	1,082.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	123,816.
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	NONE
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	123,816.
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	NONE
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	123,816.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	128,724.
<b>b</b>	Program-related investments - total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	NONE
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	NONE
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	NONE
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	128,724.
<b>5</b>	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) . . . . .	<b>5</b>	1,082.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	127,642.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
<b>1</b> Distributable amount for 2015 from Part XI, line 7 . . . . .				123,816.
<b>2</b> Undistributed income, if any, as of the end of 2015:				
<b>a</b> Enter amount for 2014 only. . . . .			111,959.	
<b>b</b> Total for prior years. 20 <u>13</u> , 20 <u>  </u> , 20 <u>  </u> . . . . .		NONE		
<b>3</b> Excess distributions carryover, if any, to 2015:				
<b>a</b> From 2010 . . . . .	NONE			
<b>b</b> From 2011 . . . . .	NONE			
<b>c</b> From 2012 . . . . .	NONE			
<b>d</b> From 2013 . . . . .	NONE			
<b>e</b> From 2014 . . . . .	NONE			
<b>f</b> Total of lines 3a through e . . . . .	NONE			
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4: ► \$ <u>128,724.</u>				
<b>a</b> Applied to 2014, but not more than line 2a . . . . .			111,959.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions) . . . . .		NONE		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .	NONE			
<b>d</b> Applied to 2015 distributable amount. . . . .				16,765.
<b>e</b> Remaining amount distributed out of corpus. . . . .	NONE			
<b>5</b> Excess distributions carryover applied to 2015. (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	NONE			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		NONE		
<b>c</b> 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 . . . . .		NONE		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions . . . . .		NONE		
<b>e</b> Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .				
<b>f</b> Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016. . . . .				107,051.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .	NONE			
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) . . . . .	NONE			
<b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	NONE			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2011 . . . . .	NONE			
<b>b</b> Excess from 2012 . . . . .	NONE			
<b>c</b> Excess from 2013 . . . . .	NONE			
<b>d</b> Excess from 2014 . . . . .	NONE			
<b>e</b> Excess from 2015 . . . . .	NONE			



**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

<div>Recipient</div> <div>Name and address (home or business)</div>	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>  SEE STATEMENT 23				112,050.
<b>Total</b> ..... ► <b>3a</b>				112,050.
<b>b Approved for future payment</b>				
<b>Total</b> ..... ► <b>3b</b>				

(e)  
Related or exempt  
function income  
(See instructions.)

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

NOT APPLICABLE

**Part XVII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- |   |              |  |            |           |
|---|--------------|--|------------|-----------|
| <b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  |              |  | <b>Yes</b> | <b>No</b> |
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:   |              |  |            |           |
| (1) Cash . . . . .  | <b>1a(1)</b> |  |            | X         |
| (2) Other assets . . . . .  | <b>1a(2)</b> |  |            | X         |
| <b>b</b> Other transactions:  |              |  |            |           |
| (1) Sales of assets to a noncharitable exempt organization . . . . .  | <b>1b(1)</b> |  |            | X         |
| (2) Purchases of assets from a noncharitable exempt organization . . . . .  | <b>1b(2)</b> |  |            | X         |
| (3) Rental of facilities, equipment, or other assets . . . . .  | <b>1b(3)</b> |  |            | X         |
| (4) Reimbursement arrangements . . . . .  | <b>1b(4)</b> |  |            | X         |
| (5) Loans or loan guarantees . . . . .  | <b>1b(5)</b> |  |            | X         |
| (6) Performance of services or membership or fundraising solicitations . . . . .  | <b>1b(6)</b> |  |            | X         |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .   | <b>1c</b>    |  |            | X         |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |              |  |            |           |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign  
Here**

BY Brenda L. Maubray  
Vice President, Trust Officer  
Signature of officer or trustee

5-4-16

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

---

Print/Type preparer's name

JOSEPH B HULL

Preparer's signature.

