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Return of Private Foundation

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

OMB No. 1545-0052

2015

Department of the Treasury Internal Revenue Service

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

| Fo | <u>r calen</u> | dar year 2015 or tax year beginning | , 201 | 5, and e | ending | | , 20 |
|---|----------------|--|------------------------------|-------------|--------------------------|---|---|
| Na | me of for | undation | | | A Employe | r identification numbe | r |
| Da | n and N | ficki Chapin Fund, Inc. | | | 36-4147435 | | |
| Nu | mber an | d street (or P O box number if mail is not delivered to street address) | Room | /surte | B Telephon | e number (see instructi | ons) |
| P. | O. Box | 550, 361 Keyes Ave. | | | 847 909 8351 | | |
| | | n, state or province, country, and ZIP or foreign postal code | | C If exempt | ion application is pendi | ng, check here ▶ □ | |
| На | mpshire | e, IL 60140-0550 | | | | | g, amaan maras [|
| | | <u> </u> | n of a former public | charity | D. 1. Foreigi | n organizations, check l | nere ▶ 🗍 |
| | | ☐ Final return ☐ Amended | • | | | | _ |
| | | Address change Name cha | nge | | _ | n organizations meeting here and attach compu | · — |
| H | Check | type of organization: Section 501(c)(3) exempt p | <u> </u> | | | foundation status was t | |
| | | n 4947(a)(1) nonexempt charitable trust | | lation | section 5 | 07(b)(1)(A), check here | ▶□ |
| Ť | | arket value of all assets at J Accounting method | | | | | |
| • | | year (from Part II, col. (c), | | i | | ndation is in a 60-month ction 507(b)(1)(B), check | |
| | line 16 | | on cash basis l | | | | |
| P | | Analysis of Revenue and Expenses (The total of | | | | | (d) Disbursements |
| | | amounts in columns (b), (c), and (d) may not necessarily equal | (a) Revenue and expenses per | | investment | (c) Adjusted net | for charitable |
| | | the amounts in column (a) (see instructions)) | books | ın | come | ıncome | purposes (cash basis only) |
| _ | 1 | Contributions, gifts, grants, etc., received (attach schedule) | coasac | | | | |
|) 100 | 2 | Check ► ☐ If the foundation is not required to attach Sch. B | 693238 | | | | |
| 17 | 3 | Interest on savings and temporary cash investments | | | | | |
| 0 | 4 | Dividends and interest from securities | | | 2000- | | |
| > | 1 _ | | 76235 | | 76235 | 76235 | |
| _ | 5a | Gross rents | | | | | |
| ≤ g e | b | Net rental income or (loss) | | | | | |
| Revenue | 6a | Net gain or (loss) from sale of assets not on line 10 | 1032676 | | | | |
| ē | b | Gross sales price for all assets on line 6a | | | | | |
| .: ₫ | 7 | Capital gain net income (from Part IV, line 2) | | | 1041808 | | |
| | 8 | Net short-term capital gain | | | | 0 | |
| = | 9 | Income modifications | | | | | |
| いた。 である Re | 10a | Gross sales less returns and allowances | | | | | |
| Ď. | b | Less: Cost of goods sold | | | | 4 **** | |
| | C | Gross profit or (loss) (attach schedule) | | | | | |
| | 11 | Other income (attach schedule) | 429 | | | | |
| | 12 | Total. Add lines 1 through 11 | 1802578 | | 1118043 | 76235 | |
| Ś | 13 | Compensation of officers, directors, trustees, etc. | | | | | ···· |
| Se | 14 | Other employee salaries and wages | | | | | |
| ě | 15 | Pension plans, employee benefits | | | | | |
| Expenses | 16a | Legal fees (attach schedule) | | | | | · · · - · · · · · · · · · · · · · · · · |
| | b | Accounting fees (attach schedule) | | | | | |
| Ě | С | Other professional fees (attach schedule) | 5088 | L | 5088 | 5088 | 5088 |
| īra | 17 | Interest | | | | | · · · · · · · · · · · · · · · · · · · |
| is | 18 | Taxes (attach schedule) (see instructions) 2000 1000 1000 100000 100000 100000 100000 100000 100000 1000000 | 3833 | | 3833 | 3833 | 3833 |
| Operating and Administrative | 19 | Depreciation (attach schedule) and depletion | 1 | | | | |
| þ | 20 | Occupancy | | | | | |
| P | 21 | Travel, conferences, and meetings | | | | | |
| Ĕ | 22 | Printing and publications | | | | | |
| Ď | 23 | Other expenses (attach schedule) | 25 | | 25 | 25 | 25 |
| Ē | 24 | Total operating and administrative expenses. | | | | | |
| ž | | Add lines 13 through 23 | 8946 | | 8946 | 8946 | 8946 |
| ğ | 25 | Contributions, gifts, grants paid | 121750 | | | | 121750 |
| J | 26 | Total expenses and disbursements. Add lines 24 and 25 | 130696 | | 8946 | 8946 | 130696 |
| | 27 | Subtract line 26 from line 12 | | , | | | |
| | а | Excess of revenue over expenses and disbursements | 1671882 | 1 | | | |
| | b | Net investment income (if negative, enter -0-) . | | | 1109097 | | |
| | C | Adjusted net income (if negative, enter -0-) | | · | | 67289 | |
| | | The state of the s | | | | | |

