



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



**2015**

Form **990-PF**Department of the Treasury  
Internal Revenue Service**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 separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf)

OMB No. 1545-0052

**2015**

Open to Public Inspection

For calendar year 2015 or tax year beginning , 2015, and ending , 20

Name of foundation **GLENN R. & ALICE V. BOGGESS MEMORIAL FOUNDATION**

A Employer identification number

34-6890256

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

Room/suite

B Telephone number (see instructions)

106 SOUTH MAIN STREET, STE 16

330-384-7301

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

AKRON, OH 44308

G Check all that apply:

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

J Accounting method: ☒ Cash ☐ Accrual

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

☐ Other (specify)

16) \$ 1,761,101.

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

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 . . . . . ☐**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)
<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)				
<b>2</b> Check <input type="checkbox"/> if the foundation is not required to attach Sch. B. . . . .				
<b>3</b> Interest on savings and temporary cash investments				
<b>4</b> Dividends and interest from securities . . . . .	39,067.	39,067.		STMT 1
<b>5a</b> Gross rents . . . . .				
<b>b</b> Net rental income or (loss)				
<b>6a</b> Net gain or (loss) from sale of assets not on line 10	55,928.			
<b>b</b> Gross sales price for all assets on line 6a 420,286.				
<b>7</b> Capital gain net income (from Part IV, line 2) .		55,928.		
<b>8</b> Net short-term capital gain . . . . .				
<b>9</b> Income modifications . . . . .				
<b>10a</b> Gross sales less returns and allowances . . . . .				
<b>b</b> Less: Cost of goods sold . . . . .				
<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
<b>11</b> Other income (attach schedule) . . . . .				
<b>12</b> Total. Add lines 1 through 11 . . . . .	94,995.	94,995.		
<b>13</b> Compensation of officers, directors, trustees, etc. . .	33,593.	16,797.		16,797.
<b>14</b> Other employee salaries and wages . . . . .				
<b>15</b> Pension plans, employee benefits . . . . .				
<b>16a</b> Legal fees (attach schedule) . . . . .				
<b>b</b> Accounting fees (attach schedule) STMT 3 .	1,000.	500.	NONE	500.
<b>c</b> Other professional fees (attach schedule) . . .				
<b>17</b> Interest . . . . .				
<b>18</b> Taxes (attach schedule) (see instructions) STMT 4 .	2,628.	355.		
<b>19</b> Depreciation (attach schedule) and depletion .				
<b>20</b> Occupancy . . . . .				
<b>21</b> Travel, conferences, and meetings . . . . .				
<b>22</b> Printing and publications . . . . .				
<b>23</b> Other expenses (attach schedule) STMT 5 .	1,678.	1,478.		1,678.
<b>24</b> Total operating and administrative expenses. Add lines 13 through 23. . . . .	38,899.	19,130.	NONE	18,975.
<b>25</b> Contributions, gifts, grants paid . . . . .	62,500.			62,500.
<b>26</b> Total expenses and disbursements. Add lines 24 and 25	101,399.	19,130.	NONE	81,475.
<b>27</b> Subtract line 26 from line 12:				
<b>a</b> Excess of revenue over expenses and disbursements . .	-6,404.			
<b>b</b> Net investment income (if negative, enter -0-)		75,865.		
<b>c</b> Adjusted net income (if negative, enter -0-)				

23-48



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 . . . . .		18.	101.	101.
	2	Savings and temporary cash investments . . . . .		285,568.	14,528.	14,528.
	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) . . . . .	STMT 6		253,835.	252,894.
	b	Investments - corporate stock (attach schedule) . . . . .	STMT 7	889,208.	920,929.	1,076,549.
	c	Investments - corporate bonds (attach schedule) . . . . .	STMT 8	454,977.	433,080.	417,029.
	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) . . . . .		1,629,771.	1,622,473.	1,761,101.	
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	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.</b>					
	24	Unrestricted . . . . .				
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.</b>					
	27	Capital stock, trust principal, or current funds . . . . .		1,629,771.	1,622,473.	
	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) . . . . .		1,629,771.	1,622,473.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .		1,629,771.	1,622,473.		

