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## Form **990-PF**

## **Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

2015

Int	emal Reve	nue Service ► Information about Form 990-PF and	l its separ	rate instruction	ns is at ผ	ww.irs.gov/	form990pf. Open	to Public Inspection
		ndar year 2015 or tax year beginning		, 20	15, and			, 20
	Name of fo					A Employer identification number		
	LESNIK CHARITABLE FOUNDATION					36-7293339		
١	Number and street (or P O box number if mail is not delivered to street address)  Room/suite						e number (see instruct	ons)
_	C/O STEVEN H LESNIK, 500 SKOKIE BLVD 444						(847) 480-486	2
	City or town, state or province, country, and ZIP or foreign postal code						tion application is pend	ıng, check here ► [
_ <u>N</u>	IORTHBE	ROOK, IL 60062	<u> </u>					
G	Check			a former pub	lic charity	D 1. Foreigi	n organizations, check	here . ▶ [
			nded retu			2. Foreig	n organizations meeting	the 85% test.
_		Address change Name				check	here and attach compu	rtation · ▶ [
<u>H</u>		type of organization:  Section 501(c)(3) exe					foundation status was 07(b)(1)(A), check here	
		on 4947(a)(1) nonexempt charitable trust 🔲 Oth		_ <del></del>			51 (5)(1)(1), 5) Since it its is	٠ ـ
ı		narket value of all assets at J Accounting m		Cash	Accrual	F If the four	ndation is in a 60-mont	h termination
		f year (from Part II, col. (c),				under se	ction 507(b)(1)(B), chec	k here ► [
_		6) ► \$ 59,035 (Part I, column (d) m	ust be on	cash basıs.)		l	<del></del>	
2©	Part I		(2	a) Revenue and	(b) Ne	investment	(c) Adjusted net	(d) Disbursements for charitable
%0% 		amounts in columns (b), (c), and (d) may not necessarily equivalents in column (a) (see instructions) )	Jal	expenses per books		ncome	income	purposes
	<del></del>						· · · · · · · · · · · · · · · · · · ·	(cash basis only)
<del></del>	1	Contributions, gifts, grants, etc., received (attach sched	· -	180,00	00			
මෙ	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sc						
MAN	3	Interest on savings and temporary cash investme	ents					ļ
Z	4	Dividends and interest from securities			<del></del> -	<del></del>		
	5a	Gross rents	·		<del> </del>			
삏 .	.   b	Net rental income or (loss)	10					
	B   6a	Net gain or (loss) from sale of assets not on line	ייו ויי		0			
SCANNED	[ b	Gross sales price for all assets on line 6a			<del> </del>			
		Capital gain net income (from Part IV, line 2)	·			0		
90 L	-   •	Net short-term capital gain	·	·				
	9	Income modifications	· ,			···-·		
	10a	Gross sales less returns and allowances	0				<del></del>	<del> </del>
	b	Less Cost of goods sold Gross profit or (loss) (attach schedule)	- 0		0			
	11	Other income (attach schedule)	·  -		0	0	0	
	12	Total. Add lines 1 through 11	·  -	180,00		- 0	0	
_	13	Compensation of officers educations the teast of		<del></del>	0	0		
ć	13	Compensation of officers directors in the compensation of the comp	´  -		<del>-</del>	·		
Ş	15	Other employee salaries and wages	•					
Ş	14 15 16a	Other employee salaries and wages Pension plans, employee benefits Legal fees (attach schedule)		·	0	0	0	0
		Accounting fees (attach schedule)		1,70	<del>-</del>	0	0	
9	E C	Other professional fees (attach schedule)			0	0	0	<del></del>
Ţ	17	Interest			1			
ŧ	18	Taxes (attach schedule) (see instructions)			0	0	0	0
	19	Depreciation (attach schedule) and depletion .			0	0	0	
	20	Occupancy			<del>-</del>			
2	21	Travel, conferences, and meetings			-			
7	22	Printing and publications						
	n 23	Other expenses (attach schedule)			5	0	0	15
<u>.</u>	24	Total operating and administrative expen						
Ţ	<u> </u>	Add lines 13 through 23		1,71	5	0	0	1,715
Administration of Administration of	25	Contributions, gifts, grants paid		188,83		-		188,833
C	26	Total expenses and disbursements. Add lines 24 and		190,54		0	0	
_	27	Subtract line 26 from line 12						
	а	Excess of revenue over expenses and disburseme	ents	(10,54	B)			1
	Ь	Net investment income (if negative, enter -0-)		<del></del>		0		
	l c	Adjusted net income (if negative, enter -0-)					0	

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2015)



