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# Form 990-PF Department of the Treasury

## **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. OMB No 1545-0052

Open to Public Inspection

For calendar year 2015 or tax year beginning , 2015, and ending Name of foundation E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY A Employer identification number 34-6953719 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite 1900 SOUTH MAIN STREET (419) 259-8655 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here FINDLAY, OH 45840 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here. Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation . . . . H Check type of organization | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method | X Cash Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . 16) **▶** \$ 13,615,883. (Part I, column (d) must be on cash basis ) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment for charitable (c) Adjusted net total of amounts in columns (b), (c), and (d) expenses per may not necessarily equal the amounts in column (a) (see instructions)) income income purposes books (cash basis only) Contributions gifts, grants, etc., received (attach schedule) Check X if the foundation is not required to attach Sch B. 3 Interest on savings and temporary cash investments. 218,394. 218,394. ATCH 1 Dividends and interest from securities . . . . b Net rental income or (loss) -27 Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all assets on line 6a 33,966 0. 7 Capital gain net income (from Part IV, line 2) Net short-term-capital gain : , , ; , ... Income modifications Gross sales less returns and allowances b Less Cost of goods sod . 1 8 2016 c Gross profit or (loss) (attach schedule) Other income (attach-schedule) ATGH. 453,824. 11 672,191. 12 Total. Add line's-1'through 111. 218,394. 27,020. 8,318. 18,702. 13 Compensation of officers, directors, trustees, etc . . Expenses 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits . . . . . . 6,073. 6,073. 16a Legal fees (attach schedule) ATCH 3.... 3,100. 3,100 b Accounting fees (attach schedule)ATCH 4 . istrative 17 c Other professional fees (attach schedule) . . . Taxes (attach schedule) (see instructions). . . SCANNED NOV 21 E 19 19 Depreciation (attach schedule) and depletion. 21 22

36,193.

729,995.

766,188.

-93,997

8,318

8,318

210,076.

JSA For Paperwork Reduction Act Notice, see instructions. 5E1410 1 000 1585GZ D320 11/3/2016 9:45:

Subtract line 26 from line 12

26

27

Travel, conferences, and meetings . . . . . Printing and publications . . . . . . . . . .

Other expenses (attach schedule) . . . . . Total operating and administrative expenses.

Add lines 13 through 23. . . . . . . . . . .

Contributions, gifts, grants paid . . . . . .

Total expenses and disbursements Add lines 24 and 25

Excess of revenue over expenses and disbursements . .

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). .

9:45:05 AM V 15-7F 114062

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PAGE

27,875

729,995

757,870

0

	art II	Palance Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	Enc	d of year
	a) L II	Datatice Stieets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng			
	2	Savings and temporary	cash investments	383,649.	297,999	
		Accounts receivable ▶				
		Less allowance for dou	btful accounts ▶			
	4	Pledges receivable ▶				L Circiii in i
		Less allowance for dou	btful accounts ▶			
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (at	tach schedule) (see instructions)			
	7	Other notes and loans r	eceivable (attach schedule)			
		Less allowance for dou	btful accounts ▶		-	
ssets	8	Inventories for sale or us	e			
SS	9	Prepaid expenses and d	eferred charges			
⋖	10a	Investments - U.S. and stat	e government obligations (attach schedule)			
	1		stock (attach schedule)		1,161,166	
	a C	Investments - corporate	bonds (attach schedule)	49,216.		
	11	Investments - land, building and equipment basis		Lilia Lila Alia Alia		
		Less accumulated depreca (attach schedule)				
	12	Investments - mortgage	loansATCH.5	· ; -		
	13 14	Investments - other (atta	ach schedule) ATCH . 5	2,653,694.	3,472,265	3,148,085.
	14					
		Less accumulated deprecia (attach schedule)	auon >			
	15	Other assets (describe				<del>-</del>
	16		completed by all filers - see the			
_		instructions Also, see p	age 1, item l)	5,066,366.	4,980,646	13,615,883.
	17	, .	accrued expenses			
40	18					
iabilities	19					
寰	20		ors, trustees, and other disqualified persons			
<u>.</u> e	21		otes payable (attach schedule)			
_	22	Other liabilities (describe	)			
	23	Total liabilities (add line	es 17 through 22)	0.		
_	23		low SFAS 117, check here ▶	<u> </u>		
S			24 through 26 and lines 30 and 31.			
ဋ	24	•				
Balances	25					
ä	25					
밀	27 28 29 30 31	· ·	not follow SFAS 117. ► 🗓			
Ţ	ŀ		plete lines 27 through 31.			
ō	27		cipal, or current funds	5,066,366.	4,980,646	
şş	28		r land, bldg , and equipment fund	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
SS	29	•	ulated income, endowment, or other funds			
Ž	30	•	d balances (see instructions)	5,066,366.	4,980,646	
ē	31		net assets/fund balances (see		, ,	
	1	instructions)	<u></u> <u>.</u>	5,066,366.	4,980,646	5.
Part III Analysis of Changes in Net Assets or Fund Balances						
_			palances at beginning of year - Part		must agree with	
			ed on prior year's return)			5,066,366.
2			, line 27a			
3			ded in line 2 (itemize) ► ATCH 6		3	8,277.
4	Add	I lines 1, 2, and 3			4	4,980,646.
5		creases not included in	· · · · — — — — — — — — — — — — — — — —			
_6	Tot	al net assets or fund t	palances at end of year (line 4 minus	s line 5) - Part II, column (	b), line 30 6	4,980,646.