**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	1,629,771.
2	Enter amount from Part I, line 27a . . . . .	2	-6,404.
3	Other increases not included in line 2 (itemize) ▶ <b>SEE STATEMENT 9</b> . . . . .	3	194.
4	Add lines 1, 2, and 3 . . . . .	4	1,623,561.
5	Decreases not included in line 2 (itemize) ▶ <b>SEE STATEMENT 10</b> . . . . .	5	1,088.
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . . .	6	1,622,473.

**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> 420,286.		364,358.	55,928.		
<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>			55,928.		
<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>	55,928.	
<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.

(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	79,292.	1,861,110.	0.042605
2013	77,981.	1,790,492.	0.043553
2012	81,468.	1,740,880.	0.046797
2011	73,973.	1,785,650.	0.041426
2010	62,913.	1,684,111.	0.037357
<b>2</b> Total of line 1, column (d) . . . . .			<b>2</b> 0.211738
<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 . . . . .			<b>3</b> 0.042348
<b>4</b> Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 . . . . .			<b>4</b> 1,817,016.
<b>5</b> Multiply line 4 by line 3 . . . . .			<b>5</b> 76,947.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			<b>6</b> 759.
<b>7</b> Add lines 5 and 6 . . . . .			<b>7</b> 77,706.
<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.			<b>8</b> 81,475.

**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	759.
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	759.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	NONE
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	759.
6 Credits/Payments:			
a 2015 estimated tax payments and 2014 overpayment credited to 2015 . . . . .	6a	1,676.	
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	1,676.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .	10	917.	
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax <input checked="" type="checkbox"/> 760. Refunded <input type="checkbox"/> . . . . .	11	157.	

**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 Form 1120-POL 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 <input checked="" type="checkbox"/> \$ . . . . . (2) On foundation managers <input checked="" type="checkbox"/> \$ . . . . .		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ . . . . .		
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 Form 990-T 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) <input checked="" type="checkbox"/> 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 <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. <u>15</u>		
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 <input type="checkbox"/>	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? If "Yes," list the years <u></u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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)? ☐ Yes ☒ No

Organizations relying on a current notice regarding disaster assistance check here ☐ **5b**

**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? ☐ Yes ☒ No

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

**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? ☐ Yes ☒ No **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 106 S MAIN ST #500, AKRON, OH 44308	CO-TRUSTEE 5	33,593.	-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**

Form 990-PF (2015)

**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
<b>Total number of others receiving over \$50,000 for professional services</b> . . . . .		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	
<b>Total.</b> 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>	1,781,559.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	63,127.
<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>	1,844,686.
<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>	1,844,686.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	27,670.
<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>	1,817,016.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	90,851.

**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>	90,851.
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5 . . . . .	<b>2a</b>	759.
<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>	759.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	90,092.
<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>	90,092.
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	NONE
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	90,092.

**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>	81,475.
<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>	81,475.
<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>	759.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	80,716.

**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 . . . . .				90,092.
<b>2</b> Undistributed income, if any, as of the end of 2015:				
<b>a</b> Enter amount for 2014 only. . . . .			35,880.	
<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>81,475.</u>				
<b>a</b> Applied to 2014, but not more than line 2a . . . . .			35,880.	
<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. . . . .				45,595.
<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. . . . .				44,497.
<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 XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

NOT APPLICABLE

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling . . . . .

**b** Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

Tax year	Prior 3 years				(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test - enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test - enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> Gross investment income . . . . .					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

**a** 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). (See section 507(d)(2).)

N/A

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

SEE STATEMENT 11

**b** The form in which applications should be submitted and information and materials they should include:

SEE ATTACHED STATEMENT FOR LINE 2

**c** Any submission deadlines:

SEE ATTACHED STATEMENT FOR LINE 2

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT FOR LINE 2

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

Recipient	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
Name and address (home or business)				
<b>a</b> Paid during the year				
SEE STATEMENT 28				62,500.
<b>Total</b> . . . . .			▶ <b>3a</b>	62,500.
<b>b</b> Approved for future payment				
<b>Total</b> . . . . .			▶ <b>3b</b>	

**Part XVI-A      Analysis of Income-Producing Activities**

**Enter gross amounts unless otherwise indicated.**

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue:						
<b>a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>f</b> _____						
<b>g</b> Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments . . . . .						
<b>3</b> Interest on savings and temporary cash investments						
<b>4</b> Dividends and interest from securities . . . . .				14	39,067.	
<b>5</b> Net rental income or (loss) from real estate:						
<b>a</b> Debt-financed property . . . . .						
<b>b</b> Not debt-financed property . . . . .						
<b>6</b> Net rental income or (loss) from personal property .						
<b>7</b> Other investment income . . . . .						
<b>8</b> Gain or (loss) from sales of assets other than inventory				18	55,928.	
<b>9</b> Net income or (loss) from special events . . .						
<b>10</b> Gross profit or (loss) from sales of inventory . .						
<b>11</b> Other revenue: <b>a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>12</b> Subtotal. Add columns (b), (d), and (e) . . . . .					94,995.	
<b>13 Total.</b> Add line 12, columns (b), (d), and (e) . . . . .					94,995.	

(See worksheet in line 13 instructions to verify calculations )

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

[illegible]

## 15

GLENN R. & ALICE V. BOGGESS MEMORIAL

34-6890256

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

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
AMERICAN EXPRESS CO	155.	155.
AMGEN INC	237.	237.
AMPHENOL CORP	93.	93.
APACHE CORP COMMON	95.	95.
APPLE COMPUTER INC	396.	396.
C R BARD INC	64.	64.
BLACKROCK INC CL A	453.	453.
CAPITAL ONE FINANCIAL	300.	300.
CHEVRONTXACO CORP	502.	502.
COSTCO WHOLESALE CORP	557.	557.
DANAHER CORP	81.	81.
WALT DISNEY CO	69.	69.
E M C CORPORATION	74.	74.
ECOLAB INC	160.	160.
EXXON MOBIL CORP	503.	503.
FFCB	1,688.	1,688.
FFCB	2,500.	2,500.
FHLMC	2,500.	2,500.
FEDERATED INST HI YLD BOND FUND	2,096.	2,096.
FED SHORT TERM INC FUND #65	644.	644.
FEDERATED SHORT-TERM INC-Y	94.	94.
FEDER TOTAL RETURN BOND FUND #328	2,579.	2,579.
FEDERATED TOTAL RETRN BND-R6	234.	234.
FIRSTMERIT PRIVATEBANK CASH ACCOUNT	100.	100.
HOME DEPOT INC	271.	271.
HONEYWELL INTERNATIONAL INC	260.	260.
INTUIT	57.	57.
ISHARES RUSSELL MIDCAP ETF	3,735.	3,735.
ISHARES TRUST S&P SM CAP 600	1,758.	1,758.
JP MORGAN CHASE & CO	70.	70.
JOHNSON & JOHNSON CO	432.	432.
JOHNSON CONTROLS INC.	228.	228.