Dء	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
Г 6		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	69,583	59,035	59,035
	2	Savings and temporary cash investments		_	
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶		0	0
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶		0	0
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)		0	0
	7	Other notes and loans receivable (attach schedule) ▶0			
		Less: allowance for doubtful accounts ▶ 0	0	0	0
Assets	8	Inventories for sale or use			
SSE	9	Prepaid expenses and deferred charges			
Ä	10a	Investments—U S and state government obligations (attach schedule)	0	0	0
	b	Investments—corporate stock (attach schedule)	0	0	0
	С	Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment. basis ▶0			
		Less. accumulated depreciation (attach schedule) ▶0	0	0	0
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis ▶0			
		Less: accumulated depreciation (attach schedule) ▶0		0	0
	15	Other assets (describe ►	0	0	0
	16	Total assets (to be completed by all filers—see the			
		ınstructions. Also, see page 1, item I)	69,583	59,035	59,035
	17	Accounts payable and accrued expenses	-		
es	18	Grants payable			
逹	19	Deferred revenue	0		
Liabilities	20 21	Loans from officers, directors, trustees, and other disqualified persons	0	0	}
Ë	22	Mortgages and other notes payable (attach schedule)	0		
	23	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)		0	
	23	Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
Balances	24	Unrestricted			
<u>=</u>	25	Temporarily restricted	<del></del>		
	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ ✓			
교		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	46,916	46,916	
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	·		
Se	29	Retained earnings, accumulated income, endowment, or other funds	22,667	12,119	
ä	30	Total net assets or fund balances (see instructions)	69,583	59,035	
<u>f</u>	31	Total liabilities and net assets/fund balances (see			
_		instructions)	69,583	59,035	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year-Part II, colui			
	end-	of-year figure reported on prior year's return)		· · · <u>1</u>	69,583
2	Ente	er amount from Part I, line 27a		2	(10,548)
3		er increases not included in line 2 (itemize) ▶		3	0
4		lines 1, 2, and 3		4	59,035
5	Dec	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—F		5	0
6	Tota	II net assets or fund balances at end of year (line 4 minus line 5) $-$ F	Part II, column (b), Iır	ne 30   <b>6</b>	59,035

Part	IV Capital Gains and	d Losses for Tax on Investme	ent Income		···	
	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)				(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a	·					
<u>b</u>						
<u>c</u>						
<u>d</u>		<del> </del>				
e	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis		I In or (loss) (f) minus (g)
	-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(-) [	
<u>а</u> Ь			·· · · · · · · · · · · · · · · · · · ·			
d						
е						
	Complete only for assets sho	owing gain in column (h) and owned by	the foundation	on 12/31/69		ol (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		ot less than -0-) <b>or</b> from col (h))
a	-					
b						
<u>c</u>						<del></del>
u e						<del></del>
2	Capital gain net income o		so enter in Pa enter -0- in Par		2	0
3		in or (loss) as defined in sections 1	222(5) and (6)	:	2	0
	If gain, also enter in Part Part I, line 8	I, line 8, column (c) (see instructi		, enter -0- ın <b>}</b>	3	0
Part	V Qualification Und	ter Section 4940(e) for Reduc	ed Tax on N	let Investment	Income	
If sect	tion 4940(d)(2) applies, leav he foundation liable for the s," the foundation does not	section 4942 tax on the distributa t qualify under section 4940(e) Do	ible amount of not complete	any year in the t	pase period?	☐ Yes ☑ No
1		ount in each column for each year	; see the instru	uctions before ma	aking any entries	
Cale	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value of	(c) f noncharitable-use as		(d) stribution ratio divided by col (c))
	2014	111,			1,332	1 811420
	2013	102,			3,497	2 366784
	2012	121,3			·	4 924698
	2011	102,: 75,i			<u> </u>	4 390448 3 435336
	2010		590		2,091	3 435336
2 3	Total of line 1, column (d) Average distribution ratio	)		ine 2 by 5, or by	. 2	16 928686
	number of years the found	dation has been in existence if less	s than 5 years		. 3	3 385737
4	Enter the net value of non	nchantable-use assets for 2015 fro	m Part X, line	5	. 4	76,898
5	Multiply line 4 by line 3				. 5	260,356
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)			. 6	0
7	Add lines 5 and 6				7	260,356
8	Enter qualifying distribution	ons from Part XII, line 4 ater than line 7, check the box in I	 Part VI line 1h		. 8	190,548
	Part VI instructions	ater triair line /, Check the DOX IN	artvi, iiiie ID	, and complete t	inat part using a	1 70 Ian Iaic. Occ IIIC

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	18-9	see ii	nstru	ctio	ns)
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	(-), (-), (-), (-), (-), (-), (-), (-),					
	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-)	2			0	
3 4	Add lines 1 and 2	3			0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			0	
6	Credits/Payments	-				
а	2015 estimated tax payments and 2014 overpayment credited to 2015   6a					
b	Exempt foreign organizations—tax withheld at source 6b	1				
С	Tax paid with application for extension of time to file (Form 8868) . 6c					
d	Backup withholding erroneously withheld 6d				.	
7	Total credits and payments. Add lines 6a through 6d	7		-	0	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9			0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10			0	
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ Refunded ▶	11			0	L
	VII-A Statements Regarding Activities		-1 4		V	N-
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation participate or intervene in any political campaign?	or a	a it		Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	eee (		1a		✓
	Instructions for the definition)?	3C3 (	300	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any	nater	ials	-10		_
	published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?			1c		<b>√</b>
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 in	npose	ed			
_	on foundation managers. ► \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	•	•	2	_	<b>✓</b>
3	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a	rticle	s of			
J	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		.	3		1
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? .			4a		1
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		1
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory direct		hat			
_	conflict with the state law remain in the governing instrument?					
7						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶					
h	IL  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	Gon	oral			
D						
9						
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4944(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?					
	complete Part XIV		.	9		1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list	tıng ti	heir			
	names and addresses			10		✓