| Ðε | rt If | Attached schedules and amounts in the description column Beginning of year End of year | | f year | |
|--------------------|--------|---|--------------------------|----------------|-----------------------|
| | النحد | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | 63451 | 43227 | 43227 |
| | 2 | Savings and temporary cash investments | | | |
| | 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 ▶ | | | |
| ţ | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| As | 10a | Investments—U.S. and state government obligations (attach schedule) | | | |
| | ь | Investments—corporate stock (attach schedule) | 1544117 | 1339195 | 2204116 |
| | С | Investments—corporate bonds (attach schedule) | 34992 | 1155793 | 1108971 |
| | 11 | Investments—land, buildings, and equipment: basis ▶ | | | 1100011 |
| | | 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 ► Commodities / Real Estate) | 29310 | 174892 | 143923 |
| | 16 | Total assets (to be completed by all filers—see the | 25510 | 174032 | 143323 |
| | | instructions. Also, see page 1, item l) | 1671870 | 2713107 | 3500237 |
| | 17 | Accounts payable and accrued expenses | 1071070 | 2713107 | 3300237 |
| | 18 | Grants payable | | | |
| es | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| ab | 21 | Mortgages and other notes payable (attach schedule) | | | |
| Ξ | 22 | | | | |
| | 23 | Other liabilities (describe ►) Total liabilities (add lines 17 through 22) | | | |
| | 20 | | | | |
| 98 | | Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31. | | | |
| Balance | 24 | Unrestricted | | | |
| <u>ā</u> | | | | | |
| Ba | 25 | Temporarily restricted | | | |
| Þ | 26 | Permanently restricted | | | |
| Net Assets or Fund | | Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31. | | • | |
| ž | 07 | | | | |
| S | 27 | Capital stock, trust principal, or current funds | | - | |
| set | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| Ass | 29 | Retained earnings, accumulated income, endowment, or other funds | 1671870 | 2713107 | |
|)t/ | 30 | Total net assets or fund balances (see instructions) | 1671870 | 2713107 | |
| ž | 31 | Total liabilities and net assets/fund balances (see | | + | |
| | et 111 | instructions) | 1671870 | 2713107 | |
| | rt III | Analysis of Changes in Net Assets or Fund Balances | mp (a) line 20 / | garoo with 1 | |
| • | | Il net assets or fund balances at beginning of year—Part II, colui- of-year figure reported on prior year's return) | | 1 1 | |
| _ | | · · · · · · · · · · · · · · · · · · · | | | 1671870 |
| 2 | | | | | 1671882 |
| 3 | | | | | . 76 |
| 4 | | lines 1, 2, and 3 | | | 3343828 |
| 5 | | reases not included in line 2 (itemize) Stock Donation FMV over | | 5 | 630721 |
| <u> 6</u> | ıota | I net assets or fund balances at end of year (line 4 minus line 5)—I | Part II, column (b), lin | e 30 6 | 2713107 |

| Part | IV Capital Gains and | Losses for Tax on Investm | ent Income | | | | |
|----------|--|--|---------------------------------------|--|----------|-------------------------------|---|
| | | ne kind(s) of property sold (e.g., real estate ise, or common stock, 200 shs MLC Co.) | | (b) How acquired P-Purchase D-Donation | | ate acquired o., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a | NT STMT Attached Page 15 | of 40 (Short term) | | Р | | var | var |
| b | NT STMT Attached Page 21 | of 40 (Short Term) | | Р | | var | var |
| C | NT STMT Attached Page 20 | of 40 (Long Term) | | Р | | var | var |
| d | NT STMT Attached Page 23 | of 40 (Long Term) | ·-· | Р | | var | var |
| е | Capital Gain Dividends | | | Р | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | | other basis ense of sale | | | or (loss)) minus (g) |
| а | 1784806 | | • | 1793947 | | | -9139 |
| b | 69324 | | | 69317 | | | 7 |
| С | 1862019 | | | 1090955 | | | 771064 |
| d_ | 415615 | | | 161877 | <u> </u> | | 253738 |
| е | | | | | | | 17006 |
| | Complete only for assets sho | owing gain in column (h) and owned | by the foundation | on 12/31/69 |] | (I) Gains (Col. | . (h) gain minus |
| | (i) F.M.V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | ss of col. (i) (j), if any | | col. (k), but not | less than -0-) or rom col. (h)) |
| a | | | | · | | | |
| b | | | | | | | |
| С | | | | | | | |
| <u>d</u> | | | | | | | |
| е | | | | | | _ | |
| 2 | Capital gain net income o | r (net canital inee) { | also enter in Pa , enter -0- in Pa | | 2 | | 1041808 |
| 3 | If gain, also enter in Part | n or (loss) as defined in sections I, line 8, column (c) (see instructions | ctions). If (loss) | , enter -0- in (| | | |
| Part | | ler Section 4940(e) for Redu | | | 3 | | -9132 |
| Was t | | re this part blank. section 4942 tax on the distribut qualify under section 4940(e). D | | | base p | eriod? | ☐ Yes ☑ No |
| 1 | | ount in each column for each yea | ar; see the instr | uctions before m | aking a | any entries. | |
| Cale | (a) Base period years endar year (or tax year beginning in | (b) Adjusted qualifying distributions | s Net value o | (c) of noncharitable-use a | ssets | | (d) ribution ratio divided by col. (c)) |
| | 2014 | 5 | 1090 | 120 | 00363 | | .04256 |
| | 2013 | | 8197 | 112 | 23882 | • | .05178 |
| | 2012 | | 6397 | 103 | 33608 | | .05456 |
| | 2011 | 5 | 8764 | 93 | 34362 | | .06289 |
| | 2010 | | 4236 | 199 | 97173 | | .04272 |
| | | | | | | | |
| 2 | Total of line 1, column (d) | | | | | 2 | .25451 |
| 3 | | for the 5-year base period—divi | | | the | | |
| | number of years the foun | dation has been in existence if le | ss than 5 years | | · L | 3 | .0509 |
| 4 | Enter the net value of nor | ncharitable-use assets for 2015 for | rom Part X, line | 5 | . [| 4 | 2957116 |
| 5 | Multiply line 4 by line 3 | | | | . | 5 | 150507 |
| 6 | Enter 1% of net investme | nt income (1% of Part I, line 27b |) | | . | 6 | 11090 |
| 7 | Add lines 5 and 6 | | | | . | 7 | 139427 |
| 8 | | ons from Part XII, line 4 ater than line 7, check the box in | | | | 8 art using a 1 | 130696 |
| | Part VI instructions. | ator than line 1, theor the box if | w | o, and complete | mar pa | art using a l | ,, iax iaie. See ille |