GLENN R. & ALICE V. BOGGESS MEMORIAL

34-6890256

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

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
M & T BANK CORP	126.	126.
MCKESSON HBOS INC	38.	38.
NIKE INC CLASS B	254.	254.
NORTHROP GRUMMAN CORPORATION	37.	37.
OPPENHEIMER INTL BOND FD-I	7.	7.
OPPENHEIMER SR FLOAT RATE-I	8.	8.
ORACLE SYSTEMS CORP.	190.	190.
PPG INDUSTRIES INC	212.	212.
PROCTER & GAMBLE CO	424.	424.
QUALCOMM INC	63.	63.
SPDR DOW JONES REIT ETF	1,128.	1,128.
SCHLUMBERGER LTD	171.	171.
STARBUCKS CORP	258.	258.
TEMPLETON GLOBAL BOND FUND-AD	536.	536.
THERMO ELECTRON CORP	71.	71.
TRAVELERS COMPANIES INC	275.	275.
US BANCORP	365.	365.
UNION PACIFIC CORP	402.	402.
UNITED TECHNOLOGIES CORP	340.	340.
V F CORP	187.	187.
VANGUARD FTSE DEVELOPED MARKETS ETF	6,993.	6,993.
VANGUARD INFLATION PROTECTED SECURITIES	182.	182.
VANGUARD INTERMEDIATE TERM CORP FD ADM #	3,572.	3,572.
VISA INC	142.	142.
ACCENTURE PLC CL A	101.	101.
TOTAL	39,067.	39,067.



GLENN R. & ALICE V. BOGGESS MEMORIAL

34-6890256

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.
	=====	=====	=====	=====

GLENN R. & ALICE V. BOGGESS MEMORIAL

34-6890256

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

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
FEDERAL TAX PAYMENT - PRIOR YE	597.	
FEDERAL ESTIMATES - PRINCIPAL	1,676.	
FOREIGN TAXES ON QUALIFIED FOR	278.	278.
FOREIGN TAXES ON NONQUALIFIED	77.	77.
	-----	-----
TOTALS	2,628.	355.
	=====	=====

GLENN R. & ALICE V. BOGGESS MEMORIAL

34-6890256

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

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	CHARITABLE PURPOSES -----
OTHER ALLOCABLE EXPENSE-PRINCI	200.		200.
OTHER ALLOCABLE EXPENSE-INCOME	750.	750.	750.
OTHER NON-ALLOCABLE EXPENSE -	728.	728.	728.
TOTALS	1,678.	1,478.	1,678.
	=====	=====	=====

GLENN R. & ALICE V. BOGGESS MEMORIAL

34-6890256

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

DESCRIPTION  
-----

ENDING  
BOOK VALUE  
-----

ENDING  
FMV  
----

US GOV OBLIGATIONS

253,835.

252,894.

TOTALS

253,835.

252,894.

=====

=====

GLENN R. & ALICE V. BOGGESS MEMORIAL  
FORM 990PF, PART II - CORPORATE STOCK  
=====

34-6890256

DESCRIPTION  
-----

ENDING  
BOOK VALUE  
-----

ENDING  
FMV  
---

EQUITIES

920,929.

1,076,549.

TOTALS

920,929.

1,076,549.

=====

=====



GLENN R. & ALICE V. BOGGESS MEMORIAL  
FORM 990PF, PART II - CORPORATE BONDS  
=====

34-6890256

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
FIXED	433,080.	417,029.
	-----	-----
TOTALS	433,080.	417,029.
	=====	=====





GLENN R. &amp; ALICE V. BOGGESS MEMORIAL

34-6890256

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

=====

DESCRIPTION

AMOUNT

-----

-----

2014 INCOME POSTED TO 2015  
RETURN OF CAPITAL

192.

2.

TOTAL

-----  
194.

=====



GLENN R. &amp; ALICE V. BOGGESS MEMORIAL

34-6890256

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

=====

DESCRIPTION

AMOUNT

-----

-----

ROUNDING

2015 INCOME POSTED TO 2016

3.  
1,085.