Part	VII-A	Statements Regarding Activities (continued)				
11	At anv	time during the year, did the foundation, directly or indirectly, own a controlled er	ntity within the		Yes	No
	meanin	g of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		1
12		foundation make a distribution to a donor advised fund over which the foundation of had advisory privileges? If "Yes," attach statement (see instructions)	r a disqualified	12		1
13	Did the	foundation comply with the public inspection requirements for its annual returns and exempti	on application?	13	<b>✓</b>	
14		e address ► N/A oks are in care of ► JULIE VOIE-ARMOUR Telephone		7) 480	4862	
			P+4 ►	6006		
15	Section	n 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Checl		•		<b>▶</b> □
16		ter the amount of tax-exempt interest received or accrued during the year time during calendar year 2015, did the foundation have an interest in or a signature c			Yes	No
.0		bank, securities, or other financial account in a foreign country?		16		1
		e instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," er eign country ►	iter the name of		•	
Part	VII-B	Statements Regarding Activities for Which Form 4720 May Be Required	1			I
		rm 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a		the year did the foundation (either directly or indirectly)				
		gage in the sale or exchange, or leasing of property with a disqualified person? row money from, lend money to, or otherwise extend credit to (or accept it from) a	☐ Yes ✓ No			
		qualified person?	☐ Yes 🗸 No			] [
		<b>5</b> , , , , , , , , , , , , , , , , , , ,	Yes 🗹 No			
			☐ Yes   ✓ No			
		nsfer any income or assets to a disqualified person (or make any of either available for benefit or use of a disqualified person)?	Yes No			
		ee to pay money or property to a government official? (Exception. Check "No" if the				
		ndation agreed to make a grant to or to employ the official for a period after nination of government service, if terminating within 90 days)	_ Yes ✓ No			
b		nswer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b		
		zations relying on a current notice regarding disaster assistance check here				
С		foundation engage in a prior year in any of the acts described in 1a, other than except corrected before the first day of the tax year beginning in 2015?	•	1c		
2	Taxes of	on failure to distribute income (section 4942) (does not apply for years the foundation ng foundation defined in section 4942(j)(3) or 4942(j)(5)):	was a private			
а	-	end of tax year 2015, did the foundation have any undistributed income (lines 6d and				
		t XIII) for tax year(s) beginning before 2015?	☐ Yes ✓ No			
b		" list the years ► 20, 20	ction 4942(a)(2)			
	(relating	g to incorrect valuation of assets) to the year's undistributed income? (If applying section	on 4942(a)(2) to			
	-	rs listed, answer "No" and attach statement—see instructions.)		2b		-
С		rovisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the y	ears here.			
3a	Did the	foundation hold more than a 2% direct or indirect interest in any business enterprise	☐ Yes ✓ No			
b	If "Yes,	" did it have excess business holdings in 2015 as a result of (1) any purchase by the	foundation or			
		ified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period ar				
		ssioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or -, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to de				
		tion had excess business holdings in 2015.)		3b		
4a		foundation invest during the year any amount in a manner that would jeopardize its charita		4a		1
b		foundation make any investment in a prior year (but after December 31, 1969) that could be surpose that had not been removed from year-ordy before the first day of the tay year because				
	cnaritab	ple purpose that had not been removed from jeopardy before the first day of the tax year beg	mining in 2015?	4h	l	ı 🗸