| Part ' | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i | nstru | ctior | 15) | | | |
|--------|--|----------|-------|---------------|--|--|--|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) | | | | | | |
| b | b Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | | | | |
| | here ▶ □ and enter 1% of Part I, line 27b | | | | | | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | | | | |
| 3 | Add lines 1 and 2 | 2 | 2182 | | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | 2 | 2182 | , | | | |
| 6 | Credits/Payments: | | - 1 | | | | |
| a | 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 3927 | | - | | | | |
| b | Exempt foreign organizations—tax withheld at source 6b | | - 1 | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) . 6c | | | | | | |
| _d | Backup withholding erroneously withheld | | | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | | 3927 | | | | |
| 8 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 0255 | | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10 | <u>'</u> | 8255 | | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2016 estimated tax | | | | | | |
| | VII-A Statements Regarding Activities | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No | | | |
| | participate or intervene in any political campaign? | 1a | | | | | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? | 1b | | ✓ | | | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | | | |
| С | c Did the foundation file Form 1120-POL for this year? | | | | | | |
| d | | | | | | | |
| | (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ | | | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | ✓ | | | |
| 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 | 3 | | | | | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | | | | |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | | | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | ✓ | | | |
| 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 | | i | | | | |
| | conflict with the state law remain in the governing instrument? | 6 | 1 | | | | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | 7 | ✓ | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ | | ļ | | | | |
| | Illinois | |] | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | | | | |
| | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | 1 | | | | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | | | | |
| | 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," | _ | Į | , | | | |
| 10 | complete Part XIV | 9 | | √ | | | |
| 10 | names and addresses | 10 | 1 | | | | |

| 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 | | 1 |
| 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) | 1 | | , |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application | 12 | 1 | / |
| | Website address ► N/A | | · · | |
| 14 | The books are in care of ▶ Daniel R. Chapin Telephone no. ▶ | 847 909 | 8351 | |
| | Located at ► P. O. Box 550, Hampshire, IL ZIP+4 ► | 60140- | 0550 | <u></u> - |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 | | • | ▶∟ |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other author | rity | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | 1 | 1 |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name the foreign country ▶ | of | | |
| Part | VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | <u> </u> |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | lo | | |
| | disqualified person? | lo | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | lo | } | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | ŀ | | |
| | (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.) | lo | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulation | n e | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | |
| С | Organizations relying on a current notice regarding disaster assistance check here | _ | | |
| _ | were not corrected before the first day of the tax year beginning in 2015? | 1c | | 1 |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a prival operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | te | | |
| а | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? | lo | | |
| | If "Yes," list the years ► 20 , 20 , 20 , 20 | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)((relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) all years listed, answer "No" and attach statement—see instructions.) | | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20 | 20 | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | lo | | |
| b | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation | ľ | | |
| - | 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 | ie 💮 | | |
| | 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 chantable purposes | | | 1 |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019 | | | |
| | Silantable parpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015 | 6? 4b | L | ✓ |

| Part | VII-B Statements Regarding Activities | for W | /hich Form | 4720 | May Be R | equire | d (contin | ued) | | |
|---------------|--|-----------|--|-----------|----------------------|------------|---|-------------------|----------------------|--|
| 5a | Duning the year did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt to | - | | ın (sect | ion 4945(e) | 12 | 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? | | | | | | | | | |
| | (4) Provide a grant to an organization other than | a cha | | organız | ation desci | ibed in | | ☑ No | | |
| | (5) Provide for any purpose other than religious, | charita | able, scientifi | c, litera | ry, or educ | ational | | ☑ No | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in | | | | | | | | | |
| | Organizations relying on a current notice regarding | - | - | | • | | | | 5b | |
| С | If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility | he four | ndation claim | exem | otion from | | Yes | □No | | |
| • | If "Yes," attach the statement required by Regula | | | | | | _ | | | |
| 6a | Did the foundation, during the year, receive any on a personal benefit contract? | runas, | | irectly | , to pay pre | emiums | □ Yes | ✓ No | | |
| b | Did the foundation, during the year, pay premium | ns, dıre | ctly or indire | ctly, on | a personal | benefit | t contract? | · . | 6b ✓ | |
| 7a | If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a | a party | to a prohibited | l tax sh | elter transac | tion? | ∏Yes | √ No | | |
| | If "Yes," did the foundation receive any proceeds | or hav | ve any net ind | ome a | tributable | o the t | ransaction | ? . | 7b | |
| Par | Information About Officers, Direct and Contractors | tors, 1 | Trustees, F | ounda | tion Mana | agers, | Highly P | aid E | mployees, | |
| 1 | List all officers, directors, trustees, foundation | mana | ners and th | eir com | neneation | (see i | etruction | e) | | |
| | | (b) Title | e, and average | (c) Co | mpensation | (d) (| Contributions | to | (e) Expense account, | |
| | (a) Name and address | | rs per week ed to position | | ot paid, ter -0-) | | yee benefit perred comper | | other allowances | |
| Daniel | R. Chapin, P. O. Box 550, Hampshire, IL 60140 | Pres/D | ir nil | | -0- | | | -0- | -0- | |
| Marily | n M. Chapin, P. O. Box 550, Hampshire, IL 60140 | 1100,1 | | | | | | | | |
| | | Sec/Di | r nil | | -0- | | | -0- | -0- | |
| | pher J. Chiverina, P. O. Box 550, Hanpshire, IL | _ | ., | | | | | | | |
| <u> 50140</u> | | Dır | nil | | -0- | | | -0- | -0- | |
| | | | | | | | | | <u> </u> | |
| 2 | Compensation of five highest-paid employee "NONE." | es (oth | er than thos | se incli | uded on li | ne 1—: | see instru | ction | s). If none, enter | |
| | (a) Name and address of each employee paid more than \$50,00 | 0 | (b) Title, and a hours per v devoted to pe | /eek ¯ | (c) Comper | sation | (d) Contribut employee to plans and do compens | enefit eferred | (e) Expense account, | |
| None | | | | - | | | | | | |
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| | | | | | | | | | | |
| | | | 1 | | | | | | | |
| Total | number of other employees paid over \$50,000 . | · · · · · | | | <u> </u> | | <u> </u> | . • | | |
| | | <u> </u> | | | | <u> </u> | | | 000 DE | |