	0-11 (2015)		<del></del>			rage 3	
Part	Capital Gains	and Losses for Tax on Inve	estment Income		<u> </u>		
	(a) List and	(b) How acquired	(c) Date	(d) Date sold			
	2-story be	shs MLC Co)	P - Purchase D - Donation	acquired (mo , day, yr )	(mo day, yr)		
1a S	EE PART IV SCHEI	DULE					
b							
		<del></del>	<del></del>				
<u>c</u>						<b></b>	
<u>d</u>					-		
е		·					
	e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo		
,	c, Gross sales prioc	(or allowable)	plus expense of sale		(e) plus (f) mını	ıs (g)	
а							
b							
		<del></del> .		_			
<u> </u>							
<u>d</u>						···	
_e	<u></u>						
	Complete only for assets	showing gain in column (h) and owner	d by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus	
/\\ E	M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)	col	(k), but not less t		
(1)	W V ds 01 12/31/09	as of 12/31/69	over col (j), if any		Losses (from co	ol (h))	
а							
b							
		<del> </del>		-			
<u>c</u>	*						
<u>d</u>							
<u>e</u>				,			
2 0	anital dain not income	or (not contol loss)	gain, also enter in Part I, line 7				
2 C	apital gain net income	or (net capital loss)	(loss), enter -0- in Part I, line 7	2		-27.	
3 Ne	et short-term capital ga	ain or (loss) as defined in sections 1	•			-	
		art I, line 8, column (c) (see inst					
				_		0.	
		Under Coetion 4040/o) for Dec		3			
Part '			duced Tax on Net Investment I			v	
(For of	ptional use by domestic	c private foundations subject to the	e section 4940(a) tax on net investr	nent inco	me)		
If secti	ion 4940(d)(2) applies,	leave this part blank					
Was th	he foundation liable for	the section 4942 tax on the distrib	outable amount of any year in the ba	ase perio	17	Yes X No	
If "Yes	s," the foundation does	not qualify under section 4940(e)	Do not complete this part				
1 E	nter the appropriate an	nount in each column for each year	r, see the instructions before makin	anv ent	ries		
	(a)				(d)		
0-1	Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	i	Distribution r		
Calend	dar year (or tax year beginning in)				(col (b) divided by		
	2014	731,618.	13,245,737.	ļ		0.055234	
	2013	431,485.	12,777,236.			0.033770	
	2012	344,603.	12,718,469.			0.027095	
	2011	28,724.	12,483,473.			0.002301	
	2010	4,297,879.	12,576,219.			0.341747	
	2010	-7-23-7-3-3-3	12,0,0,123			0.012/1/	
	. a . b . a b	45				0 460147	
				2		0.460147	
3 A	verage distribution ration	o for the 5-year base period - divid	le the total on line 2 by 5, or by the				
nı	umber of years the four	ndation has been in existence if les	ss than 5 years	3		0.092029	
	•		•				
4 E	nter the net value of no	ncharitable-use assets for 2015 fr	om Part X, line 5	4	14.	050,026.	
<b>4</b> C	mer the het value of he	menantable-use assets for 2015 in	om Part X, line 5	<del>                                     </del>		000/020.	
				_		000 010	
5 M	fultiply line 4 by line 3			5		293,010.	
6 E	nter 1% of net investm	ent income (1% of Part Lline 27b)		6		2,101.	
- L	170 of fiel investill	5.1					
<b>-</b> .	dd 1.000 F 0 = 4.0			,	1	295,111.	
7 A	ad lines 5 and 6			7  -		220,111.	
8 E	nter qualifying distribut	ions from Part XII, line 4		8		757,870.	
lf	line 8 is equal to or g	reater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the	
P	art VI instructions.						