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ı	-a	ıa	ю	ĸ

Part	VII-B Statements Regarding Activities	for W	/hich Form	4720	May Be R	equire	d (contin	ued)	
5a	During the year did the foundation pay or incur a	•							
	(1) Carry on propaganda, or otherwise attempt to		•			•	☐ Yes	✓ No	
	(2) Influence the outcome of any specific public								
	directly or indirectly, any voter registration drive?								J i i
	(3) Provide a grant to an individual for travel, study, or other similar purposes?								
	(4) Provide a grant to an organization other than							_	
	section 4945(d)(4)(A)? (see instructions)								
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?								
	· · · · · · · · · · · · · · · · · · ·						_	☑ No	1 1 1
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the Regulations section 53.4945 or in a current notice							bea in	<del> </del>
	-	_	=						5b
_	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to	-							
C	because it maintained expenditure responsibility							□No	
	If "Yes," attach the statement required by Regula						□ res		
6a	Did the foundation, during the year, receive any					emiums			
-	on a personal benefit contract?		=	-			□Yes	<b>V</b> No	
b	Did the foundation, during the year, pay premium						_	_	6b ✓
-	If "Yes" to 6b, file Form 8870.	,		y, <b></b>					
7a	At any time during the tax year, was the foundation a	a party t	to a prohibited	tax she	elter transac	tion?	Yes	✓ No	
	If "Yes," did the foundation receive any proceeds						ransaction	? .	7b
Part	VIII Information About Officers, Direct	tors, 1	rustees, Fo	ounda	tion Man	agers,	Highly P	aid E	mployees,
	and Contractors								<del></del>
1	List all officers, directors, trustees, foundation				<del></del>		-		
	(a) Name and address	hou	e, and average rs per week	í (if r	mpensation iot paid,	emolo	Contributions yee benefit p	olans	(e) Expense account, other allowances
OTEV	TALL LEGANIC	devote TRUST	ed to position	en	ter -0-)	and dete	erred compe	nsation	
	EN H LESNIK	111001	, ,		0			0	0
	KOKIE BLVD , 444, NORTHBROOK, IL 60062-2867 LINE S LESNIK	TRUST	EE. 1						
<b></b>	KOKIE BLVD , 444, NORTHBROOK, IL 60062-2857				0			0	0
000 01	COIGE BEVD , 444, NORTH BROOK, IE 00002 2001							-	
					-				
2	Compensation of five highest-paid employee	s (oth	er than thos	se incli	uded on li	ne 1—:	see instru	uction	s). If none, enter
	"NONE."								
			(b) Title, and a	verage			(d) Contribu		(e) Expense account,
	(a) Name and address of each employee paid more than \$50,00	0	hours per v		(c) Compe	nsation	plans and d	eferred	other allowances
			·				compens	alion	
<b></b> -									
									<del></del>
							<del></del>		
	<del></del>						-		
									<del></del>
Total	number of other employees paid over \$50,000 .				·		• •	. ▶	0
-									Form <b>990-PF</b> (2015)

	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	_
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
·		
`ota	I number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
Les	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
	panizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1		
2		
3		-
4		
_	t IX-B Summary of Program-Related Investments (see instructions)	
De	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
	other program-related investments. See instructions	
3		
	I Addition date of the section	
ota	I. Add lines 1 through 3	

Form **990-PF** (2015)

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	7.	
	purposes:	· . ·	
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	78,001
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	78,001
е	Reduction claimed for blockage or other factors reported on lines 1a and	* .	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	78,001
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1,103
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	76,898
6	Minimum investment return. Enter 5% of line 5	6	3,845
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ► ☐ and do not complete this part.)	oundatior	is
1	Minimum investment return from Part X, line 6	1	3,845
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	1	
C	Add lines 2a and 2b	2c	´ o
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,845
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,845
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	3,845
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	190,548
b	Program-related investments—total from Part IX-B	1b	0
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	O
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	190,548
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	190,548
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whether	the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

Part	XIII Undistributed Incon	<b>1e</b> (see instructio	ns)			
1	Distributable amount for 201 line 7		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
_						3,845
2	Undistributed income, if any, as o	t the end of 2015.		-		
<b>a</b>	Enter amount for 2014 only					
b	Total for prior years: 20 11,2			0		
3	Excess distributions carryover					
а	From 2010					
b	From 2011	101,150				
C	From 2012	120,083			:	
d	From 2013	100,773				
е	From 2014	108,031				İ
f	Total of lines 3a through e .		504,822			
4	Qualifying distributions for 20					
	line 4: ▶ \$ 190,548					
а	Applied to 2014, but not more	than line 2a		-	0	
b	Applied to undistributed incon					
	(Election required—see instruc			اه		
С	Treated as distributions out of					
C	required—see instructions) .	, ,				
	•	,	0		<del></del>	0.045
d	Applied to 2015 distributable a					3,845
е	Remaining amount distributed	' 1	186,703			
5	Excess distributions carryover	· · ·			<u>-</u>	0
	(If an amount appears in colur	. ,				
	amount must be shown in colu	ımn (a).)				
6	Enter the net total of ea	ch column as				
	indicated below:					'
а	Corpus. Add lines 3f, 4c, and 4e	e. Subtract line 5	691,525			
b	Prior years' undistributed in	come. Subtract				· -
	line 4b from line 2b			o		
С	Enter the amount of prior year	rs' undistributed				
•	income for which a notice of					
	been issued, or on which the					
	tax has been previously assess					
d	Subtract line 6c from line				· · · · · · · · · · · · · · · · · · ·	
•	amount—see instructions .	ob. Taxable		ol		
		4 Culatura at luna		<u>`</u>		
е	Undistributed income for 201					
	4a from line 2a. Taxable	e amount—see			_	
	instructions				0	
f	Undistributed income for 2015					
	4d and 5 from line 1. This a	-				
	distributed in 2016				· · · · · · · · · · · · · · · · · · ·	0
7	Amounts treated as distributio	ns out of corpus				
	to satisfy requirements impo	sed by section				
	170(b)(1)(F) or 4942(g)(3) (El	ection may be				
	required—see instructions)		o			
8	Excess distributions carryove	r from 2010 not				
	applied on line 5 or line 7 (see		74,785			
9	Excess distributions carry	-	,. 00			
-	Subtract lines 7 and 8 from line		616,740			
10	Analysis of line 9:	• • •	310,740			
10	=	104.450				
а	Excess from 2011	101,150	j			
b	Excess from 2012	120,083				
С	Excess from 2013	100,773				
ď	Excess from 2014	108,031				
е	Excess from 2015	186,703				

