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## EXTENDED TO AUGUST 15, 2016

## **Return of Private Foundation**

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

Form **990,-PF** 

OMB No 1545-0052

| Depa                                 | artměr     | nt of the Treasury                     | ▶ {  | Do not enter  | social security numbers or m 990-PF and its separate    | n this form as it m      | nay be ma   | ade public<br>s gov/form990pf.  | <b>ZU 13</b>  |
|--------------------------------------|------------|--|--|---------------|---|--------------------------|-------------|---|---|
| _                                    |            |  | or tax year beginning  | on about i oi | III 330-11 uno ita separate                             | , and endin              |             |   | Open to Fublic dispection   |
|                                      |            | f foundation                           |  |               |   |                          | <del></del> | A Employer identification   | number  |
| M                                    | iTC        | HAEL SW                                | EIG FOUNDA   | TТОN          |   |                          |             | 36-7333404  |   |
|                                      |            |  | ox number if mail is not de  |               | address)  | Roo                      | om/suite    | B Telephone number  | <del></del>   |
| 1                                    | .30        | 6 HIGHW                                | AY 50 P.O.   | BOX 1         | .0769   |                          |             | (312) 523-  | 8100  |
|                                      |            | own, state or pro                      | ovince, country, and ZI<br>E , NV 894  |               | ostal code  |                          |             | C If exemption application is p   | ending, check here  |
| G (                                  | Check      | call that apply                        | Initial return Final return Address ch   | ange          | Initial return of a for Amended return  Name change     | ormer public chari       | ty          | D 1 Foreign organizations 2 Foreign organizations me check here and attach co | •   |
| н (                                  | _          | c type of organiza<br>ection 4947(a)(1 | ation LA Section ) nonexempt charitable  |               | kempt private foundation<br>Other taxable private found | ation                    |             | E If private foundation stat<br>under section 507(b)(1)                       |   |
| I Fa                                 |            |  |  | J Account     |   | Accrual                  |             | F If the foundation is in a 6   |   |
| (fi                                  | rom .      | Part II, col (c),                      | line 16)   | o             | ther (specify)  |                          |             | under section 507(b)(1)   |   |
| •                                    | ►\$        |  | 2,374,409.   | (Part I, colu | mn (d) must be on cash                                  | basis )                  |             |   |   |
| Pa                                   | art I      | U (The total of amo                    | evenue and Expenses<br>unts in columns (b) (c) an<br>if the amounts in column (a |               | (a) Revenue and expenses per books                      | (b) Net invest<br>income | ment        | (c) Adjusted net income   | (d) Disbursements<br>for charitable purposes<br>(cash basis only) |
|                                      | 1          |  | gifts, grants, etc., recei   | ···           | 200,000.  |                          |             |   | (cash saes shiy)  |
|                                      | 2          |  | f the foundation is not required to  |               |   |                          |             |   |   |
|                                      | 3          | Interest on saving cash investments    | s and temporary  |               | 6.  | -                        | 6.          |   | STATEMENT 1   |
|                                      | 4          |  | interest from securities   |               | 38,631.   | 38,                      | 631.        |   | STATEMENT 2   |
|                                      | 5 a        | Gross rents                            |  |               | ,                 | ,                        |             |   |   |
|                                      | 6          | Net rental income                      | or (loss)  |               |   |                          |             |   |   |
| -                                    | 6a         | Net gain or (loss) i                   | from sale of assets not on i   | ine 10        | 123,115.  |                          | •••         |   |   |
| 37.2 g                               | b          | Gross sales price<br>assets on line 6a |  | ,115.         |   |                          |             |   |   |
| FCS. Bevenue                         | 7          |  | come (from Part IV, line 2)  |               |   | 123,                     | 115.        |   |   |
| يُّ سِيْرِ                           | 8          | Net short-term                         | capital gain   |               |   |                          |             |   |   |
| <b>Ž</b>                             | 9          | Income modific                         |  |               |   |                          |             |   |   |
| CENNIVEOS Revenue                    | 10a        | Gross sales less r<br>and allowances   | eturns   |               |   |                          |             |   |   |
|                                      | Ь          | Less Cost of goo                       | ds sold  |               |   |                          |             |   |   |
| YAM                                  | C          | Gross profit or                        | (loss)   |               |   |                          |             |   |   |
| ₽                                    | 11         | Other income                           |  |               |   |                          |             |   |   |
| <u></u> &                            | 12         | Total Add line                         | s 1 through 11   |               | 361,752.  | 161,                     |             | 0.  |   |
| <b>6</b>                             | 13         | Compensation of                        | officers, directors, trustees  | , etc         | 0.  |                          | 0.          | 0.  | 0.  |
| 2                                    |            |  | salaries and wages   |               |   |                          |             |   |   |
| 2036                                 | 15         |  | employee benefits  |               |   |                          |             |   | - · · · · · · · · · · · · · · · · · · ·                           |
| Jse                                  | 16a        | Legal fees                             | RECEIVE  |               |   |                          |             |   |   |
| Operating and Administrative Expense | 6          | , , , , , , , , , , , , , , , , , , ,  | A  | ၂၀            |   |                          |             |   |   |
| ũ                                    | C          | Other profession                       | malfees<br>MAY 2 0 201   | RS-OSC        |   |                          |             |   |   |
| Ě                                    | 17         | Interest (S)                           | MAY 2 0 ZUT  | \ <u>\</u>    |   |                          |             | <u> </u>  |   |
| stra                                 | 18         | 14.00                                  |  |               |   |                          |             |   |   |
| ij                                   | 19         | Depreciation an                        | decimen, L   |               |   |                          |             |   |   |
| μĎ                                   | 20         | Occupandy                              |  |               |   | <u> </u>                 |             |   |   |
| g<br>g                               | 21         | •                                      | nces, and meetings   |               |   |                          |             |   | <del></del>   |
| an                                   | 22         | Printing and pu                        |  | мт 3          | 50.   |                          | 35.         | 0.  | 15.   |
| ţ                                    | 23         | Other expenses                         | and administrative   | MI J          | 30.   | <u> </u>                 | ٠,,         | 0.  |   |
| era                                  | ~          | •                                      | lines 13 through 23  |               | 50.   |                          | 35.         | 0.  | 15.   |
| o                                    | 25         |  | gifts, grants paid   |               | 253,106.  |                          |             | 0.  | 253,106.  |
|                                      | 26         |  | s and disbursements  |               | 233,100.  |                          |             |   | 233,100   |
|                                      | [          | Add lines 24 an                        |  |               | 253,156.  |                          | 35.         | 0.  | 253,121   |
| _                                    | 27         |  |  |               |   | -                        |             |   | 200,222   |
|                                      | 1          |  | over expenses and disbur   | sements       | 108,596.  |                          |             |   |   |
|                                      | Ι.         |  | t income (if negative ente   |               |   | 161,                     | 717.        |   |   |
|                                      | c          |  | ICOME (if negative, enter -  |               |   | <del></del>              |             | 0.  |   |
| 5235<br>11-2                         | 01<br>4-15 |  | perwork Reduction Ac   |               | instructions  | -                        |             |   | Form <b>990-PF</b> (2015  |