W B Will

Date	
------	--

04/14/2016

Check <input type="checkbox"/> if self-employed
---

PTIN

P00135850

Firm's name ▶ ERNST & YOUNG U.S. LLP

Firm's EIN ▶ 34-6565596

Firm's address ► 800 YARD STREET, STE 200  
GRANDVIEW HEIGHTS, OH

Phone no 614-232-7290

Form **990-PF** (2015)

ALBERT W. &amp; EDITH V. FLOWERS CHARITABLE

34-6608643

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
AMERICAN EXPRESS CO	181.	181.
AMGEN INC	142.	142.
AMPHENOL CORP	108.	108.
ANHEUSER BUSCH	2,525.	2,525.
APACHE CORP COMMON	150.	150.
APPLE COMPUTER INC	560.	560.
C R BARD INC	78.	78.
BLACKROCK INC CL A	706.	706.
CAPITAL ONE FINANCIAL	312.	312.
CHEVRONTXACO CORP	701.	701.
CITIGROUP INC	1,219.	1,219.
COSTCO WHOLESALE CORP	720.	720.
DANAHER CORP	93.	93.
WALT DISNEY CO	89.	89.
E M C CORPORATION	89.	89.
ECOLAB INC	169.	169.
EXXON MOBIL CORP	529.	529.
FFCB	5,625.	5,625.
FHLB	1,078.	1,078.
FEDERATED INST HI YLD BOND FUND	4,693.	4,693.
FED SHORT TERM INC FUND #65	2,179.	2,179.
FEDERATED SHORT-TERM INC-Y	214.	214.
FEDER TOTAL RETURN BOND FUND #328	6,562.	6,562.
FEDERATED TOTAL RETRN BND-R6	516.	516.
FIRSTMERIT PRIVATEBANK CASH ACCOUNT	71.	71.
HOME DEPOT INC	401.	401.
HONEYWELL INTERNATIONAL INC	280.	280.
INTUIT	42.	42.
ISHARES RUSSELL MIDCAP ETF	4,559.	4,559.
ISHARES TRUST S&P SM CAP 600	2,149.	2,149.
JP MORGAN CHASE & CO	108.	108.
JOHNSON & JOHNSON CO	457.	457.

CVW254 L668 04/14/2016 16:07:13

ALBERT W. &amp; EDITH V. FLOWERS CHARITABLE

34-6608643

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES  
=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-----	-----	-----
JOHNSON CONTROLS INC.	276.	276.
M & T BANK CORP	133.	133.
MCKESSON HBOC INC	29.	29.
NIKE INC CLASS B	326.	326.
NORTHROP GRUMMAN CORPORATION	35.	35.
OPPENHEIMER INTL BOND FD-I	318.	318.
OPPENHEIMER SR FLOAT RATE-I	370.	370.
ORACLE SYSTEMS CORP.	218.	218.
PPG INDUSTRIES INC	255.	255.
PROCTER & GAMBLE CO	419.	419.
QUALCOMM INC	78.	78.
SPDR DOW JONES REIT ETF	1,351.	1,351.
SCHLUMBERGER LTD	238.	238.
STARBUCKS CORP	285.	285.
TEMPLETON GLOBAL BOND FUND-AD	1,041.	1,041.
THERMO ELECTRON CORP	90.	90.
TRAVELERS COMPANIES INC	331.	331.
US BANCORP	420.	420.
UNION PACIFIC CORP	471.	471.
UNITED TECHNOLOGIES CORP	404.	404.
V F CORP	268.	268.
VANGUARD FTSE DEVELOPED MARKETS ETF	7,441.	7,441.
VANGUARD INFLATION PROTECTED SECURITIES	402.	402.
VANGUARD INTERMEDIATE TERM CORP FD ADM #	9,295.	9,295.
VISA INC	190.	190.
	-----	-----
TOTAL	61,989.	61,989.
	=====	=====



ALBERT W. & EDITH V. FLOWERS CHARITABLE

34-6608643

FORM 990PF, PART I - ACCOUNTING FEES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
TAX PREPARATION FEE (NON-ALLOC	1,000.	500.		500.
TOTALS	1,000.	500.	NONE	500.
	=====	=====	=====	=====