2a Enter the lesser of the adjusted net Tax year Prior 3 years	orm 990	-PF (2015)					Page <b>10</b>
b Check box to indicate whether the foundation is a private operating foundation described in section    2a Enter the lesser of the adjusted net moorm from Part X for each year listed    5 Enter the lesser of the adjusted net moorm from Part X for each year listed    5 Enter the lesser of the adjusted net moorm from Part X for each year listed    6 S8% of line 2a    6 Qualifying distributions from Part XII, line 4 for each year listed    d Amounts included in line 2c not used directly for active conduct of exempt activities    6 Qualifying distributions made directly for active conduct of exempt activities    8 Subtract line 2d from line 2c    8 Complete 3a, b, or o for the alternative test enter 1 (1) Value of all assets    8 Subtract line 2d from line 2c    8 Complete 3a, b, or o for the alternative test enter will be active of all assets    9 Calleting and the second of exempt activities    10 Yalue of all assets    11 Tendowment* alternative test—enter 1 (1) Value of all assets    12 Value of all assets    13 Complete 3a, b, or or for the alternative test—enter 1 (1) Value of all assets    14 Tendowment* alternative test—enter 1 (1) Value of all assets    15 Complete 3a, b, or or for the alternative test—enter 1 (1) Value of all assets    16 Tendowment* alternative test—enter 1 (1) Value of all assets    17 Support distributions    18 Support from general public and 5 or more exempt organization    19 Support from general public and 5 or more exempt organization    10 Support from general public and 5 or more exempt organization    10 Support from general public and 5 or more exempt organization    10 Support from general public and 5 or more exempt organization    11 Information Regarding Foundation Managers:    12 List any managers of the foundation who have contributed more than 2% of the total contributions received by the fe before the close of any tax year (but only if they have contributed more than 2% of the total contributions received by the fe before the close of any tax year (but only if they h	Part X	IV Private Operating Founda	<b>tions</b> (see instru	uctions and Part	VII-A, question 9	9)	
b Check box to indicate whether the foundation is a private operating foundation described in section					private operating		
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed  b 85% of line 2a  C Qualifying distributions from Part XII, line 4 for each year listed  d Amounts included in line 2: not used directly for active conduct of exempt activities.  c 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 enter 1/3 of minimum line 2c and used directly for active conduct of exempt activities.  Subtract line 2d from line 2c  3 "Assets" alternative test—enter  (1) Value of all assets (2) Value of all assets	1	foundation, and the ruling is effective fo	r 2015, enter the d	late of the ruling .	▶		
income from Part I or the minimum investment return from Part X or each year listed	b	Check box to indicate whether the fou		e operating founda	ation described in se	ection 🗌 4942(j)	(3) or 4942(J)(5)
investment return from Part X for each year listed.  b 85% of line 2a  C Qualifying distributions from Part XII, line 4 for each year listed.  d Amounts included in line 2c not used directly for active conduct of exempt activities.  Subtract line 2d from line 2c  C Qualifying distributions made directly for active conduct of exempt activities.  Subtract line 2d from line 2c  C Complete 3a, b, or c for the alternative test relied upon:  a "Assets" alternative test – enter  (1) Value of all assets  (2) Value of assets qualifying under section 4942((β)(β)(β)(β)(β)(β)(β)(β)(β)(β)(β)(β)(β)			Tax year		Prior 3 years		(e) Total
each year listed			(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(0) (0)
c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities. Cualifying 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: a "Assets" alternative test enter (1) Value of all assets (2) Value of assets qualifying under section 4942(0/6)(8)(b) b "Endowment" alternative test—enter ½ of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test—enter of in Part X, line 6 for each year listed (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(0/6)(6)(ii) (3) Largest amount of support from an exempt organization of support from an exempt organization of support from an exempt organization for any time during the year—see instructions.)  1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the febefore the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  b List any managers of the foundation who have contributed more than \$5,000). (See section 507(d)(2).)  c Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not unsolicited requests for funds. It the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete times 2a, b, c, and d.							
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a "Assets" alternative test enter  (1) Value of all assets	1	Subtract line 2d from line 2c					ļ
a "Assets" alternative test—enter  (1) Value of all assets	3	Complete 3a, b, or c for the					
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(2) Value of assets qualifying under section 4942(j(3)(5)(6)(6).  b "Endowment" atternative test—enter ½ of of minimum investment return shown in Part X, line 6 for each year listed.  c "Support" alternative test—enter  (1) Total support other than gross investment return shown in part X, line 6 for each year listed.  c "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)(6)(6)(ii)).  (3) Largest amount of support from an exempt organization (4) Gross investment income.  Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in a any time during the year—see instructions.)  1 Information Regarding Foundation Managers:  a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation that the foundation who have contributed more than \$5,000). (See section 507(d)(2).)  b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:  Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete items 2a, b, c, and d.	а	"Assets" alternative test – enter					
section 4942(j(3)(B)(b)  b "Endowment" alternative test—enter 2/s of minimum investment return shown in Part Xi, line 6 for each year listed  c "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)(ii)).  (3) Largest amount of support from an exempt organization and section 4942(j(3)(B)(ii)).  (4) Gross investment income  Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in a any time during the year—see instructions.)  1 Information Regarding Foundation Managers:  a List any managers of the foundation who have contributed more than 2% of the total contributions received by the forefore the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:  Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete items 2a, b, c, and d.  a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.		(1) Value of all assets					
b "Endowment" alternative test—enter ½ of of minimum investment return shown in Part X, line 6 for each year listed .  c "Support" alternative test—enter 1/5 of or each year listed .  c "Support" alternative test—enter 1/5 of or each year listed .  c "Support" alternative test—enter 1/5 of or support on securities loans (section 512(a)(5)), or royalities)		(2) Value of assets qualifying under					
of minimum investment return shown in Part X, line 6 for each year listed		section 4942(j)(3)(B)(i)					
Part XV  Support alternative test—enter  (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section \$12(a)(5)), or royalties)  (2) Support from general public and 5 or more exempt organizations as provided in section 4942(i)(3)(B)(iii)  (3) Largest amount of support from an exempt organization  (4) Gross investment income  Part XV  Supplementary Information (Complete this part only if the foundation had \$5,000 or more in a any time during the year—see instructions.)  1 Information Regarding Foundation Managers:  a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portiownership of a partnership or other entity) of which the foundation has a 10% or greater interest  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☑ If the foundation only makes contributions to preselected charitable organizations and does not unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization there conditions, complete items 2a, b, c, and d.  The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.							
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investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)		(1) Total support other than gross					
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ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:  Check here ► ☑ if the foundation only makes contributions to preselected charitable organizations and does no unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete items 2a, b, c, and d.  The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.		before the close of any tax year (but o	only if they have c	ontributed more t	han \$5,000). (See s	ection 507(d)(2).)	
ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:  Check here ► ☑ if the foundation only makes contributions to preselected charitable organizations and does no unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete items 2a, b, c, and d.  The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.							
<ul> <li>Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:         Check here ► ✓ if the foundation only makes contributions to preselected charitable organizations and does not unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete items 2a, b, c, and d.     </li> <li>The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.</li> </ul>							rge portion of the
Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does no unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete items 2a, b, c, and d.  The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.	1	ownership of a partnership or other e	ntity) of which the	foundation has a	10% or greater int	erest	
Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does no unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete items 2a, b, c, and d.  The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.							
unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organization other conditions, complete items 2a, b, c, and d.  The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.	2	Information Regarding Contribution	n, Grant, Gift, Lo	an, Scholarship, d	etc., Programs:		
other conditions, complete items 2a, b, c, and d.  a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.							
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed				s gifts, grants, etc.	. (see instructions)	to individuals or oi	rganizatıons under
		<del></del>					
b The form in which applications should be submitted and information and materials they should include:	а	The name, address, and telephone nu	umber or e-mail a	ddress of the pers	son to whom applic	ations should be a	addressed:
<b>b</b> The form in which applications should be submitted and information and materials they should include:							
b The form in which applications should be submitted and information and materials they should include:							
	b	The form in which applications should	d be submitted an	d information and	I materials they sho	ould include:	
c Any submission deadlines.	С	Any submission deadlines.			<del> </del>		
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, factors:			wards, such as b	by geographical a	areas, charitable fi	elds, kınds of ıns	titutions, or other