Х

8b

10

8a Enter the states to which the foundation reports or with which it is registered (see instructions) OHIO \_\_\_\_\_

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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,"

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

Χ

Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	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	8	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ N/A		•	
14	The books are in care of ▶ CURT CRAMER Telephone no ▶ 419-419	766	9	
	Located at ▶ 1900 SOUTH MAIN STREET FINDLAY, OH ZIP+4 ▶ 45840			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authorit	/	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	F		
	the foreign country			
Pa	rt 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.	2 %	Yes	No
1a	During the year did the foundation (either directly or indirectly)		, and	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		,	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1 8 3		t
	disqualified person?			į
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			*
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			, ,
	foundation agreed to make a grant to or to employ the official for a period after	134		
	termination of government service, if terminating within 90 days)		3113	
ŧ	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here	dist		dia i
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	173		
	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		na iti	( i a m
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		14/14	
á	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	ľ		38.4
	6e, Part XIII) for tax year(s) beginning before 2015? Yes X No		. 41	, ,
	If "Yes," list the years		18	
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1" "	"	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2.		v
	all years listed, answer "No" and attach statement - see instructions )	2b	4 5(1).	X
(	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1.5		
_	· · · · · · · · · · · · · · · · · · ·	,,,	1.	
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?		İ	j
1	b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or		25.	
	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	ş		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	24	1	X
	foundation had excess business holdings in 2015)	3b	<del> </del>	X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	.,,	
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4b		X
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	40	A DE	

E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY 34-6953719 Page 7 Form 990-PF (2015) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) 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 Total number of others receiving over \$50,000 for professional services . . . **Summary of Direct Charitable Activities** Part IX-A List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc N/A Summary of Program-Related Investments (see instructions) Part IX-B Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE

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3 NONE

Total. Add lines 1 through 3,

All other program-related investments. See instructions

E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY 34-6953719 Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1a 13,555,293. 1b 708,693. 1 c c Fair market value of all other assets (see instructions) 1 d 14,263,986. Reduction claimed for blockage or other factors reported on lines 1a and 2 Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d . . . . . . . . . . . 3 14,263,986. Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 213,960. instructions) 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 14,050,026. 702,501. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here ▶ and do not complete this part ) 702,501. 1 2a 2a Tax on investment income for 2015 from Part VI, line 5 . . . . . . b Income tax for 2015 (This does not include the tax from Part VI). . 2b 2c 702,501. 3 Distributable amount before adjustments Subtract line 2c from line 1 . . . . . . . . . 4 702,501. 5 5 Add lines 3 and 4 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 702,501. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 757,870. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3ь 757,870. Qualifying distributions, Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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0.