Form **990-PF** (2015)

|             | art | Balance Sheets Attached schedules and amounts in the description  | Beginning of year  | End of         | <u>*                                     </u> |
|-------------|-----|---|--------------------|----------------|---|
| L           | art | column should be for end-of-year amounts only   | (a) Book Value     | (b) Book Value | (c) Fair Market Value                         |
|             | ì   | Cash - non-interest-bearing   | 173,730.           | 120,617.       | 120,617.                                      |
|             | 2   | Savings and temporary cash investments  | 2,644.             | 6,025.         | 6,005.  |
|             | 3   | Accounts receivable ►   |                    |                |   |
|             |     | Less allowance for doubtful accounts  | j                  |                |   |
|             | 4   | Pledges receivable ►  |                    |                |   |
|             |     | Less allowance for doubtful accounts  | i i                |                |   |
|             | 5   | Grants receivable   |                    |                |   |
|             | 6   | Receivables due from officers, directors, trustees, and other   |                    |                | ·   |
|             |     | disqualified persons  |                    |                |   |
|             | 7   | Other notes and loans receivable  |                    |                |   |
|             |     | Less allowance for doubtful accounts  |                    |                |   |
| ន           | 8   | Inventories for sale or use   |                    |                |   |
| Assets      | 9   | Prepaid expenses and deferred charges   |                    |                |   |
| Ř           | 10a | Investments - U S and state government obligations  |                    |                |   |
|             | l t | Investments - corporate stock STMT 4  | 1,600,993.         | 1,759,321.     | 2,247,787.                                    |
|             | i . | Investments - corporate bonds   |                    |                | · · · · · · · · · · · · · · · · · · ·         |
|             | 1   | Investments land, buildings and equipment basis   |                    |                |   |
|             | 1   | Less accumulated depreciation   | +                  |                |   |
|             | 12  | Investments - mortgage loans  |                    |                |   |
|             | 13  | Investments - other   |                    |                |   |
|             | 14  | Land, buildings, and equipment: basis   |                    |                |   |
|             | İ   | Less accumulated depreciation   |                    |                |   |
|             | 15  | Other assets (describe >  |                    |                |   |
|             | 16  | Total assets (to be completed by all filers - see the   |                    |                |   |
|             |     | instructions. Also, see page 1, item ()   | 1,777,367.         | 1,885,963.     | 2,374,409.                                    |
| _           | 17  | Accounts payable and accrued expenses   |                    |                |   |
|             | 18  | Grants payable  |                    |                |   |
| ý           | 19  | Deferred revenue  |                    |                |   |
| Liabilities | 20  | Loans from officers, directors, trustees, and other disqualified persons  |                    |                |   |
| abi         | 21  | Mortgages and other notes payable   |                    |                |   |
| ت           | 22  | Other liabilities (describe  )  |                    |                |   |
|             | l   | ·   |                    |                |   |
|             | 23  | Total liabilities (add lines 17 through 22)   | 0.                 | 0.             |   |
|             |     | Foundations that follow SFAS 117, check here  |                    |                |   |
|             |     | and complete lines 24 through 26 and lines 30 and 31  |                    |                |   |
| ances       | 24  | Unrestricted  |                    |                |   |
|             | 25  | Temporarily restricted  |                    |                |   |
| Ва          | 26  | Permanently restricted  |                    |                |   |
| or Fund Ba  | }   | Foundations that do not follow SFAS 117, check here   |                    |                |   |
| Ę           |     | and complete lines 27 through 31.   |                    |                |   |
| S           | 27  | Capital stock, trust principal, or current funds  | 0.                 | 0.             |   |
| Net Assets  | 28  | Paid-in or capital surplus, or land, bldg, and equipment fund   | 0.                 | 0.             |   |
| As          | 29  | Retained earnings, accumulated income, endowment, or other funds  | 1,777,367.         | 1,885,963.     |   |
| Š           | 30  | Total net assets or fund balances   | 1,777,367.         | 1,885,963.     |   |
|             |     |   |                    |                |   |
| _           | 31  | Total liabilities and net assets/fund balances  | 1,777,367.         | 1,885,963.     |   |
| F           | art | III Analysis of Changes in Net Assets or Fund B   | alances            |                |   |
| Ξ           |     | net assets or fund balances at beginning of year - Part II, column (a), line  | 30                 |                |   |
| 1           |     | iner assets or fond balances at beginning of year - Part it, column (a), line is agree with end-of-year figure reported on prior year's return) | 00                 | ,              | 1,777,367.                                    |
| 2           | •   | r amount from Part I, line 27a  |                    | 1 2            | 108,596.                                      |
|             |     | r increases not included in line 2 (itemize)  |                    | 3              | 0.  |
|             |     | lines 1, 2, and 3   | <del> </del>       | 4              | 1,885,963.                                    |
|             |     | eases not included in line 2 (itemize)  |                    | 5              | 0.  |
| 6           |     | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co  | olumn (b), line 30 | 6              | 1,885,963.                                    |
| Ť           |     | 200 200 200 200 200 200 200 200 200 200   |                    | 1 - 1          | Form <b>990-PF</b> (2015)                     |