ALBERT W. & EDITH V. FLOWERS CHARITABLE

34-6608643

FORM 990PF, PART I - TAXES  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
FEDERAL TAX PAYMENT - PRIOR YE	619.	
FEDERAL ESTIMATES - PRINCIPAL	3,324.	
FOREIGN TAXES ON QUALIFIED FOR	296.	296.
FOREIGN TAXES ON NONQUALIFIED	106.	106.
	-----	-----
TOTALS	4,345.	402.
	=====	=====

ALBERT W. & EDITH V. FLOWERS CHARITABLE

34-6608643

FORM 990PF, PART I - OTHER EXPENSES  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	CHARITABLE PURPOSES -----
OTHER ALLOCABLE EXPENSE-PRINCI	200.		200.
OTHER NON-ALLOCABLE EXPENSE -	1,818.	1,818.	1,818.
TOTALS	----- 2,018. =====	----- 1,818. =====	----- 2,018. =====

ALBERT W. & EDITH V. FLOWERS CHARITABLE

34-6608643

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS  
=====

DESCRIPTION  
-----

ENDING  
BOOK VALUE  
-----

ENDING  
FMV  
---

US GOV. AGENCIES

150,000.

150,347.

TOTALS

150,000.

150,347.

=====



ALBERT W. & EDITH V. FLOWERS CHARITABLE  
FORM 990PF, PART II - CORPORATE STOCK  
=====

34-6608643

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
EQUITIES	929,719.	1,110,883.
	-----	-----
TOTALS	929,719.	1,110,883.
	=====	=====

ALBERT W. & EDITH V. FLOWERS CHARITABLE  
FORM 990PF, PART II - CORPORATE BONDS  
=====

34-6608643

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV -----
FIXED	1,015,000.	975,449.
	-----	-----
TOTALS	1,015,000.	975,449.
	=====	=====



ALBERT W. &amp; EDITH V. FLOWERS CHARITABLE

34-6608643

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

=====

DESCRIPTION

AMOUNT

-----

-----

2015 INCOME POSTED TO 2016  
ROUNDING2,399.  
4.

TOTAL

-----  
2,403.

=====



ALBERT W. & EDITH V. FLOWERS CHARITABLE  
FORM 990PF, PART XV - LINES 2a - 2d  
=====

34-6608643

## RECIPIENT NAME:

Brenda Moubray

## ADDRESS:

FirstMerit Bank, NA

Akron, OH 44308

## RESTRICTIONS OR LIMITATIONS ON AWARDS:

Awards generally granted to qualifying organizations in  
Stark county.





ALBERT W. &amp; EDITH V. FLOWERS CHARITABLE

34-6608643

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

## RECIPIENT NAME:

OHIO OUTDOOR HISTORICAL DRAMA  
ASSOCIATION TRUMPET IN THE LAND

## ADDRESS:

PO BOX 450  
NEW PHILADELPHIA, OH 44663

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

HISTORY EDUCATION FOR 3RD GRADERS

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

STARK COUNTY HISTORICAL SOCIETY  
MCKINLEY PRESIDENTIAL LIBRARY

## ADDRESS:

800 MCKINLEY MONUMENT DRIVE, NW  
CANTON, OH 44708

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

NEW SHELVING TO INCREASE STORAGE

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 4,000.

## RECIPIENT NAME:

CENTRAL CATHOLIC HIGH SCHOOL

## ADDRESS:

4824 WEST TUSCARAWAS STREET  
CANTON, OH 44708

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

ALUMNI CHALLENGE TO PROVIDE TUITION ASSISTANC

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.



ALBERT W. & EDITH V. FLOWERS CHARITABLE 34-6608643  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

HERITAGE CHRISTIAN SCHOOLS OF  
OHIO INC.

## ADDRESS:

2107 6TH STREET, SW  
CANTON, OH 44706

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

OFFSET FUNDING GAP FOR 2 STUDENTS

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

## RECIPIENT NAME:

INVENT NOW INC.