757,870.

qualifies for the section 4940(e) reduction of tax in those years

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

5

Page 9

Pa	rt XIII Undistributed Income (see instri	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				702,501.
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only				
b	Total for pnor years 20 13 ,20 12 ,20 11				
	Excess distributions carryover, if any, to 2015				
а	From 2010 2,636,692.				
b	From 2011				
С	From 2012				
d	From 2013				
е	From 2014				
	Total of lines 3a through e	2,706,023.		<del></del>	
4	Qualifying distributions for 2015 from Part XII, line 4 > \$ 757,870.				
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
А	Applied to 2015 distributable amount		***		702,501.
	Remaining amount distributed out of corpus	55,369.			
	Excess distributions carryover applied to 2015.	·			
6	(If an amount appears in column (d), the same amount must be shown in column (a) )  Enter the net total of each column as				
	indicated below:	2 761 202			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,761,392.			
b	Prior years' undistributed income Subtract				
c	line 4b from line 2b				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
_	tax has been previously assessed	<del></del>			
a	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount - see instructions				
_					
f	Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2016				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	2,636,692.			
9	Excess distributions carryover to 2016.		-		
	Subtract lines 7 and 8 from line 6a	124,700.			
	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013 69, 331.				
	Excess from 2015 55,369.				<u></u>

Form **990-PF** (2015)

orm	990-PF (2015)	E.C. EDWAL	RDS MEMORIAL T	RUST FBO FINDL	AY	<u> 34 -</u>	6953/1	9 Page <b>10</b>
Pa	rt XIV Private Ope	erating Foundations	(see instructions	and Part VII-A, ques	tion 9)		NOT A	PPLICABL
1 a	If the foundation has	eceived a ruling or de	termination letter th	at it is a private ope	erating			
	foundation, and the ruling	s effective for 2015, en	ter the date of the ruling	g	▶			
b	Check box to indicate v	hether the foundation is	s a private operating	foundation described	ın section	4942(j	)(3) or	4942(j)(5)
2 2	Enter the lesser of the ad-	Tax year		Prior 3 years			,	) Total
2 a	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d)	2012	,,	, TOTAL
	I or the minimum investment					-		
	return from Part X for each year listed							
ь	85% of line 2a							
	Qualifying distributions from Part							
_	XII, line 4 for each year listed							
þ	Amounts included in line 2c not							
	used directly for active conduct of exempt activities							
e	Qualifying distributions made					•		
	directly for active conduct of							
	exempt activities Subtract line 2d from line 2c							
3	Complete 3a b, or c for the							
	alternative test relied upon "Assets" alternative test - enter							
q							ĺ	
	(1) Value of all assets (2) Value of assets qualifying							
	under section	İ						
b	4942(j)(3)(B)(i) "Endowment" alternative test-				<b>1</b>			
	enter 2/3 of minimum invest-							
	ment return shown in Part X,			J	- }		j	
c	Ine 6 for each year listed "Support" alternative test - enter		·					
•	(1) Total support other than							
	gross investment income							
	(interest dividends, rents, payments on secunties	1						
	loans (section 512(a)(5)),							
	or royalties) (2) Support from general				<del>                                     </del>		<del> </del>	
	public and 5 or more exempt organizations as			Ì			Ì	
	provided in section 4942							
	(j)(3)(B)(iii)	-						
	port from an exempt						1	
	organization							
Pa		ntary Information (C	omplete this par	t only if the found	ation had	\$5,000 o	r more i	n assets a
		uring the year - see		•				
1	Information Regardin	g Foundation Manager	s:					
а	List any managers of	the foundation who h	ave contributed me	ore than 2% of the to	otal contribu	tions recei	ved by th	e foundation
	before the close of any	y tax year (but only if th	ey nave contributed	more than \$5,000) (	See section	507(0)(2))		
	N/A		·					
b		the foundation who				r an equall	y large p	ortion of the
	ownership of a partne	rship or other entity) of	which the foundation	on has a 10% or great	er interest			
	N/A	g Contribution, Grant,	Cift I am Cabalan	ship eta Dramana.				
2	— —	-						_
		the foundation only i or funds If the founda						
		plete items 2a, b, c, and		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	201.01.07 10 11	1011100010	or organia	cations and
		and telephone number		f the person to whom a	applications s	hould be ac	dressed	
_	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			, ,				
t	The form in which app	olications should be sub	omitted and informa	tion and materials the	y should inc	lude		
— <u> </u>	: Any submission dead	ines						
	•							
	Any restrictions or	imitations on awards	such as by deor	raphical areas char	ritable fields	kinds of	institutio	ns or othe
	factors	tations on awaius	, such as by geog	grapinoui dicas, cilai	asic ilcius	, кишэ от		, 01 01116