| Ŀ          |   | ribe the kii | nd(s) of property sold (e.g.                 | ., real estate,                       | tincome                              | (p)  | How a    | cquired<br>hase<br>ation |          | acquired                      | (d) Date sold                     |
|------------|---|--------------|--|---------------------------------------|--------------------------------------|--|----------|--------------------------|----------|-------------------------------|-----------------------------------|
| _          |   |              | or common stock, 200 shs                     | S. MILC CO )                          |                                      | l D  | - Don    | ation                    | (mo., d  | ay, yı                        | (mo , day, yr.)                   |
| 1a         |   | DIATI        | DENDS  |                                       |                                      | -  |          |                          |          |                               |                                   |
|            |   |              | <del></del>                                  |                                       |                                      |  |          | <del>-</del>             |          |                               |                                   |
| -          |   |              |  | · · · · · · · · · · · · · · · · · · · |                                      | <del>                                     </del> |          | <del></del>              |          |                               |                                   |
| -е         | <del></del>   |              |  |                                       |                                      | 1  |          |                          |          |                               |                                   |
|            | (e) Gross sales price   | (f) [        | Depreciation allowed (or allowable)          |                                       | st or other basis<br>expense of sale |  |          |                          |          | ain or (loss<br>s (f) minus ( | (g)                               |
| a          | 123,115.  |              |  |                                       |                                      |  |          |                          |          |                               | 123,115.                          |
| _b         | )   |              |  |                                       | -                                    |  |          |                          |          |                               |                                   |
|            |   |              |  |                                       |                                      |  |          |                          |          |                               |                                   |
|            |   |              |  |                                       |                                      |  | _        |                          |          |                               |                                   |
| _e         |   | 20 0010 10   | column (b) and award by                      | the foundation                        | 2 22 12/21/60                        |  |          |                          | 0 10     | \-1 (l-\                      |                                   |
| _          | Complete only for assets showi  | ,            |  |                                       |                                      |  |          |                          |          | ol (h) gain<br>not less thai  |                                   |
|            | (i) F.M V as of 12/31/69  | '            | (j) Adjusted basis<br>as of 12/31/69         |                                       | cess of col (i)<br>col (j), if any   |  |          |                          | Losses   | (from col. (                  | h))                               |
|            |   |              |  |                                       |                                      |  |          |                          |          |                               | 123,115.                          |
| _ <u>_</u> |   |              |  | <u> </u>                              |                                      |  |          |                          |          |                               | 123,113.                          |
|            |   |              |  |                                       |                                      |  |          |                          |          |                               |                                   |
| d          |   |              |  |                                       |                                      |  |          |                          |          |                               |                                   |
| —е         |   |              |  |                                       |                                      |  |          |                          |          |                               |                                   |
|            |   |              | ( If gain, also enter                        | ın Part I. line                       | 7                                    | )  |          |                          |          |                               |                                   |
| 2          | Capital gain net income or (net ca  | apıtal loss) | If gain, also enter     If (loss), enter -0- | - in Part I, line                     | 7                                    | •  | 2        |                          |          |                               | 123,115.                          |
| 3          | Net short-term capital gain or (to:                                       | ss) as defii | •  |                                       |                                      |  |          |                          |          |                               |                                   |
|            | If gain, also enter in Part I, line 8,                                    |              |  | • ,                                   |                                      | }  |          |                          |          |                               |                                   |
| _          | If (loss), enter -0- in Part I, line 8                                    |              | .: 1010/11                                   |                                       |                                      | 1  | 3        | <u>l</u>                 |          | N/A                           |                                   |
| ь.         |   |              | ection 4940(e) for                           |                                       |                                      |  |          | nent Inc                 | ome      |                               |                                   |
| (Fo        | or optional use by domestic private                                       | e foundatio  | ons subject to the section 4                 | 1940(a) tax on                        | ı net investment ir                  | come   | e.)      |                          |          |                               |                                   |
| lf s       | section 4940(d)(2) applies, leave t                                       | his part bla | ank  |                                       |                                      |  |          |                          |          |                               |                                   |
| 147        | and the foundation liable for the same                                    | tion 4040    | tau an tha diatributable am                  | accest of annual                      | the been se                          | 40   |          |                          |          |                               | Yes X No                          |
|            | as the foundation liable for the sec<br>Yes," the foundation does not qua |              |  |                                       | ·                                    | iou r  |          |                          |          |                               | L res _A_ NU                      |
| <u>"</u>   | Enter the appropriate amount in   |              |  |                                       |                                      | ntries   | <u> </u> |                          |          |                               |                                   |
| _          | (a)   |              | (b)  |                                       | 3,                                   | (c)  |          |                          |          |                               | (d)<br>jution ratio               |
|            | Base period years<br>Calendar year (or tax year beginni                   | ina in)      | Adjusted qualifying dis                      | tributions                            | Net value of no                      |  |          | use assets               |          | Distrib<br>(col. (b) div      | oution ratio<br>ided by col. (c)) |
| _          | 2014  | ,            | 27   | 7,285.                                |                                      |  | , 21     | 2,934                    |          | ,                             | .125302                           |
|            | 2013  |              |  | 4,913.                                |                                      |  |          | 0,035                    |          |                               | .123277                           |
|            | 2012  |              | 32   | 9,568.                                |                                      |  |          | 1,266                    |          |                               | .148369                           |
| _          | 2011  |              |  | 0,535.                                |                                      |  |          | 1,003                    |          |                               | .196906                           |
|            | 2010  |              | 29   | 8,939.                                |                                      | 1  | , 47     | 2,171                    | •        |                               | .203060                           |
|            |   |              |  |                                       |                                      |  |          |                          |          |                               |                                   |
| 2          | Total of line 1, column (d)   |              |  |                                       |                                      |  |          |                          | 2        |                               | .796914                           |
| 3          | Average distribution ratio for the  | •            | •  | on line 2 by 5,                       | or by the number                     | of ye  | ars      |                          |          |                               | 450000                            |
|            | the foundation has been in existe   | nce if less  | than 5 years                                 |                                       |                                      |  |          |                          | 3        |                               | .159383                           |
|            |   |              |  |                                       |                                      |  |          |                          |          |                               | 0 215 440                         |
| 4          | Enter the net value of noncharitat  | ole-use ass  | sets for 2015 from Part X, I                 | line 5                                |                                      |  |          |                          | 4        |                               | 2,317,419.                        |
| _          | ** "  |              |  |                                       |                                      |  |          |                          |          |                               | 260 257                           |
| 5          | Multiply line 4 by line 3   |              |  |                                       |                                      |  |          |                          | 5        |                               | 369,357.                          |
| c          | Eater 19/ of not investment incom   | ma / 10/ of  | Dort Lina 27h)                               |                                       |                                      |  |          |                          |          |                               | 1,617.                            |
| 0          | Enter 1% of net investment incor  | 116 ( 176 01 | raiti, iine 270)                             |                                       |                                      |  |          |                          | 6        |                               | 1,017.                            |
| 7          | Add lines 5 and 6   |              |  |                                       |                                      |  |          |                          | 7        |                               | 370,974.                          |
| •          | Alaa iiriga o ullu O  |              |  |                                       |                                      |  |          |                          | $\vdash$ |                               | 0.0,5/4.                          |
| 8          | Enter qualifying distributions from                                       | n Part XII,  | line 4                                       |                                       |                                      |  |          |                          | 8        |                               | 253,121.                          |
|            | If line 8 is equal to or greater than<br>See the Part VI instructions     | n line 7, ch | eck the box in Part VI, line                 | 1b, and comp                          | olete that part usin                 | ig a 1º  | % tax    | rate.                    |          |                               |                                   |