## ADDRESS:

3701 HIGHLAND PARK NW  
NORTH CANTON, OH 44720

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CAMP INVENTION ASSISTANCE

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,000.

## RECIPIENT NAME:

STARK STATE COLLEGE FOUNDATION

## ADDRESS:

6200 FRANK AVE., NW  
NORTH CANTON, OH 44720

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

A & E FLOWERS SCHOLARSHIP FUND

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

E150162

ALBERT W. &amp; EDITH V. FLOWERS CHARITABLE

34-6608643

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

## RECIPIENT NAME:

AKRON CANTON REGIONAL FOODBANK

## ADDRESS:

350 OPPORTUNITY PARKWAY

AKRON, OH 44307

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

## RECIPIENT NAME:

MEALS ON WHEELS OF STARK AND

WAYNE COUNTIES

## ADDRESS:

2363 NAVE ST., SE

MASSILLON, OH 44646

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT OF ORGANIZATION

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 3,000.

## RECIPIENT NAME:

PEGASUS FARM

## ADDRESS:

7490 EDISON ST., NE

HARTVILLE, OH 44632

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

THERAPUTIC RIDING FOR SPECIAL NEEDS CHILDREN

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

XXXXXX

ALBERT W. & EDITH V. FLOWERS CHARITABLE 34-6608643  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

UNITED SERVICES ORGANIZATIONS INC.

## ADDRESS:

PO BOX 96860

WASHINGTON, DC 20077

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT OF ORGANIZATION

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

CANTON EX-NEWBOYS ASSOCIATION

## ADDRESS:

PO BOX 20124

CANTON, OH 44701

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 6,000.

## RECIPIENT NAME:

SALVATION ARMY - ALLIANCE

## ADDRESS:

PO BOX 2780

ALLIANCE, OH 44601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 6,000.



ALBERT W. &amp; EDITH V. FLOWERS CHARITABLE

34-6608643

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

## RECIPIENT NAME:

SALVATION ARMY - CANTON

## ADDRESS:

420 MARKET AVENUE SOUTH  
CANTON, OH 44702

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 6,000.

## RECIPIENT NAME:

SALVATION ARMY - MASSILLON

## ADDRESS:

143 FIRST STREET SE  
MASSILLON, OH 44646

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 6,000.

## RECIPIENT NAME:

ST JOAN OF ARC CATHOLIC  
CHURCH FOOD BANK

## ADDRESS:

4940 TUSCARAWAS WEST  
CANTON, OH 44708

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT FOR FOOD BANK

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 7,000.

~~RECEIVED~~

ALBERT W. & EDITH V. FLOWERS CHARITABLE 34-6608643  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

SISTERS OF CHARITY HEALTH SYSTEM

## ADDRESS:

1718 CLEVELAND AVENUE, NW

CANTON, OH 44703

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

EARLY CHILDHOOD RESOURCE CENTER

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

WALSH UNIVERSITY

## ADDRESS:

2020 EAST MAPLE STREET

NORTH CANTON, OH 44720

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

ADVANCED CHEMISTRY LAB EQUIPMENT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

## RECIPIENT NAME:

NATIONAL MULTIPLE SCLEROSIS SOCIETY

OHIO BUCKEYE CHAPTER

## ADDRESS:

6155 ROCKSIDE ROAD, SUITE 202

INDEPENDENCE, OH 44131

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

FOR RESPITE CARE

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 500.

[REDACTED]

ALBERT W. & EDITH V. FLOWERS CHARITABLE 34-6608643  
'FORM' 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

## RECIPIENT NAME:

FIRST TEE OF CANTON INC

## ADDRESS:

2525 25TH STREET

CANTON, OH 44705

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

GIRLS SCOUTS OF NE OHIO

## ADDRESS:

ONE GIRL SCOUT WAY

MACEDONIA, OH 44056

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT OF ORGANIZATION

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

HAMMER &amp; NAILS INC.