Part XV Su	pplementary Information (con	tinued)			
3 Grants a	nd 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
	d address (home or business)	or substantial contributor	recipient	CONTIDUCT	
a Paid durin (SEE STATEMENT	g the year	or substantial contributor	recipient		
Total				<u>' ▶ ;</u>	3a 188,833
b Approved	for future payment				
Total		1	<u> </u>	<u> </u>	3b (
i Ulai				, , , , , , , , , , , , , , , , , , , ,	וטכ

Pai	rt XVI	<ul> <li>Analysis of Income-Producing Ac</li> </ul>	tivities				
nte	r gros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e)
			(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income
1	Progi	ram service revenue:	Business code	Amount	LACIUSION COde		(See instructions.)
	a _						-
	b _						
	c _						
	d _				<u> </u>		
	е _						
	f_						
	g F	ees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·			
2		bership dues and assessments					
3		est on savings and temporary cash investments					
4		ends and interest from securities			<u> </u>		
5		ental income or (loss) from real estate.		,	, ,	,	7.
		ebt-financed property					
		ot debt-financed property					
6		ental income or (loss) from personal property					
7		r investment income			ļ		
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events .					
10		s profit or (loss) from sales of inventory					
11	_	r revenue. a					
	b _						
	°. –	····					
	d _						
	е_			0		0	
40	O L. I.						
		otal. Add columns (b), (d), and (e)		0	<del></del>	<del></del>	
13	Total	I. Add line 12, columns (b), (d), and (e)				13	0
<b>13</b> See	Total works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	ıs.)			<del></del>	
13 See Pa	Total works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	0