TOTAL

-----  
1,088.  
=====





GLENN R. & ALICE V. BOGGESS MEMORIAL  
FORM 990PF, PART XV - LINES 2a - 2d  
=====

34-6890256

## RECIPIENT NAME:

BRENDA MOUBRAY

## ADDRESS:

106 S MAIN ST, STE 500

AKRON, OH 44308

RECIPIENT'S PHONE NUMBER: 330-384-7301

FORM, INFORMATION AND MATERIALS:

LETTER REQUESTING DISTRIBUTION ADDRESSED TO ABOVE

SUBMISSION DEADLINES:

N/A

RESTRICTIONS OR LIMITATIONS ON AWARDS:

SUMMIT COUNTY, OHIO

~~XXXXXX~~

GLENN R. & ALICE V. BOGGESS MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

FIRST GLANCE STUDENT CENTER

## ADDRESS:

943 KENMORE BLVD.

AKRON, OH 44314

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL OPERATING FUND

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

CHILDRENS CONCERT SOCIETY OF AKRON

EJ THOMAS PERFORMING ARTS HALL

## ADDRESS:

198 HILL STREET

AKRON, OH 44325

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CONCERT HALL, IN-SCHOOL CONCERT SERIES

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

FRIENDS OF HISTORIC GLENDALE

CEMETERY

## ADDRESS:

150 GLENDALE AVE

AKRON, OH 44302

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. & ALICE V. BOGGESS MEMORIAL  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

34-6890256

## RECIPIENT NAME:

MAGICAL THEATRE COMPANY

## ADDRESS:

PO BOX 386

BARBERTON, OH 44203

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

OPERATIONS FOR 2015-16 SEASON

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

MUSICAL ARTS ASSOCIATION

BLOSSOM MUSIC CENTER

## ADDRESS:

11001 EUCLID AVE

CLEVELAND, OH 44106

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

2015 BLOSSOM MUSIC FESTIVAL

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

WESTERN RESERVE HISTORICAL SOCIETY

HALE FARM &amp; VILLAGE

## ADDRESS:

10825 EAST BLVD

CLEVELAND, OH 44106

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

EDUCATIONAL PROGRAMS FOR HALE FARM &amp; VILLAGE

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. & ALICE V. BOGGESS MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

INVENT NOW INC.

## ADDRESS:

3701 HIGHLAND PARK NW

CANTON, OH 44720

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

FOR CAMP INVENTION

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

JUNIOR ACHIEVEMENT USA OF

NORTH CENTRAL OHIO

## ADDRESS:

PO BOX 26006

AKRON, OH 442419

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

NORTH CENTRAL OHIO PROGRAMS

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

CROWN POINT ECOLOGY CENTER

## ADDRESS:

PO BOX 484

BATH, OH 44210

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. & ALICE V. BOGGESS MEMORIAL  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

34-6890256

## RECIPIENT NAME:

FRIENDS OF METRO PARKS

## ADDRESS:

975 TREATY LINE RD

AKRON, OH 44313

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

KEEP AKRON BEAUTIFUL

## ADDRESS:

850 EAST MARKET STREET

AKRON, OH 44305

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

URBAN BEAUTIFICATION PROJECT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

LET'S GROW AKRON INC

## ADDRESS:

467 HARVEY AVENUE

AKRON, OH 44314

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY FOOD GARDENS

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. & ALICE V. BOGGESE MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

CHILD GUIDANCE &amp; FAMILY SOLUTIONS

## ADDRESS:

312 LOCUST STREET

AKRON, OH 44302

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

RAPE CRISIS CENTER

## ADDRESS:

974 EAST MARKET STREET

AKRON, OH 44305

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

AKRON CANTON REGIONAL FOODBANK

## ADDRESS:

350 OPPORTUNITY PARKWAY

AKRON, OH 4307

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. & ALICE V. BOGGESE MEMORIAL  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

34-6890256

## RECIPIENT NAME:

AKRON MARATHON CHARITABLE  
CORPORATION

## ADDRESS:

453 S HIGH STREET, SUITE 301  
AKRON, OH 44311

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

MATERIAL FOR NEW RUBBER CITY RACE SERIES

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

CASA BOARD VOLUNTEER ASSOCIATION

## ADDRESS:

650 DAN STREET  
AKRON, OH 44310

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SERVICE TO ABUSED AND NEGLECTED CHILDREN

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

COMMUNITY OUTREACH RESOURCES  
EXCHANGE - FURNITURE BANK

## ADDRESS:

2900 STATE ROAD, UNIT 3  
CUYAHOGA FALLS, OH 44223

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

FURNITURE FOR FAMILIES IN NEEDS

## FOUNDATION STATUS OF RECIPIENT:

PC

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

XXXXXX

GLENN R. & ALICE V. BOGGESS MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

HABITAT FOR HUMANITY OF  
SUMMIT COUNTY INC.