Page **11** 

Part XV Supplementary Information (continued)					
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appi	roved for F	uture Payment		
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	recipient	Contribution		
a Paid during the year					
ATCH 8					
	1				
		İ			
	ļ				
Total			▶ 3a	729,995.	
b Approved for future payment					
		}			
Total			▶ 3b		
				- 000 PF	

Part XVI-	Analysis of Income-Prod	ucing Act	ivities		·	
	mounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
· ·		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-	service revenue					(See instructions)
				<del>                                     </del>		
					<del></del>	<del></del>
e						
f	<del></del>					
-	nd contracts from government agencies			-		
	hip dues and assessments		<u> </u>			
	savings and temporary cash investments			14	218,394.	· · · · · · · · · · · · · · · · · · ·
	s and interest from securities			1 - 1 - 3	210,334.	
	I income or (loss) from real estate	<del></del>		<del>  -</del>		
	inanced property			-		
	ebt-financed property			<del> </del>		
	income or (loss) from personal property	<del></del>				
7 Other inv	estment income			18	-27.	
8 Gain or (lo	ss) from sales of assets other than inventory	<u> </u>		10	-21.	
	ne or (loss) from special events · · ·			<del></del>		
The second secon	ofit or (loss) from sales of inventory	<u> </u>	_	<del>  -</del> .	-	
	enue a	·-	-827,338.	<del>  -</del>	1 201 162	
	TCH 9		-827,338.	<u> </u>	1,281,162.	. <u>.</u>
				-		
				<u> </u>		
e			-827,338.	<del>  .</del>	1,499,529.	
	Add columns (b), (d), and (e)		*		· · · · · · · · · · · · · · · · · · ·	672,191.
	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc			• • • • • •	13	6/2,191.
Part XVI- Line No. ▼	Relationship of Activitie  Explain below how each activitie  accomplishment of the foundation	ty for whic	h income is reported i	n column (	e) of Part XVI-A contribu	
			_	<u>_</u>		
					<u> </u>	•
-						
					<del></del>	
			<del></del>	<u> </u>		
					-	-
	· · · · · = <del>- ·</del>			<u>.</u>		
	-					
				<del>_</del>		- 000 DE

Form **990-PF** (2015)