## ADDRESS:

PO BOX 8224

CANTON, OH 44711

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

HELP STRUGGLING HOMEOWNERS WITH REPAIRS

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

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ALBERT W. & EDITH V. FLOWERS CHARITABLE 34-6608643  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
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## RECIPIENT NAME:

YMCA OF CENTRAL STARK COUNTY

## ADDRESS:

1201 30TH AVENUE, SUITE 200

CANTON, OH 44709

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CAMPER SUPPORT &amp; GENERAL FUND DRIVE

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,200.

## RECIPIENT NAME:

YOUNG WOMEN'S CHRISTIAN

ASSOCIATION OF CANTON, OHIO

## ADDRESS:

231 SIXTH STREET NE

CANTON, OH 44702

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

STARK COUNTY WOMEN'S HALL OF FAME

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

MALONE UNIVERSITY

## ADDRESS:

2600 CLEVELAND AVENUE, NW

CANTON, OH 44709

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SCHOLARSHIP ENDOWMENT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 8,350.



~~SECRET~~

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FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

34-6608643

## RECIPIENT NAME:

ARTS IN STARK

## ADDRESS:

900 CLEVELAND AVE., NW  
CANTON, OH 44701

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENIUS PROJECT OF THE SMARTS PROGRAM

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 3,000.

## RECIPIENT NAME:

ALZHEIMER'S DISEASE AND RELATED  
DISORDER ASSOCIATION INC.

## ADDRESS:

408 9TH STREET, NW, SUITE 1610  
CANTON, OH 44707

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

PROGRAMS &amp; SERVICES FOR ALZHEIMERS PATIENTS

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

CHILDREN'S HOSPITAL MEDICAL CENTER  
OF AKRON

## ADDRESS:

ONE PERKINS SQUARE  
AKRON, OH 44308

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

EMERGENCY FUNDING FOR KIDS WITH CANCER

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.



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FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
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## RECIPIENT NAME:

EMBRACING FUTURES INC.

## ADDRESS:

50 SOUTH MAIN STREET, SUITE LL100  
AKRON, OH 44308

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

ORTHODONTIC CARE FOR CHILDREN

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

BOYS AND GIRLS CLUB OF MASSILLON

## ADDRESS:

730 DUNCAN STREET, SW  
MASSILLON, OH 44647

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

## RECIPIENT NAME:

CHILDRENS'S DYSLEXIC CENTER OF CANTON

## ADDRESS:

836 MARKET AVE NORTH  
CANTON, OH 44702

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 3,000.



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FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

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## RECIPIENT NAME:

QUEST RECOVERY & PREVENTION  
SERVICES

## ADDRESS:

1341 MARKET AVE. NORTH  
CANTON, OH 44714-2675

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

RRNOVATION OF MALE RESIDENTIAL FACILITY

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

EN-RICH-MENT

## ADDRESS:

4110 MEADOWVIEW DR, NW  
CANTON, OH 44718

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

FREE MUSIC LESSONS FOR UNDERSERVED KIDS

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 3,000.

## RECIPIENT NAME:

ST MICHAEL SCHOOL

## ADDRESS:

3431 ST MICHAEL BLVD, NW  
CANTON, OH 44718

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

MEN WHO COOK FUNDRAISER

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

FORM 990

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FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
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## RECIPIENT NAME:

OHIOGUIDESTONE

## ADDRESS:

202 E BAGLEY RD

BEREA, OH 44017

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

MENTAL HEALTH COUNSELING PROGRAMS

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

PRESCRIPTION ASSISTANCE NETWORK

OF STARK COUNTY

## ADDRESS:

408 NINTH ST, SW

CANTON, OH 44707

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

PRESCRIPTION ACCESS PROGRAM FOR NEEDY

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,000.

## RECIPIENT NAME:

CANTON CALVARY MISSION

## ADDRESS:

1345 GIBBS AVE NE

CANTON, OH 44705

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL OPERATING EXPENSES

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,000.



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FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

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## RECIPIENT NAME:

PREGNANCY SUPPORT CENTER

## ADDRESS:

4500 22ND ST NW

CANTON, OH 44708

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

FREE MEDICAL, EDUCATIONAL &amp; COUNSELING

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,000.

TOTAL GRANTS PAID:

112,050.

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