## ADDRESS:

2301 ROMIG ROAD  
AKRON, OH 44320

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

PROGRAMS & NEIGHBORHOOD INITIATIVES

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

HERE'S HOPE HORSE FARM

## ADDRESS:

2545 NORTHAMPTON ROAD  
CUYAHOGA FALLS, OH 44223

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

THERAPEUTIC RIDING PROGRAM

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

INTERNATIONAL SOAP BOX DERBY INC

## ADDRESS:

789 DERBY DOWNS DRIVE  
AKRON, OH 44306

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL OPERATING FOR VARIOUS PROGRAMS

## FOUNDATION STATUS OF RECIPIENT:

PC

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



~~XXXXXX~~

GLENN R. &amp; ALICE V. BOGGESS MEMORIAL

34-6890256

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

=====

## RECIPIENT NAME:

OPPORTUNITY PARISH ECUMENICAL  
NEIGHBORHOOD MINISTRY

## ADDRESS:

941 PRINCETON STREET  
AKRON, OH 44311

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

FOOD PANTRY, HOT MEALS &amp; FOOD PROGRAM

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

PEGASUS FARM

## ADDRESS:

7490 EDISON ST NE  
HARTVILLE, OH 44632

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

THERAPUTIC RIDING PROGRAM FOR SPECIAL NEEDS

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

SHELTER CARE INC.

## ADDRESS:

32 SOUTH AVE  
TALLMADGE, OH 44278

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

XXXXXX

GLENN R. & ALICE V. BOGGESS MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

VICTIM ASSISTANCE PROGRAM INC

## ADDRESS:

150 FURNACE ST  
AKRON, OH 44304

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

24 HR. CRISIS RESPONSE PROGRAM

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

YOUNG MENS CHRISTIAN ASSOCIATION  
OF AKRON OHIO

## ADDRESS:

50 S MAIN STREET, SUITE LL 100  
AKRON, OH 44308

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

CUYAHOGA VALLEY PRESERVATION AND  
SCENIC RAILWAY

## ADDRESS:

PO BOX 158  
PENINSULA, OH 44264

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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



'GLENN R. &amp; ALICE V. BOGGESE MEMORIAL

34-6890256

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

=====

## RECIPIENT NAME:

STAN HYWET HALL &amp; GARDENS INC

## ADDRESS:

714 NOTH PORTAGE PATH

AKRON, OH 44303

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

SUMMIT COUNTY HISTORICAL

SOCIETY OF AKRON OH

## ADDRESS:

550 COPLEY ROAD

AKRON, OH 44320

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

OAK CLINIC

## ADDRESS:

3838 MASSILLON ROAD

UNIONTOWN, OH 44685

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

██████

GLENN R. & ALICE V. BOGGESS MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

STEWARTS CARING PLACE

## ADDRESS:

2955 W MARKET STREET, SUITE R  
AKRON, OH 44333

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

INTEGRATIVE CARE FOR CANCER

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

ACCESS INC

## ADDRESS:

230 W MARKET STREET  
AKRON, OH 44303

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

EMERGENCY SHELTER FOR HOMELESS WOMEN &amp; CHILDR

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

BOYS AND GIRLS CLUB OF THE  
WESTERN RESERVE INC

## ADDRESS:

889 JONATHAN AVENUE  
AKRON, OH 44306

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

AFTERSCHOOL &amp; SUMMER PROGRAMS FOR YOUTH

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. &amp; ALICE V. BOGGESS MEMORIAL