| Form 9 | 90-PF | (201 | 5) |
|--------|-------|------|----|
|--------|-------|------|----|

Page 7

| Part | Information About Officers, Directors, Trustees, Foundation and Contractors (continued) | dation Managers, Highly Paid Em | ployees, |
|------------|--|---|------------------|
| 3 | Five highest-paid independent contractors for professional services (| see instructions). If none, enter "NON | E." |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| The No | rthern Trust Company, 770 Northwest Highway, Barrington, IL 60010 | Investment management | 5089 |
| | | | |
| Total r | number of others receiving over \$50,000 for professional services . | | |
| Part | IX-A Summary of Direct Charitable Activities | | |
| List to | he foundation's four largest direct charitable activities during the tax year. Include relevantizations and other beneficianes served, conferences convened, research papers produced, | nt statistical information such as the number of etc. | Expenses |
| 1 <u>T</u> | he foundation makes unrestricted donations to qualuiied charitable organiz | ations. | |
| | | | nil |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| Part | | | |
| | ribe the two largest program-related investments made by the foundation during the tax year | ar on lines 1 and 2 | Amount |
| 1 N | one | | |
| 2 | | | |
| All of | her program-related investments. See instructions. | | |
| Total. | Add lines 1 through 3 | | |

| Part | Minimum Investment Return (All domestic foundations must complete this part. Forei | gn founda | ıtions, |
|------|---|--------------|-------------|
| | see instructions.) | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 2967890 |
| b | Average of monthly cash balances | 1b | 34258 |
| C | Fair market value of all other assets (see instructions) | 1c | 01200 |
| d | Total (add lines 1a, b, and c) | 1d | 3002148 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | 0002110 |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 3002148 |
| 4 | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see | | 3002140 |
| - | instructions) | 4 | 45032 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 2957116 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 147856 |
| Part | | | |
| | and certain foreign organizations check here ▶ □ and do not complete this part.) | ourrau | • |
| 1 | Minimum investment return from Part X, line 6 | T 1 | 147856 |
| 2a | Tax on investment income for 2015 from Part VI, line 5 | | 147030 |
| b | Income tax for 2015. (This does not include the tax from Part VI.) 2b | † † | |
| c | Add lines 2a and 2b | 2c | 22182 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 125674 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 123074 |
| 5 | Add lines 3 and 4 | 5 | 125674 |
| 6 | Deduction from distributable amount (see instructions) | 6 | 123074 |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | 7 | 125674 |
| | | . • . | 123074 |
| Part | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | T | |
| a | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 | 1a | 130696 |
| b | Program-related investments—total from Part IX-B | 1b | 130030 |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| _ | purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | - | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 130696 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | | 130030 |
| - | Enter 1% of Part I, line 27b (see instructions) | 5 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 130696 |
| • | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating | | |
| | qualifies for the section 4940(e) reduction of tax in those years. | | |

| Part | XIII Undistributed Income (see instruction | ns) | | | |
|------|--|---------------|---|-------------|--------------------|
| 1 | Distributable amount for 2015 from Part XI, line 7 | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
| 2 | Undistributed income, if any, as of the end of 2015: | | | | 125674 |
| a | Enter amount for 2014 only | | | 0 | |
| b | Total for prior years: 20 ,20 ,20 | | 0 | | |
| 3 | Excess distributions carryover, if any, to 2015: | | 0 | | |
| а | From 2010 6107 | | | | |
| b | From 2011 | | | | |
| С | From 2012 0 | | | | |
| d | From 2013 0 | j | | | |
| е | From 2014 0 | | | 1 | |
| f | Total of lines 3a through e | 9665 | | | |
| 4 | Qualifying distributions for 2015 from Part XII, | | | | |
| | line 4: ▶ \$130696 | | | | |
| а | Applied to 2014, but not more than line 2a. | | | 0 | |
| Ь | Applied to undistributed income of prior years | - | | | |
| | (Election required—see instructions) | | 0 | | |
| С | Treated as distributions out of corpus (Election required—see instructions) | _ | | | |
| d | Applied to 2015 distributable amount | | - · · · · · · · · · · · · · · · · · · · | | 125674 |
| е | Remaining amount distributed out of corpus | | | | |
| 5 | Excess distributions carryover applied to 2015 | | | | 0 |
| | (If an amount appears in column (d), the same | | | | |
| c | amount must be shown in column (a).) | ļ | | | |
| 6 | Enter the net total of each column as indicated below: | | | | |
| a | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 5022 | | | |
| b | Prior years' undistributed income. Subtract line 4b from line 2b | | | | |
| | · · · · · · · · · · · · · · · · · · · | | <u>-</u> | | |
| С | Enter the amount of prior years' undistributed income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | | | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b. Taxable | | | | |
| _ | amount - see instructions | | | | |
| е | Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount—see | | | | |
| | instructions | | | | |
| f | Undistributed income for 2015. Subtract lines | | - ·- - - ···- | | |
| 1 | 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). | 6107 | | | |
| 9 | Excess distributions carryover to 2016. | | | | |
| | Subtract lines 7 and 8 from line 6a | 8580 | | <u> </u> | |
| 10 | Analysis of line 9: | | | | |
| а | Excess from 2011 | | | | |
| b | Excess from 2012 | | | | |
| C | Excess from 2013 | | | | |
| d | Excess from 2014 | | | | |
| 8 | Excess from 2015 | | | 1 | |