| orm 990-PF (2015) MICHAEL SWEIG FOUNDATION   |  | 36-733.       |        |          | Page 4         |
|--|--|---------------|--------|----------|----------------|
| Part VI Excise Tax Based on Investment Income (Section   |  | or 4948 - see | instru | ıctio    | 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 Domestic foundations that meet the section 4940(e) requirements in Part V, check her                   | e 🕨 📖 and enter 1%                           | 1             |        | 3,2      | 34.            |
| of Part I, line 27b  |  |               |        |          |                |
| c All other domestic foundations enter 2% of line 27b Exempt foreign organizations ent                   | er 4% of Part I, line 12, col (b).           |               |        |          |                |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations or                   | nly Others enter -0-)                        | 2             |        |          | 0.             |
| 3 Add lines 1 and 2  |  | 3             |        | 3,2      | 34.            |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of                 | nly Others enter -0-)                        | 4             |        |          | 0.             |
| 5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-                  |  | 5             |        | 3,2      | <del>34.</del> |
| 6 Credits/Payments   |  |               |        |          |                |
| a 2015 estimated tax payments and 2014 overpayment credited to 2015                                      | 6a 4,73                                      | 0.            |        |          |                |
| <b>b</b> Exempt foreign organizations - tax withheld at source   | 6b   |               |        |          |                |
| c Tax paid with application for extension of time to file (Form 8868)                                    | 6c 5,00                                      | 0.            |        |          |                |
| d Backup withholding erroneously withheld  | 6d   |               |        |          |                |
| 7 Total credits and payments. Add lines 6a through 6d  | <del></del>                                  | 7             |        | 9,7      | 30.            |
| 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 i                         | s attached                                   | 8             |        |          |                |
| 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed                           |  | ▶ 9           |        |          |                |
| 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpa                | aid  | ▶ 10          |        | 6,4      | 96.            |
| 11 Enter the amount of line 10 to be. Credited to 2016 estimated tax                                     | 6,496. Refunded                              | <b>▶</b> 11   |        |          | 0.             |
| Part VII-A Statements Regarding Activities   | •  | •             |        |          |                |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local            | l legislation or did it participate or inter | vene in       |        | Yes      | No             |
| any political campaign?  |  |               | 1a     |          | X              |
| <b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political p    | ourposes (see instructions for the defin     | iition)?      | 1b     |          | X              |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities                      | es and copies of any materials pub           | lished or     |        |          |                |
| distributed by the foundation in connection with the activities  |  |               |        |          |                |
| c Did the foundation file Form 1120-POL for this year?   |  |               | 1c     |          | X              |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed durir                | ng the year                                  |               |        |          |                |
| (1) On the foundation ▶ \$ 0. (2) On foundation man  | agers. ► \$                                  | 0.            |        |          |                |
| e Enter the reimbursement (if any) paid by the foundation during the year for political ex               | penditure tax imposed on foundation          |               |        |          |                |
| managers ► \$ 0.   |  |               |        |          | ,              |
| 2 Has the foundation engaged in any activities that have not previously been reported to                 | the IRS?                                     |               | 2      |          | Х              |
| If "Yes," attach a detailed description of the activities  |  |               |        |          |                |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its govern                 | ning instrument, articles of incorporati     | on, or        |        |          | į              |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cl                        | hanges                                       |               | 3      |          | Х              |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during th                  | ne year?                                     |               | 4a     |          | X              |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                       |  | N/A           | 4b     |          |                |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the               | year?  |               | 5      |          | X              |
| If "Yes," attach the statement required by General Instruction T   |  |               |        |          |                |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisf                 | fied either:                                 |               |        |          |                |
| <ul> <li>By language in the governing instrument, or</li> </ul>  |  |               |        | 1        | İ              |
| <ul> <li>By state legislation that effectively amends the governing instrument so that no man</li> </ul> | datory directions that conflict with the     | state law     |        |          |                |
| remain in the governing instrument?  |  |               | 6      | Х        |                |
| 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 Pa          | t XV          | 7      | Х        |                |
|  |  |               |        |          |                |
| 8a Enter the states to which the foundation reports or with which it is registered (see insti            | ructions) >                                  |               |        |          |                |
| IL   |  |               |        |          |                |
| 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)          | _             |        |          | İ              |
| of each state as required by General Instruction G? If "No," attach explanation                          |  |               | 8b     | Х        | <u></u>        |
| 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 "Ye                  | es," complete Part XIV                       |               | 9      | <u> </u> | X              |
| 10. Did any persons become substantial contributors during the tay year? # *vec* except a                | schodula listing their names and addresses   |               | 10     | l        | ΙX             |