orm 990	J-PF (201				RIAL TRUST			34-6953			e 13
Part >	(VII	Information Re Exempt Organ		ansfers To	and Transa	ctions and	d Relationships V	Vith Nonc	harit	able	•
1 D	d the	organization directl	y or indirectly	engage in an	y of the follow	ing with an	y other organization	described		Yes	No
ın	sectio	n 501(c) of the Co	de (other than	section 501(	c)(3) organizati	ons) or in se	ection 527, relating t	o political			
	ganıza								1		
		s from the reporting	-		-					ļ	
(1	) Cash								1a(1)		_ <u>X</u> _
						• • • • •			1a(2)		_X_
		ansactions:									
(1	) Sale	s of assets to a not	ncnaritable exe	mpt organizat	ion	• • • • • •			1b(1)		<del></del>
											<u> </u>
14	I) Rein	ai or lacilities, equi ihiirsement arrangi	pinienii, oi oinei ements	assets		• • • • • •		• • • • • •	10(3)		X
											X
(6	) Perf	ormance of service	s or membersl	hip or fundrais	sing solicitations	• • • • • • • • • • • • • • • • • • •		• • • • • •	1b(6)		X
c S	, harıng	of facilities, equipm	nent, mailing lis	sts, other asse	ets, or paid emp	loyees		• • • • • •	1c		Х
d If	the a	nswer to any of th	e above is "Ye	es," complete	the following	schedule. (	Column (b) should a	lways show		aır m	arket
V	alue of	the goods, other	assets, or serv	rices given by	the reporting	foundation	If the foundation re-	ceived less	than i	faır m	arket
V	alue in		sharing arran	gement, show	v ın column (d	) the value	of the goods, other	assets, or se	ervices	rece	eived
(a) Line	no	(b) Amount involved	(c) Name of	nonchantable ex	empt organization		cription of transfers, transa	ctions, and shar	ıng arra	ngeme	nts
		N/A				N/A					
	-	<del></del>								_	
					_ <del></del>		<del></del>				
	-					<del></del>					
	_					<del></del>					
			-				<u> </u>				
							-				
			ļ								
2a ls	the f	oundation directly	or indirectly a	ffiliated with,	or related to,	one or mor	e tax-exempt organi	zations			
d	escribe	ed in section 501(c	) of the Code (d	other than sec	ction 501(c)(3))	or in section	n 527?	[	Y6	es X	] No
<u>b lf</u>	"Yes,	' complete the follo									
		(a) Name of organization	on	(b)	Type of organization	1	(c) Descrip	tion of relations	hip		
				<del> </del>			<del></del>				
							<del></del>			<del></del>	
								<del> </del>			
	Under	penalties of penjury, I deci	are that I have exam	nined this return, ii	nduding accompanyir	ng schedules and	statements, and to the best	of my knowledc	e and b	elief, it	ıs true
0:	correct	and complete Declaration of	of preparer (other than	taxpayer) is based o	on all information of wi	nich preparer has	any knowledge		_		
Sign		David C	xital	1	אוצוו	CEO		May the IRS	discus eparer		retum below
Here	Signa	ature of officer or trustee	9	Date	1, 1)	Title		(see instruction			No
	<del>'</del> -	Print/Type preparer's na	ame	Preparer's	signature		Date	neck if F	PTIN		
Paid		JOYCE A DULWC	RTH		مديا كل اس	$\sim 0$		"" I	P001	5112	:5
Prep	arer		KD, LLP	(			Firm's EI				
Use (	Only		OO E. MAIN	ST. SUIT	700						

260-460-4000

FORT WAYNE, IN

Phone no

46802

# ATTACHMENT 1

L FROM SECURITIES	
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INTEREST	
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DIVIDENDS	
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PART	
990PF.	
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E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY

NET INVESTMENT TNCOME		218,394.	218,394.
REVENUE AND EXPENSES PPD BOOKS	FER DOORS	218,394.	218,394.
			TOTAL
	DESCRIPTION	INTEREST & DIVIDENDS	

E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY

34-6953719

ATTACHMENT 2

FORM 990PF, PART I - OTHER INCOME

DESCRIPTION

PARTNERSHIP DISTRIBUTIONS

REVENUE AND

EXPENSES

PER BOOKS

453,824.

TOTALS

453,824.

FINDLAY
FBO
TRUST
MEMORIAL
EDWARDS
Б.С.

FORM 990PF, PART I - LEGAL FEES

m
ATTACHMENT

CHARITABLE PURPOSES	6,073.	6,073.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	6,073.	6,073.
DESCRIPTION	LEGAL FEES VORYS, SATER, SEYMORE & PEASE	TOTALS

4

ATTACHMENT

ATTACHMENT 4 PAGE 18

E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY

- ACCOUNTING FEES PART I FORM 990PE,

	NET	INVESTMENT	INCOME		
REVENUE	AND	EXPENSES	PER BOOKS		3,100.
					AND ACCOUNTING
			DESCRIPTION	BKD, LLP	TAX PREPARATION AND ACCOUNTING

3,100.

3,100.

TOTALS

3,100.

CHARITABLE PURPOSES

ADJUSTED NET INCOME

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ENDING	BOOK VALUE
	DESCRIPTION_

- OTHER INVESTMENTS

PART II

FORM 990PF,

E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY

TOTALS

ENDING FMV

3,148,085.

3,148,085.

3,472,265.

FIXED INCOME

3,472,265.