| | VIV Direct On the First | | 11 | /// A | | · Fage 10 |
|------------|--|---------------------------------------|---------------------|---------------------|---------------------|----------------------|
| Part | | · · · · · · · · · · · · · · · · · · · | | | <u> </u> | |
| Та | If the foundation has received a ruling | | | | | |
| | foundation, and the ruling is effective for | | _ | | | /A |
| b | Check box to indicate whether the four | | operating foundati | | ection | (3) or 4942(j)(5) |
| 2 a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | (e) Total |
| | income from Part I or the minimum investment return from Part X for | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (0) 1014 |
| | each year listed | | | | | |
| b | 85% of line 2a | | | | | |
| C | Qualifying distributions from Part XII, | | | | | |
| | line 4 for each year listed | u. | | | | |
| d | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| _ | ' | | | | | |
| 8 | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| а | "Assets" alternative test-enter. | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under | | | | | |
| | section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test—enter 2/3 | | | | | |
| | of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| С | "Support" alternative test-enter. | | | | | |
| | (1) Total support other than gross | | | | | |
| | investment income (interest, | | | | | |
| | dividends, rents, payments on securities loans (section | | | | | |
| | 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public | | | | | |
| | and 5 or more exempt organizations as provided in | | | | | |
| | section 4942(j)(3)(B)(III) | | ` | | | |
| | (3) Largest amount of support from | | | | | |
| | an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| Part | XV Supplementary Information | on (Complete th | is part only if the | ne foundation h | ad \$5,000 or m | ore in assets at |
| | any time during the year- | -see instructior | 15.) | | | |
| 1 | Information Regarding Foundation | Managers: | | | | |
| а | List any managers of the foundation | | | | | by the foundation |
| | before the close of any tax year (but o | only if they have co | ontributed more th | an \$5,000). (See s | section 507(d)(2).) | |
| Daniel | R. and Marilyn M. Chapin, P. O. Box 550, | Hampshire, IL 601 | 40-0550 | | | |
| b | List any managers of the foundation | | | | | arge portion of the |
| | ownership of a partnership or other en | ntity) of which the | foundation has a | 10% or greater int | erest. | |
| N/A | | | | | | |
| 2 | Information Regarding Contribution | n, Grant, Gift, Loa | ın, Scholarship, e | tc., Programs: | | |
| | Check here ► ✓ if the foundation | only makes contr | ributions to presel | lected chantable | organizations and | does not accept |
| | unsolicited requests for funds. If the f | | gifts, grants, etc. | (see instructions) | to individuals or o | rganizations under |
| | other conditions, complete items 2a, I | o, c, and d. | | | | |
| а | The name, address, and telephone nu | ımber or e-mail ad | idress of the perso | on to whom applic | ations should be | addressed: |
| | | | | | | |
| N/A | | | | | | |
| b | The form in which applications should | l be submitted and | d information and i | materials they sho | ould include: | |
| | | | | | | |
| N/A | | | | | | |
| С | Any submission deadlines. | | | | | |
| N/A | American and the second | | | L state of | | 111 1 1 |
| d | Any restrictions or limitations on av | vards, such as b | y geographical ar | eas, charitable fi | eias, kinas of ins | stitutions, or other |
| | factors: | | | | | |
| N/A | | | | | | |

| Part | | tinued) | | | |
|-------|---|--|-----------|----------------------------------|-------------|
| 3 | Grants and Contributions Paid During | | | ture Payment | |
| | Recipient | If recipient is an individual, show any relationship to any foundation manager | status of | Purpose of grant or contribution | Amount |
| | Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| а | Paid during the year | |] | | |
| Sched | lule Attached | | | | 121750 |
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| h | Total | | · · · · | <u> ▶ 3.</u> | 121750 |
| - | r pprovod for latero payment | | | | |
| None | | | | | |
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| | Total | | | | h 121750 |