| Part VII-A Statements Regarding Activities (continued)  |                                       |      |         |        |
|---|---------------------------------------|------|---------|--------|
|   |                                       | Y    | es      | No     |
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the mea              | ning of                               |      |         |        |
| section 512(b)(13)? If "Yes," attach schedule (see instructions)  | 1                                     | 1    |         | Х      |
| 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)   | <u> 1</u>                             | 2    |         | Х      |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption ap-                   | plication? 1                          | 3    | X       |        |
| Website address ► N/A   |                                       |      |         |        |
| 14 The books are in care of ▶ MICHAEL SWEIG   | Telephone no $\triangleright 312-523$ |      | 00      |        |
| Located at ► 1306 HIGHWAY 50, ZEPHYR COVE, NV   | ZIP+4 ▶8944                           | 18   |         |        |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here                          |                                       |      | <b></b> | $\Box$ |
| and enter the amount of tax-exempt interest received or accrued during the year   | <b>▶</b> 15                           | N/   |         |        |
| 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other author                 | ity over a bank,                      | Y    | es      | No     |
| securities, or other financial account in a foreign country?  | _ 1                                   | 6    |         | Х      |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of                    | f the                                 |      |         |        |
| foreign country   |                                       |      |         |        |
| Part VII-B   Statements Regarding Activities for Which Form 4720 May Be   | Required                              |      |         |        |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.   |                                       | Υ    | es      | 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 X No                              |      |         |        |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)   |                                       |      |         |        |
| a disqualified person?  | Yes X No                              |      |         |        |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?                                      | Yes X No                              |      |         |        |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  | Yes X No                              |      |         |        |
| (5) Transfer any income or assets to a disqualified person (or make any of either available                                     |                                       | į    |         |        |
| for the benefit or use of a disqualified person)?   | Yes X No                              |      | ĺ       |        |
| (6) Agree to pay money or property to a government official? (Exception. Check "No"   |                                       |      |         |        |
| ıf 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.)  | Yes X No                              |      |         |        |
| <b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regu |                                       |      |         |        |
| section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?                                   | N/A 1                                 | b    |         |        |
| Organizations relying on a current notice regarding disaster assistance check here  | ▶∟                                    |      |         |        |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that v                | were not corrected                    |      |         |        |
| before the first day of the tax year beginning in 2015?   |                                       | lc _ |         | Х      |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private                   | operating foundation                  |      |         |        |
| defined in section 4942(j)(3) or 4942(j)(5))  |                                       |      |         |        |
| a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for                |                                       |      | ŀ       |        |
| before 2015?  | Yes X No                              |      |         |        |
| If "Yes," list the years ▶,,,,,   |                                       |      |         |        |
| <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)  |                                       |      |         |        |
| valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, a                 |                                       |      |         |        |
| statement - see instructions )  | N/A 2                                 | 2b   |         |        |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here               |                                       |      |         |        |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time                    | <u></u>                               |      | ļ       |        |
|   |                                       |      |         |        |
| during the year?  | Yes X No                              |      |         |        |
| <b>b</b> If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or d          |                                       |      |         |        |
| May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under se                        |                                       |      |         |        |
| of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period                |                                       |      |         |        |
| Form 4720, to determine if the foundation had excess business holdings in 2015)   | · -                                   | 3b   |         |        |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpo                  |                                       | la   | ļ       | Х      |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize                    | l l                                   |      |         |        |
| had not been removed from jeopardy before the first day of the tax year beginning in 2015?                                      | 4                                     | ib   | - 1     | Х      |