ATTACHMENT 6

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

<u>DESCRIPTION</u>

AMOUNT

CASH ADJUSTMENT

8,277.

TOTAL

8,277.

34-6953719

E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY

FORM 990-PF - PART IV

JUNE AND LOSSES FOR TAX ON INVESTMENT INCOME

MV Adj basis sof as of 1/69 12/31/69 ECURITIES - ST	Excess of FMV over adı basis	VA		VAR
ECURITIES - ST		VA	R	VAR
ECURITIES - LT			96.	
		VA	R -123.	VAR
		_	-27.	
	:			
	·			
		!		

E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY

ATTACHMENT 7	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES		0.0	0.00
	COMPENSATION E	7,020.	.0	7,020.
ICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	TRUSTEE	GRAND TOTALS
FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS	FIFTH THIRD BANK 1900 SOUTH MAIN STREET FINDLAY, OH 45840	BLANCHARD VALLEY HEALTH SYSTEM 1900 SOUTH MAIN STREET FINDLAY, OH 45840	

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E C EDWARDS MEMORIAL TRUST FBO FINDLAY

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	TIONS PAID DURING THE YEAR		
		ATTA	TTACHMENT 8
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BLANCHARD VALLEY HEALTH SYSTEM	PC	SUPPORT	729,995.
1900 SOUTH MAIN STREET FINDLAY, OH 45840			

729,995. TOTAL CONTRIBUTIONS PAID

ATTACHMENT 8 PAGE 22

1140628

9 45:05 AM

1585GZ D320 11/3/2016

V 15-7F

	RELATED OR EXEMPT FUNCTION INCOME		
ATTACHMENT 9	AMOUNT	1,281,162.	1,281,162.
	EXCLUSION CODE		
	AMOUNT	-827,338.	-827,338.
	BUSINESS	211110	
FORM 990-PE, PART XVI-A - ANALYSIS OF OTHER REVENUE	DESCRIPTION	PARTNERSHIP DISTRIBUTIONS	TOTALS

ATTACHMENT 9 PAGE 23

### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10. ▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041. 2015

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY

Employer identification number

34-6953719

HOSPITAL

Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) Adjustments Subtract column (e) the lines below to gain or loss from Form(s) 8949, Part I, from column (d) and combine the result with (or other basis) This form may be easier to complete if you round off cents (sales pnce) line 2, column (g) column (g) to whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b. 5,967. 5,871. 96. 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . . . 4 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . . . . . . 5 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2014 Capital Loss 6

7	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back				7	96.
Par	Long-Term Capital Gains and Losses - Asse	ets Held More Tha	ın One Year			•
the li	nstructions for how to figure the amounts to enter on nes below form may be easier to complete if you round off cents note dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss Form(s) 8949, P line 2, column	from art II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	27,999.	28,122.			-123.
	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Long-term capital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	1 8824		11	
12	Net long-term gain or (loss) from partnerships, S corp	orations, and other e	estates or trusts		12	
13	Capital gain distributions				13	
14	Gain from Form 4797, Part I				14	
15	Long-term capital loss carryover Enter the amoun Carryover Worksheet				15	
16	Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back				16	-123.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2015