| | | Analysis of Income-Producing Ac | | | Trustinged by seek | E10 E10 E14 | |
|------------------------|------------------------------|--|----------------------------|----------------|---|--------------------------------------|---|
| :nte | er gros | s amounts unless otherwise indicated. | (a) Business code | (b) Amount | (c) Excluded by sector | on 512, 513, or 514 (d) Amount | (e) Related or exempt function income (See instructions.) |
| 1 | Prog | ram service revenue: | 540111000 0000 | , anodre | Exolosion oods | | (See mandenons.) |
| | a N | /A | | | | | |
| | b _ | | | | | | |
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| | f | | | | | | |
| | g F | ees and contracts from government agencies | | | | | |
| 2 | Mem | bership dues and assessments | | | | | |
| 3 | Intere | est on savings and temporary cash investments | | | | | |
| 4 | Dıvid | ends and interest from securities | | | | | |
| 5 | Net r | ental income or (loss) from real estate: | 4 , | | | | |
| | a D | ebt-financed property | | | | | |
| | b N | lot debt-financed property | | | | | |
| 6 | Net r | ental income or (loss) from personal property | | | 1 | | |
| 7 | Othe | r investment income | | | | | |
| 8 | Gain | or (loss) from sales of assets other than inventory | | | | | |
| 9 | Net II | ncome or (loss) from special events | | | | | |
| 10 | | s profit or (loss) from sales of inventory | | | | | |
| | | r revenue: a | | | | | |
| | b | | | | | | |
| | c _ | | | | | | |
| | d _ | | | | | | |
| | е _ | | | | | | |
| 12 | Subte | otal. Add columns (b), (d), and (e) | | | | · · · · | |
| | | | | | • | | · |
| 13 | | L Add line 12, columns (b), (d), and (e) | | . . | | 13 | |
| 13 Sec | works | sheet in line 13 instructions to verify calculation | s.) | | | 13 | · |
| 13 See Pa | works | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A | s.) | | | 13 | |
| 13 See Pa | works | sheet in line 13 instructions to verify calculation | s.) ccomplishm e | ent of Exemp | ot Purposes | | mportantly to the |
| 13 See Pa Lin | works rt XV e No. | sheet in line 13 instructions to verify calculation Relationship of Activities to the A | s.) ccomplishm e | ent of Exemp | ot Purposes | | mportantly to the |
| 13 See Pa Lin | works rt XV e No. ▼ | sheet in line 13 instructions to verify calculation Relationship of Activities to the A | s.) ccomplishm e | ent of Exemp | ot Purposes | | mportantly to the titions.) |
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| 13 See Pa Lin | works rt XV e No. ▼ | sheet in line 13 instructions to verify calculation Relationship of Activities to the A | s.) ccomplishm e | ent of Exemp | ot Purposes | | mportantly to the |

| Form 990 |)-Ph (2) | U15) | | | | | | Page 13 |
|------------|---------------|---|--|---|---|---|-------------------------------------|--|
| Part | XVII | | n Regarding Trai rganizations | nsfers To and Tran | sactions ar | nd Relationshi | ps With Noncha | aritable |
| | ın sed | | | engage in any of the f section 501(c)(3) orga | | | | Yes No |
| а | Trans | sfers from the rep | porting foundation t | o a noncharitable exe | mpt organiza | tion of: | | |
| | (1) C | ash | | | | | | 1a(1) ✓ |
| | • • | ther assets . | | | | | | 1a(2) ✓ |
| | | r transactions: | | | | | | |
| | | | a noncharitable ex | | | | | 1b(1) 🗸 |
| | | | | able exempt organiza er assets | | | | 1b(2) / |
| | | | | | | | | 1b(3) \(\sqrt{1b(4)} \) |
| | | | | · · · · · · · · · | | | | 1b(5) ✓ |
| | | | | hip or fundraising solid | | | | 1b(6) ✓ |
| | | | | sts, other assets, or p | | | | 1c 🗸 |
| | | | | s," complete the follo | | | | w the fair market |
| | | | | ices given by the repo | | | | |
| | | | | gement, show in colun | | | | |
| (a) Line | no. (| b) Amount involved | (c) Name of nonc | hantable exempt organization | on (d) [| Description of transfer | s, transactions, and sh | anng arrangements |
| N/A | - | | | | | <u> </u> | | |
| | | | | | | | | · · · · · · · · · · · · · · · · · · · |
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| 2a | le the | foundation dire | ectly or indirectly of | filiated with, or relate | d to one or | more toy evem | t organizations | |
| 20 | desci | ribed in section 5 | 501(c) of the Code (| other than section 501 | a to, one or (c)(3)) or in se | ection 5277 | n organizations r | 7 Van [7] Na |
| | | | e following schedule | | (0)(0)) 0, 0 | | [| ⊒ res [v] NO |
| | | (a) Name of organ | | (b) Type of orga | anization | | (c) Description of relation | onship |
| N/A | | | · | | | · | <u> </u> | · · · · · · · · · · · · · · · · · · · |
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| | | | | | | | | |
| Cian | Unde corre | r penalties of perjury, I ct, and complete. Deci | l declare that I have examin laration of preparer (other th | ed this return, including accon ian taxpayer) is based on all in | npanying schedule formation of which | es and statements, and n preparer has any know | to the best of my knowle vledge. | dge and belief, it is true, |
| Sign | l k | 1/20 | PC IA | | L | · p. opa. o. mao any mio. | May the | IRS discuss this return |
| Here | | ature of officer or tru | istee | 3/19/16 Date | Pres. | . | | preparer shown below uctions)? Yes No |
| | L | Print/Type preparer | | Preparer's signature | | Date | | PTIN |
| Paid | | Self Prepared | | . Topacor o dignaturo | | Cate | Check if self-employed | 1 144 |
| Prepa | | Firm's name | | | | | Firm's EIN ▶ | · |
| Use C | niy | Firm's address | | | | | Phone no. | |
| | | | | | | | | |