| Form 990-PF (2015) MICHAEL SWEIG FOUNDATION   |   | 7   | 36-13334   | 104          | Page <b>6</b>                        |
|---|---|---|--|--------------|--------------------------------------|
| Part VII-B   Statements Regarding Activities for Which  | Form 4/20 May Be I  | Required (contin                                | ued)   |              |                                      |
| 5a During the year did the foundation pay or incur any amount to:                                   |   | <u>г</u>  | [₹]  |              |                                      |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section                     | * **  |   | es X No  |              | ŀ                                    |
| (2) Influence the outcome of any specific public election (see section 4955);                       | or to carry on, directly or indire                        |   | - Tel  | ŀ            |                                      |
| any voter registration drive?   | _   |   | es X No  |              |                                      |
| (3) Provide a grant to an individual for travel, study, or other similar purposes                   |   | Y   | es X No  |              |                                      |
| (4) Provide a grant to an organization other than a charitable, etc., organization                  | on described in section                                   |   |  | 1            |                                      |
| 4945(d)(4)(A)? (see instructions)   |   |   | es X No  |              |                                      |
| (5) Provide for any purpose other than religious, charitable, scientific, literary                  | , or educational purposes, or t                           |   |  |              |                                      |
| the prevention of cruelty to children or animals?   |   |   | es X No  |              |                                      |
| <b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un | der the exceptions described                              | ın Regulations                                  |  |              |                                      |
| section 53 4945 or in a current notice regarding disaster assistance (see instr                     | uctions)?   |   | N/A  | 5b           |                                      |
| Organizations relying on a current notice regarding disaster assistance check                       |   |   | ▶□□  |              |                                      |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption                     |   |   |  |              |                                      |
| expenditure responsibility for the grant?   | Ŋ   | I/A   | es 🔲 No 📗  |              |                                      |
| If "Yes," attach the statement required by Regulations section 53 494                               | 15-5(d)   |   |  |              | '                                    |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to               | pay premiums on   |   |  |              | 1                                    |
| a personal benefit contract?  |   | Y   | es X No  | .            |                                      |
| $\boldsymbol{b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on a    | personal benefit contract?                                |   | L  | 6b           | X                                    |
| If "Yes" to 6b, file Form 8870  |   |   |  |              | ļ                                    |
| ${\bf 7a}$ At any time during the tax year, was the foundation a party to a prohibited tax          | shelter transaction?                                      | Y   | es X No  |              |                                      |
| b If "Yes," did the foundation receive any proceeds or have any net income attrib                   |   |   | N/A  | 7b           |                                      |
| Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors               | tees, Foundation Ma                                       | anagers, Highl                                  | <b>y</b>   |              |                                      |
| 1 List all officers, directors, trustees, foundation managers and their                             | compensation.   |   |  |              |                                      |
| (a) Name and address  | (b) Title, and average hours per week devoted to position | (c) Compensation<br>(If not paid,<br>enter -0-) | (d) Contributions to<br>employee benefit plans<br>and deferred<br>compensation | acci<br>acci | ) Expense<br>ount, other<br>lowances |
| MICHAEL SWEIG   | TRUSTEE   |   |  | T            |                                      |
| 1306 HIGHWAY 50 P.O. BOX 10769  |   |   |  |              |                                      |
| ZEPHYR COVE, NV 89448   | 10.00   | 0.  | 0  |              | 0.                                   |
|   |   |   |  |              |                                      |
|   |   |   |  |              |                                      |
|   |   |   |  |              |                                      |
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|   |   |   |  |              |                                      |
|   |   |   |  | <u> </u>     |                                      |
| 2 Compensation of five highest-paid employees (other than those in                                  | (b) Title, and average                                    | enter "NUNE."                                   | (d) Contributions to   | 10           | ) Expense                            |
| (a) Name and address of each employee paid more than \$50,000                                       | hours per week<br>devoted to position                     | (c) Compensation                                | employee benefit plans<br>and deferred<br>compensation                         | acci         | ount, other<br>lowances              |
| NONE  |   |   |  |              |                                      |
|   |   |   |  | <u> </u>     |                                      |
|   |   |   |  |              |                                      |
|   |   |   |  |              |                                      |
|   | _   |   |  | -            |                                      |
|   |   |   |  | ↓            |                                      |
|   |   |   |  |              |                                      |
|   |   |   |  | -            |                                      |
|   | _   |   |  |              |                                      |
|   | <u> </u>  | 1   | l  | 1            |                                      |
| Total number of other employees paid over \$50,000  |   |   | ▶  |              | 0                                    |