Form **990-PF** (2015)

		<u></u>								
Part	XVII		n Regarding Trar ganizations	sfers To and Tra	nsactions and l	Relationshi	ps With N	loncharit	able	
1	Did t		directly or indirectly	engage in any of the	following with an	v other organ	nization des	cribed	. Yes	No
•			e Code (other than						1 1 1	1
		nizations?	(		<b>,,</b>	, .				
а	Trans	sfers from the rep	oorting foundation to	a noncharitable ex	empt organization	of:				
		•						. 1	1(1)	1
		Other assets .						1	1(2)	<b>✓</b>
b	Othe	r transactions								, ]
	(1) S	sales of assets to	a noncharitable exe	empt organization					o(1)	✓
			ets from a noncharita					_	(2)	<b>✓</b>
			, equipment, or othe					<del>-</del>	(3)	<b>✓</b>
	(4) F	Reimbursement a	rrangements					_	(4)	<b>✓</b>
			rantees					<u> </u>	)(5)	<b>/</b>
			ervices or membersh	· -				<del></del>	(6)	<b>/</b>
C			quipment, mailing lis						lc	<del></del>
d			of the above is "Yesther assets, or servi							
			on or sharing arrang							
(a) Line		(b) Amount involved	<del>,                                     </del>	haritable exempt organiza		ription of transfer				
(a) Line	3110	(b) Amount involved	(c) Name of honor	namable exempt organiza	illori (d) Desc	ription of transfer	is, transaction	is, and snami	anangen	lents
				<del> </del>						
								<del></del>		
		<del></del>							-0	
2a			ectly or indirectly af				-		_	
			501(c) of the Code (c		u (c)(3)) or in secti	on 5277	• •	· · □	Yes 📙	No
b	IT "Y	·	e following schedule				(a) Danamatan			
		(a) Name of organ	lization	(b) Type of o	rganization	<u> </u>	(c) Description	n or relationsh	ip	
									-	
	Und	el genalties of pertury, I	declare that I have examine	l ed this return, including acc	ompanying schedules an	d statements, and	to the best of	my knowledge	and belief,	ıt ıs true,
Sign		ect, and complete Decl	dation of preparer (differ the	an taxpayer) is based on all	information of which prep	parer has any know	wledge	May the IRS		
Here	1 1	人中で	11/85/11	5-5-1	D TRUST	FF		with the prep	arer showr	below
		nature of officer or tru	Stee	Date	Title	<u>ت</u>		(see instructio	ns)? 📝 Yes	S∏No
	1 3	Print/Type preparer	r's name	Preparer's signature		Date		CT _ PTII	1	
Paid		JACKIE COBURN	N	Jacquetine Charm'	2016 04 28 14 28 05 -05'0	o 4-28-2016	Check self-er	⟨	P002443	301
Prep			CROWE HORWATH	LLP			Fırm's EIN ▶	· · ·	0921680	
Use (	Uniy	Firm's address	225 WEST WACKER		HICAGO IL 60606-1	224	Phone no		899-7000	

## Schedule B

(Form 990, 990-EZ, or 990-PF)

**Schedule of Contributors** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

▶ 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.

**Employer identification number** 

LESNIK	CHARITABLE FOUN	36-7293339						
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 <b>not</b> treated as a private for	undation					
		☐ 527 political organization						
Form 99	90-PF	√ 501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
	•	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule. See					
instruct	•	(7), (b), or (10) organization ban check boxes for both the deficient fide t	and a opoolal ridio. Coo					
Genera	l Rule							
<b>V</b>	-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, con or property) from any one contributor. Complete Parts I and II. See inst contributions.						
Specia	Rules							
	regulations under 13, 16a, or 16b, a	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 and that received from any one contributor, during the year, total contributed from any one part VIII, line 1h, or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line utions of the greater of (1)					
	contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, total contributions of more than \$1,000 exclusively for religious onal purposes, or for the prevention of cruelty to children or animals. Col	s, charitable, scientific,					
	contributor, during contributions tota during the year for General Rule app	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribran exclusively religious, charitable, etc., purpose. Do not complete any lies to this organization because it received nonexclusively religious, charitable, etc., it is not considered in the year in the y	ses, but no such utions that were received of the parts unless the					

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 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
LESNIK CHARITABLE FOUNDATION

Employer identification number 36-7293339

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	KEMPER SPORTS MANAGEMENT, INC 500 SKOKIE BOULEVARD, SUITE 444 NORTHBROOK, IL 60062	\$ 180,000	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 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 Payroll Oncash Complete Part II for noncash contributions )				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				

Name of organization
LESNIK CHARITABLE FOUNDATION

Employer identification number 36-7293339

(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	  \$	
	Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given    S