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** Dan and Micki Chapin Fund, Inc. 36-4147435

| Organiz | Organization type (check one): | | | | | |
|----------------------|--|--|--|--|--|--|
| Filers o | f: | Section: | | | | |
| Form 99 | 90 or 990-EZ | 501(c)() (enter number) organization | | | | |
| | | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | |
| | | ☐ 527 political organization | | | | |
| Form 99 | 10-PF | √ 501(c)(3) exempt private foundation | | | | |
| | | ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | |
| | | ☐ 501(c)(3) taxable private foundation | | | | |
| Note. O instructi | nly a section 501(c)(7) | covered by the General Rule or a Special Rule. I, (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See | | | | |
| Genera | i Rule | | | | | |
| Ø | | iling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a intributions. | | | | |
| Special | Rules | | | | | |
| | regulations under se 13, 16a, or 16b, and | described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line that received from any one contributor, during the year, total contributions of the greater of (1) he amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. | | | | |
| | contributor, during th | lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one se year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, all purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. | | | | |
| | contributor, during the contributions totaled during the year for al General Rule applie | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ne year, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were received in exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the set to this organization because it received nonexclusively religious, charitable, etc., contributions ore during the year | | | | |
| Caution | An organization that | is not covered by the General Rule and/or the Special Rules does not file Schodule R / Sam 200 | | | | |

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Dan and Micki Chapin Fund, Inc.

Employer identification number
36-4147435

| Part I | Contributors (see instructions). Use duplicate co | ppies of Part I if additional space is | needed. |
|------------|---|--|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | Daniel R. and Marilyn M. Chapin P. O. Box 550, Hampshire, IL 60140-0550 | \$ 693213 | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization **Employer identification number** Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 2900 shs LGND 2220 shs AMGN 1 693213 12/29/15 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) FMV (or estimate) (b) (d) from Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions)

Name of organization

Employer identification number

| Part III | Exclusively religious, charitable, etc., contributions to organizations described in section 501(c) (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) > \$ Use duplicate copies of Part III if additional space is needed. | | | | |
|---------------------------|--|-----------------------|--|--|--|
| (a) No. | Use duplicate copies of Part III if ad | ditional space is nee | ded. | | |
| from Part I | (b) Purpose of gift (c) Use of gift | | (d) Description of how gift is held | | |
| | | | | | |
| - | | (e) Trans | sfer of gift | | |
| | Transferee's name, address, a | and ZIP + 4 | Relation | nship of transferor to transferee | |
| (a) No. | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | |
| Part I | | | | | |
| | | (e) Trans | fer of gift | | |
| | Transferee's name, address, | and ZIP + 4 | Relation | Relationship of transferor to transferee | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | |
| | | (e) Trans | fer of gift | | |
| | Transferee's name, address, | and ZIP + 4 | Relation | nship of transferor to transferee | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | |
| | | , | | | |
| | Transferee's name, address, | | sfer of gift Relationship of transferor to transferee | | |
| - | Transfere a name, auuress, | | | | |
| | | | | | |

2015 Balance Due

Dan and Mickic Chapin Fund, Inc. 36-4147435

This check for \$18255 is the 2015 balance due.

Form 2220 is attached to the return. Please handle this properly so we can avoid unecessary corespondence.

| Dan and Micki Chapin Fund 36-4147435 | | 2015 Contributions |
|--|----------------------------|-----------------------|
| Idaho Public Television | | 2500 |
| 1455 N. Orchard St. Camp Rainbow Gold | Boise, ID 83706-2239 | 1500 |
| 2216 W. Jefferson St. | Boise, ID 83702 | |
| Boise State Public Radio | | 2500 |
| 1910 University Dr. | Boise, ID 83725-1915 | |
| Sun Valley Center for the Arts | | 2500 |
| P. O. Box 656 | Sun Valley, ID 83353 | |
| Animal Shelter-Wood River Valley | | 3500 |
| PO Box 1496 | Hailey, ID 83333 | |
| Sun Valley Summer Symphony | | 5000 |
| P. O. Box 1914 | Sun Valley, ID 83353 | 40500 |
| Spectrum Institute for Low Vision | M/h = -4 = 11 CO407 | 12500 |
| 219 E. Cole Ave. | Wheaton, IL 60187 | 7500 |
| Salvation Army 5040 N. Pulaski Rd. | Chicago II 60630 2789 | 7500 |
| Anticruelty Society | Chicago, IL 60630-2788 | 2500 |
| 157 W Grand Ave | Chicago, IL 60654-7174 | 2300 |
| Assisi Animal Foundation | 5/110dg0, 12 00054-7 174 | 2000 |
| P. O. Box 143 | Crystal Lake, IL 60039-143 | 2000 |
| St. Luke's Wood River Foundation | | 750 |
| PO Box 7005. | Ketchum ID 83340 | |
| Sun Valley Jazz Jamboree | | 2000 |
| P. O. Box 2745 | Sun Valley, ID 83353 | |
| National Trust for Historic Preservation | | 2000 |
| 1785 Massachusetts Ave. NW | Washington, DC 20036-2117 | |
| Save A Pet | | 1500 |
| 31664 N. Fairfield Rd. | Grayslake, IL 60030 | |
| Wood River Women's Charitable Found | dation | 2500 |
| PO Box 3686 | Ketchum ID 83340 | |
| Hunger Coalition | -- | 3500 |
| 121 Honeysuckle St. | Belleview, ID 83313-5095 | 0.500 |
| Boise Philharmonic | D : ID 00700 | 2500 |
| 516 S. 9th St. | Boise, ID 83702 | |