Sched	ule D (Form 1041) 2015					
Par			(1) Beneficiarie		state's	(3) Total
	Caution: Read the instructions before completing this pa	rt.	(see instr )	or t	rust's	
17	Net short-term gain or (loss)	17				96.
	Net long-term gain or (loss):					
а	Total longuage and the second	18a				-123.
	, , , , , , , , , , , , , , , , , , ,	18b		_		_
	20% fato game,	18c			<del>.</del>	
19	Total net gain or (loss). Combine lines 17 and 18a ▶	19				-27.
Note	: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 go to Part V, and <b>do not</b> complete Part IV If line 19, column (3), is a ne	(or ⊢o: et loss	m 990-ı, Partı, I . complete Part I	ine 4a) it line: / and the <b>Ca</b> p	s 16a and o <b>ital Loss</b>	g 19, column (2), are net <b>Carryover Worksheet,</b> as
neces	sary					
Par						
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, li	ne 4c, if a trust), th	e smaller of	20	( 27.)
a Note	The loss on line 19, column (3) or b \$3,000	nage			20   34) is a l	oss complete the Capital
Loss (	Carryover Worksheet in the instructions to figure your capital loss carryover		.,		,,	
Par	t V Tax Computation Using Maximum Capital Gains Rate					
	1041 filers. Complete this part only if both lines 18a and 19 in colu			an amount is	entered	I in Part I or Part II and
there	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more	e thai	nzero			
	ion: Skip this part and complete the Schedule D Tax Worksheet in the in	nstruc	ctions if			
	ther line 18b, col (2) or line 18c, col (2) is more than zero, or					
• 80	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero in 990-T trusts. Complete this part only if both lines 18a and 19 are ga	une o	r qualified divide	unds are incli	ıded ın ıı	ncome in Part Lof Form
44U-	T, and Form 990-T, line 34, is more than zero. Skip this part and com	nolete	the Schedule D	Tax Works	heet in t	he instructions if either
	18b, col (2) or line 18c, col (2) is more than zero					
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4)	. 21			
22	Enter the smaller of line 18a or 19 in column (2)	.,	.		7	
	but not less than zero					
23	Enter the estate's or trust's qualified dividends	_			1 1	
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T)					
24	Add lines 22 and 23					
25	If the estate or trust is filing Form 4952, enter the		<del>- 1</del>			
	amount from line 4g, otherwise, enter -0 ▶ 25					
26	Subtract line 25 from line 24 If zero or less, enter -0		. 26			
27	Subtract line 26 from line 21 If zero or less, enter -0-		. 27			
28	Enter the smaller of the amount on line 21 or \$2,500		. 28			
29	Enter the smaller of the amount on line 27 or line 28		. 29			
30	Subtract line 29 from line 28 If zero or less, enter -0- This amount is	taxec	l at 0%		▶ 30	
31	Enter the smaller of line 21 or line 26		. 31		_	
32	Subtract line 30 from line 26		. 32		<b>                                    </b>	
33	Enter the smaller of line 21 or \$12,300		. 33		_	
34	Add lines 27 and 30				_	
35	Subtract line 34 from line 33 If zero or less, enter -0				_	
36	Enter the smaller of line 32 or line 35				┥	
37	Multiply line 36 by 15%		1 1		▶ 37	
38	Enter the amount from line 31					
39	Add lines 30 and 36		<del></del>		_	
40	Subtract line 39 from line 38 If zero or less, enter -0					
41	Multiply line 40 by 20%		1 1		▶ 41	
42	Figure the tax on the amount on line 27 Use the 2015 Tax Rate Schedule for		<b>I</b>			
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)			<del></del>	$\dashv$	
43	Add lines 37, 41, and 42			<del></del>		
44	Figure the tax on the amount on line 21 Use the 2015 Tax Rate Schedule for					
4-	and Trusts (see the Schedule G instructions in the instructions for Form 1041)			41 Sabadul	$\exists$	
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 G, line 1a (or Form 990-T, line 36)				▶ 45	
	- O, mie Ta (OLLOIIII 990-1, mie 90) , , , , , , , , , , , , , , , , , , ,		<u> </u>		1 70	

Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side Social security number or taxpayer identification number E.C. EDWARDS MEMORIAL TRUST FBO FINDLAY 34-6953719 Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1. Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. 1 If you enter an amount in column (g) (h) (e) Gain or (loss). (c) enter a code in column (f) (d) Cost or other basis (b) (a) Date sold or Subtract column (e) Proceeds See the Note below See the separate instructions. Description of property Date acquired disposed from column (d) and (sales price) and see Column (e) (Example 100 sh XYZ Co) (Mo, day, yr) (Mo, day, yr) combine the result **(f)** (a) (see instructions) in the separate Code(s) from with column (g) Amount of instructions instructions adjustment PUBLICLY TRADED VAR VAR SECURITIES - LT 27,999 28,122 -123.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

27,999

28,122

-123.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E

above is checked), or line 10 (if Box F above is checked)▶