	HARITABLE FOUNDATION			36-7293339			
Part III	(10) that total more than \$1,000 fo	r the year from any attions completing Par	one contributor. (	escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and I of exclusively religious, charitable, etc., see instructions.)			
	Use duplicate copies of Part III if ad-						
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held			
		(e) Transf	er of gift				
_	Transferee's name, address, a	nd 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			
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee						
		***************************************					
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held			
-	(e) Transfer of gift						
-	Transferee's name, address, a	and ZIP + 4	Relation	nship of transferor to transferee			
(a) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held			
	••••						
-	(e) Transfer of gift						
_	Transferee's name, address, a			nship of transferor to transferee			
1							

Part I, Line 6a Net gain or (loss) from sale of assets

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Accumulated Depreciation	Sales Expense	Total (net)
(1)										0
Total										0

Part I, Line 16b Accounting fees

Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Charitable disbursements
(1) CROWE HORWATH LLP	1,700			1,700
TOTAL	1,700	0	_ 0	1,700

Part I, Line 23 Other expenses

Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Charitable disbursements
(1) FILING FEES	15			15
TOTAL	15	0	0	15

Name and Address	Relationship	Foundation status	Purpose	Amount
KOHL CHILDREN'S MUSEUM 2100 PATRIOT BLVD GLENVIEW, IL, 60026	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	2,500
RAVINIA FESTIVAL 418 SHERIDAN ROAD HIGHLAND PARK, IL, 60035	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	4,000
ILLINOIS HOLOCAUST MUSEUM 9603 WOODS DRIVE SKOKIE, IL, 60077	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	10,000
ADOPTION CENTER OF ILLINOIS 5828 N CLARK STREET CHICAGO, IL, 60660	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	5,000
CHICAGO BOTANIC GARDENS 1000 LAKE COOK ROAD GLENCOE, IL, 60022	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
CONNECTICUT COLLEGE 270 MOHEGAN AVENUE NEW LONDON, CT, 06320	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	833
BERNIE'S BOOK BANK 28101 BALLARD DR LAKE FOREST, IL, 60045	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
NORTH SHORE FOUNDATION 310 GREEN BAY ROAD WINNETKA, IL, 60093	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
CHAMINADE UNIVERSITY 3140 WAIALAE AVENUE HONOLULU, HI, 96816	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	50,000
CHAMINADE UNIVERSITY 3141 WAIALAE AVENUE HONOLULU, HI, 96816	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	5,000
CHICAGO COUNCIL ON GLOBAL AFFAIRS 332 SOUTH MICHIGAN AVENUE, SUITE 1100 CHICAGO, IL, 60604	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	2,500
TEACH FOR AMERICA 315 WEST 36TH STREET, 8TH IFLOOR NEW YORK, NY, 10018	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	10,000
AMERICAN JEWISH COUNCIL 55 EAST MONROE STREET CHICAGO, IL, 60603-5738	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	5,000
CHICAGO COUNCIL ON GLOBAL AFFAIRS 332 SOUTH MICHIGAN AVENUE, SUITE 1100 CHICAGO, IL, 60604	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
BOYS & GIRLS CLUB OF AMERICA 550 W VAN BUREN STREET, SUITE 350 CHICAGO, IL, 60607	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	25,000
BLESSINGS IN A BACKPACK 4121 SHELBYVILLE ROAD LOUSIVILLE, KY, 40207	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
NORTH SHORE COUNTRY DAY SCHOOL 310 GREEN BAY ROAD WINNETKA, IL, 60093	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	2,500
LAKE FOREST ACADEMY 1500 WEST KENNEDY ROAD LAKE FOREST, IL, 60045	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
SUKKAT SHALOM 444 SKOKIE BLVD, SUITE 300 WILMETTE, IL, 60091	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	10,000
WAKE FOREST UNIVERSITY 1834 WAKE FOREST ROAD WINSTON-SALEM, NC, 27106	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	10,000
POSSE FOUNDATION 330 S WELLS STREET CHICAGO, IL, 60606	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
MIDWEST CARE CENTER ONE MEDICAL CENTER DRIVE GALENA, IL, 61036	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000

Name and Address	Relationship	Foundation status	Purpose	Amount
EVANS SCHOLARSHIP 1 BRIAR ROAD GOLF, IL, 60029	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	13,000
FIRST TEE OF CHICAGO 2901 W LAKE AVENUE A GLENVIEW, IL, 60026	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
SPRINGBOARD FOUNDATION 333 N MICHIGAN AVENUE, SUITE 510 CHICAGO, IL, 60601	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	2,500
STEPPENWOLF THEATRE COMPANY 1650 N HALSTED STREET CHICAGO, IL, 60606	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000
KEDZIE CENTER 4141 N KEDZIE AVEMUE, STE 2 CHICAGO, IL, 60618	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	2,500
JEWISH UNITED FUND 30 SOUTH WELLS CHICAGO, IL, 60606	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	17,500
CHICAGO DISTRIC GOLF ASSOCIATION- SUNSHINE THRU GOLF 11855 ARCHER AVENUE LEMONT, IL, 60439	NONE	PC	TO SUPPORT THE GENERAL CHARITABLE OPERATIONS OF THE ORGANIZATION	1,000

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