| The Advocates | | 3500 |
|-------------------------------------|-----------------------------|--------|
| P. O. Box 3216 | Hailey, ID 83333 | |
| Wood River Land Trust | | 5000 |
| 119 E. Bullion St. | Hailey, ID 83333 | |
| Hospice of the Wood River Valley | | 3500 |
| P. O. Box 4320 | Ketchum ID 83340 | |
| Senior Connection | | 5000 |
| P. O. Box 28 | Hailey, ID 83333 | |
| Crisis Hotline | | 2500 |
| P. O. Box 939 | Ketchum ID 83340 | |
| Ketchum Jazz in the Park | | 1000 |
| % W. Caldwell, P. O. Box 1450 | Sun Valley, ID 83353 | |
| Sawtooth Society | | 2500 |
| P. O. Box 209 | Stanley, ID 83278 | |
| Doctors Without Borders USA | | 7500 |
| 333 7th Ave. | New York, NY 10001-5004 | |
| Sawtooth Botanical Gardens | | 2500 |
| PO Box 928 | Sun Valley, ID 83353 | |
| Children's Scholaeship Fund | | 12500 |
| 8 W. 38th Street, 9th Floor | | |
| Disabled American Veterans Charitab | le Service Trust | 2500 |
| 3725 Alexandria Pike | Cold Spring, KY 41076 | |
| Higher Ground Sun Valley | | 5000 |
| PO Box 6791 | Ketchum ID 83340 | |
| Community Library | | 2000 |
| PO Box 2168 | Ketchum ID 83340 | |
| Crystal Lake Food Pantry | | 2000 |
| 257 King St. | Crystal Lake, IL 60014 | |
| Raue Center for the Arts | | 2000 |
| 26 N Williams St. | Crystal Lake, IL 60014 | |
| Pioneer Center for Human Services | | 2000 |
| 4100 Veterans Parkway | McHenry, IL 60050 | 0000 |
| AAPT Donations | | 2000 |
| One Physics Elipse | College Park. MD 20740 | |
| CSU Foundation | | |
| P. O. Box 1870 | Fort Collins, CO 80522-1870 | 2000 |
| TOTAL | | 404750 |
| TOTAL | | 121750 |

may

2015

| Dan and Mickic Chapin Fund, Inc. | Income, Expense and Distribution Sumr | 36-4147435 |
|----------------------------------|---------------------------------------|------------|
|----------------------------------|---------------------------------------|------------|

| | | 5088 1333 2500 25 8946 | 121750 130696 |
|--|---|--|---|
| U | 76235 0 76235 | 5088 1333 2500 25 8946 | 67289 |
| ωl | 76235 1024802 17006 1118043 | 5088 1333 2500 25 8946 | 1109097 |
| ≜ 693213 25 | 76235 1032676 1024802 17006 -9132 429 1802578 | 5088 1333 2500 25 8946 | 121750 130696 1671882 |
| Part 1 Income line 1 Stock Donated by Chapins Une 1 Cash Donated by Chapins | о е | Line 16c Agency Fees Line 18 Foreign Taxes Line 18 US Taxes Line 23 Filing Fees Total Expenses | Line 25 Charitable Contributions Total Expenses & Distributions Surplus Net Investment Income Adjusted Net Income |

CHAPIN-D&M CHAPIN FUND, INC.

January 1, 2015 - January 31, 2015

Consolidation Overview

Financial Summary

Consolidation Market Values

| | Value as of | Value as of | |
|---------------------------------|------------------|-----------------------------------|------------------|
| Asset Class | January 31, 2015 | anuary 31, 2015 December 31, 2014 | Change |
| Equity Securities | \$1,560,824.15 | \$2,921,283.34 | (\$1,360,459.19) |
| Fixed Income Securities | 1,142,316.66 | | 1,091,466.30 |
| Real Estate | 112,814.43 | 00:00 | 112,814.43 |
| Commodifies | 96,460.53 | 23,772.73 | 72,687.80 |
| Cash and Short Term Investments | 55,508.08 | 60,144.42 | (4,636.34) |
| Total | \$2,967,923.85 | \$3,056,050.85 | (\$88,127.00) |
| | | | |



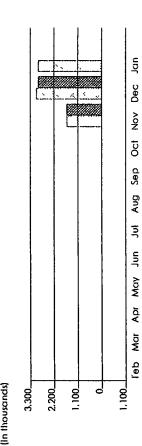
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| Mr. Asta | The State of the S | |

38.5% 33.8% 3.3% 1.9% 100.0%

Equity Securities
| Fixed income Securities
| Real Estate
| Commodities

| Time | |
|-------|--|
| Over | A Post of the Party of the Part |
| Value | (In the property) |



Value

Net Contributions/Withdrawals

115

NNN 000018-002 92

CHAPIN-D&M CHAPIN FUND, INC.

Consolidation Overview December 1, 2015 - December 31, 2015

Financial Summary

Consolidation Market Values

| | Value as of | Value as of | |
|---------------------------------|-------------------|-------------------------------------|--------------|
| Asset Class | December 31, 2015 | December 31, 2015 November 30, 2015 | Change |
| Equity Securities | \$2,204,115.84 | \$1,690,914.41 | \$513,201.43 |
| Fixed Income Securities | 1,108,971.37 | 1,125,687.66 | (16,716.29) |
| Real Estate | 76,817.18 | 76,499.10 | 318.08 |
| Commodifies | 67,106.00 | 74,223.76 | (7,117.76) |
| Cash and Short Term Investments | 43,226.78 | 20,147.43 | 23,079.35 |
| Total | \$3,500,237.17 | \$2,987,472.36 | \$512,764.81 |
| | | | |

Asset Allocation

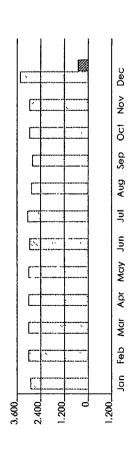
| | | 1000 |
|--|--|------|
|--|--|------|

63.0% 31.7% 2.2% 1.9% 100.0%

Equity Securities
| Fixed Income Securities
| Real Estate
| Commodities

| Time | |
|-------|---|
| Over | |
| Value | ; |

(in thousands)



Value

Net Contributions/Withdrawals