Form **990-PF** (2015)

3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 2,226,374. 1a 126,336. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 2,352,710. 1đ d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 0. 1e Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 317,419 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 115,871.Minimum investment return Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 
and do not complete this part ) 115,871. Minimum investment return from Part X, line 6 3,234. Tax on investment income for 2015 from Part VI, line 5 2a Income tax for 2015 (This does not include the tax from Part VI.) 2b 3,234. c Add lines 2a and 2b 2c 3 112.637. 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 112. 637. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 112,637. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposesa Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 253,121. 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3b Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 253,121. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 253,121. Adjusted qualifying distributions Subtract line 5 from line 4 6 Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2015)

Part XIII Undistributed Income (see instructions)

MICHAEL SWEIG FOUNDATION

|  | (a)<br>Corpus | (b)<br>Years prior to 2014 | ( <b>c)</b><br>2014 | ( <b>d)</b><br>2015 |
|--|---------------|----------------------------|---------------------|---------------------|
| 1 Distributable amount for 2015 from Part XI,  |               |                            |                     | 112,637.            |
| 2 Undistributed income, if any, as of the end of 2015  |               |                            |                     | 112,037.            |
| a Enter amount for 2014 only   |               |                            | 0.                  |                     |
| <b>b</b> Total for prior years   |               |                            | 0.                  |                     |
| b rotarior prior years   |               | 0.                         |                     |                     |
| 3 Excess distributions carryover, if any, to 2015.   |               |                            |                     |                     |
| a From 2010   298, 939.  |               |                            |                     |                     |
| bFrom 2011 360,535.  |               |                            |                     |                     |
| c From 2012 219,055.   |               |                            |                     |                     |
| dFrom 2013 170, 903.   |               |                            |                     |                     |
| eFrom 2014 169, 934.   |               |                            | •                   |                     |
| f Total of lines 3a through e  | 1,219,366.    |                            |                     |                     |
| 4 Qualifying distributions for 2015 from   | 1,215,500.    |                            |                     |                     |
| Part XII, line 4 ▶\$ 253,121.  |               |                            |                     |                     |
| a Applied to 2014, but not more than line 2a   |               |                            | 0.                  |                     |
| b Applied to undistributed income of prior   |               |                            | •                   |                     |
| years (Election required - see instructions)   |               | 0.                         |                     |                     |
| c Treated as distributions out of corpus   |               | 0.1                        |                     |                     |
| (Election required - see instructions)   | 0.            |                            |                     |                     |
| d Applied to 2015 distributable amount   | <del></del>   |                            |                     | 112,637.            |
| e Remaining amount distributed out of corpus   | 140,484.      |                            |                     | 112,037.            |
| 5 Excess distributions carryover applied to 2015   | 0.            |                            |                     | 0.                  |
| (If an amount appears in column (d), the same amount must be shown in column (a) )   |               |                            |                     | <u> </u>            |
| 6 Enter the net total of each column as indicated below.   | 4 252 252     |                            |                     |                     |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 1,359,850.    |                            |                     |                     |
| b Prior years' undistributed income. Subtract  |               | _                          |                     |                     |
| line 4b from line 2b   |               | 0.                         |                     |                     |
| c 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 |               | 0.                         |                     |                     |
| d Subtract line 6c from line 6b Taxable  |               | -                          |                     |                     |
| amount - see instructions  |               | 0.                         |                     |                     |
| e Undistributed income for 2014. Subtract line   |               |                            |                     |                     |
| 4a from line 2a. Taxable amount - see instr  |               |                            | 0.                  |                     |
| f Undistributed income for 2015. Subtract  |               |                            |                     |                     |
| lines 4d and 5 from line 1. This amount must   |               |                            |                     |                     |
| be distributed in 2016   |               |                            |                     | 0.                  |
| 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)  | 0.            |                            |                     |                     |
| 8 Excess distributions carryover from 2010   |               |                            |                     |                     |
| not applied on line 5 or line 7  | 298,939.      |                            |                     |                     |
| 9 Excess distributions carryover to 2016   |               |                            |                     |                     |
| Subtract lines 7 and 8 from line 6a  | 1,060,911.    |                            |                     |                     |
| 10 Analysis of line 9  |               |                            |                     |                     |
| a Excess from 2011 360,535.  |               |                            |                     |                     |
| b Excess from 2012 219,055.  |               |                            |                     |                     |
| c Excess from 2013 170,903.  |               |                            |                     |                     |
| dExcess from 2014 169,934.   |               |                            |                     |                     |
| e Excess from 2015 140,484.  |               |                            |                     | _                   |
|  |               |                            |                     |                     |