34-6890256

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

=====

## RECIPIENT NAME:

GIRLS SCOUTS OF NE OHIO

## ADDRESS:

ONE GIRL SCOUT WAY

MACEDONIA, OH 44056

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

GOODWILL INDUSTRIES OF AKRON

## ADDRESS:

570 E WATERLOO RD

AKRON, OH 44319

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

MOBILE MEALS

## ADDRESS:

1063 SOUTH BROADWAY STREET

AKRON, OH 44311

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. & ALICE V. BOGGESS MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

PREGNANCY CARE OF SUMMITTY COUNTY

## ADDRESS:

195 E TALLMADGE AVE

AKRON, OH 44310

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SUPPORT FOR CRISIS PREGNANCIES

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

SALVATION ARMY

SUMMITTY COUNTY AREA

## ADDRESS:

190 SOUTH MAPLE STREET

AKRON, OH 44302

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

WEATHERVANE COMMUNITY PLAYHOUSE

## ADDRESS:

1301 WEATHERVANE LANE

AKRON, OH 44313

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. &amp; ALICE V. BOGGESS MEMORIAL

34-6890256

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

=====

## RECIPIENT NAME:

KENT STATE UNIVERSITY FOUNDATION

PORTHOUSE THEATRE

## ADDRESS:

P.O. BOX 5190

KENT, OH 44242

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SCHOLARSHIPS FOR PORTHOUSE THEATRE ACADEMY

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

EMBRACING FUTURES INC.

## ADDRESS:

50 SOUTH MAIN STREET, SUITE LL100

AKRON, OH 44308

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

ORTHODONTIC CARE PROGRAM FOR CHILDREN

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

INTERVAL BROTHERHOOD HOMES CORP

## ADDRESS:

3445 S MAIN STREET

AKRON, OH 44319

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

IMPROVEMENTS FOR AGING RESIDENCES

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. & ALICE V. BOGGESS MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

FIRST UNITED METHODIST CHURCH  
OF AKRON

## ADDRESS:

263 EAST MILL STREET  
AKRON, OH 44308

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT & COMMUNITY OUTREACH

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 3,500.

## RECIPIENT NAME:

JEWISH COMMUNITY CENTER OF AKRON  
GIRLS ON THE RUN OF GREATER SUMMIT

## ADDRESS:

750 WHITE POND DRIVE  
AKRON, OH 44320

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

WE ALL BELONG PROJECT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

OHIO GUIDESTONE

## ADDRESS:

202 BAGLEY ROAD  
BEREA, OH 44017

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SPECIALIZED FOSTER CARE & MENTAL HEALTH SERVI

## FOUNDATION STATUS OF RECIPIENT:

PC

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



~~XXXXXX~~

GLENN R. &amp; ALICE V. BOGGESS MEMORIAL

34-6890256

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

=====

## RECIPIENT NAME:

AKRON ZOOLOGICAL PARK

## ADDRESS:

500 EDGEWOOD AVE

AKRON, OH 44307

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CONSERVATION PROJECTS LOCAL &amp; GLOBAL EFFORTS

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

BATTERED WOMEN'S SHELTER

## ADDRESS:

759 W MARKET ST

AKRON, OH 44303

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

GREENLEAF FAMILY CENTER

## ADDRESS:

212 E EXCHANGE ST

AKRON, OH 44303

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

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



GLENN R. & ALICE V. BOGGESS MEMORIAL 34-6890256  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

## RECIPIENT NAME:

HUMANE SOCIETY OF GREATER AKRON

## ADDRESS:

7996 SARROW RD., STE 30  
TWINSBURG, OH 44087

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

PAWSABILITIES

## FOUNDATION STATUS OF RECIPIENT:

PC

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

## RECIPIENT NAME:

COMMUNITY SUPPORT SERVICES INC

## ADDRESS:

150 CROSS ST  
AKRON, OH 44311

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

HOMELESS INTAKE &amp; OUTREACH CENTER

## FOUNDATION STATUS OF RECIPIENT:

PC

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

TOTAL GRANTS PAID:

62,500.

=====