| 3 Grants and Contributions Paid During the | Year or Approved for Future I  | Payment                              |                                  |          |
|--|--|--------------------------------------|----------------------------------|----------|
| Recipient                                  | If recipient is an individual,   |                                      | Purpose of grant or              |          |
| Name and address (home or business)        | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or contribution | Amount   |
| a Paid during the year                     |  |                                      |                                  | ·        |
|  |  |                                      |                                  |          |
|  |  |                                      |                                  |          |
|  |  |                                      |                                  |          |
| SEE ATTACHED STATEMENT                     |  |                                      |                                  |          |
|  |  | _                                    |                                  | 253,106. |
|  |  |                                      |                                  |          |
|  |  |                                      |                                  |          |
|  |  |                                      |                                  |          |
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|  |  |                                      |                                  |          |
|  |  |                                      |                                  |          |
| Total                                      |  |                                      | <b>▶</b> 3a                      | 253,106. |
| <b>b</b> Approved for future payment       |  |                                      |                                  |          |
|  |  |                                      |                                  |          |
| NONE                                       |  |                                      |                                  |          |
|  |  |                                      |                                  |          |
|  |  |                                      |                                  |          |
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|  |  |                                      |                                  |          |
| Total                                      | <u> </u>   |                                      | <b>▶</b> 3b                      | 0.       |

| Part XVI-A Analysis of Income-Producing Act |
|---|
|---|

| Enter gross amounts unless otherwise indicated.                 | (a)              |        |              |          | (e)               |
|---|------------------|--------|--------------|----------|-------------------|
|   | Dusingas         | (b)    | (C)<br>Exclu | (d)      | Related or exempt |
| 1 Program service revenue                                       | Business<br>code | Amount | sion<br>code | Amount   | function income   |
| a   |                  |        |              |          |                   |
| b   |                  | -      |              |          |                   |
| c   |                  |        |              |          |                   |
| d   |                  |        |              |          | <del>_</del> .    |
| e   |                  |        |              |          |                   |
| f   |                  |        | 11           |          |                   |
| g Fees and contracts from government agencies                   |                  |        |              |          |                   |
| 2 Membership dues and assessments                               |                  |        |              |          |                   |
| 3 Interest on savings and temporary cash investments            |                  |        | 14           | 6.       |                   |
| 4 Dividends and interest from securities                        |                  |        | 14           | 38,631.  |                   |
| 5 Net rental income or (loss) from real estate:                 |                  |        |              |          |                   |
| a Debt-financed property  |                  |        |              |          |                   |
| b Not debt-financed property                                    |                  |        |              |          |                   |
| 6 Net rental income or (loss) from personal                     |                  |        |              |          |                   |
| property  | +                |        | +            |          |                   |
| 7 Other investment income                                       | <b>-</b>         |        |              |          |                   |
| 8 Gain or (loss) from sales of assets other than inventory      |                  |        | 14           | 123,115. |                   |
| 9 Net income or (loss) from special events                      |                  |        |              |          |                   |
| 10 Gross profit or (loss) from sales of inventory               |                  |        |              |          |                   |
| 11 Other revenue  |                  |        |              |          |                   |
| a   |                  |        |              |          |                   |
| b   |                  |        |              |          |                   |
| С   |                  |        |              |          |                   |
| d   | Į.               |        |              |          | •                 |
| e   |                  |        |              |          |                   |
| 12 Subtotal Add columns (b), (d), and (e)                       |                  | C      | ).           | 161,752. | 0.                |
| 13 Total Add line 12, columns (b), (d), and (e)                 |                  |        |              | 13       | 161,752.          |
| (See worksheet in line 13 instructions to verify calculations ) |                  |        |              |          |                   |

#### Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). ▼

|   | <br>              |
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1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

Yes No

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

| the Co          | ode (other than section 501(c)   | )(3) organizations) or in section 5  | 27, relating to political organiz     | ations?                |                                    |                                |        |
|-----------------|----------------------------------|--|---------------------------------------|------------------------|------------------------------------|--------------------------------|--------|
| a Trans         | fers from the reporting founda   | ation to a noncharitable exempt o  | rganization of:                       |                        |                                    |                                |        |
| (1) 0           | Cash                             |  |                                       |                        |                                    | 1a(1)                          | Х      |
| (2) (           | Other assets                     |  |                                       |                        |                                    | 1a(2)                          | X      |
|                 | transactions                     |  |                                       |                        |                                    | - '                            |        |
|                 | Gales of assets to a noncharital | hle exempt organization  |                                       |                        |                                    | 1b(1)                          | X      |
|                 |                                  | ncharitable exempt organization  |                                       |                        |                                    |                                | X      |
| , ,             |                                  | , ,  |                                       |                        | -                                  | 1b(2)                          | X      |
|                 | Rental of facilities, equipment, |  |                                       |                        |                                    | 1b(3)                          | 1      |
|                 | Reimbursement arrangements       |  |                                       |                        |                                    | 1b(4)                          | X      |
|                 | oans or loan guarantees          |  |                                       |                        |                                    | 1b(5)                          | X      |
| (6) P           | erformance of services or me     | mbership or fundraising solicitati   | ons                                   |                        |                                    | 1b(6)                          | Х      |
|                 |                                  | ılıng lısts, other assets, or paid en  | • •                                   |                        |                                    | 1c                             | X      |
| <b>d</b> If the | answer to any of the above is    | "Yes," complete the following sch  | edule Column (b) should alwa          | ays show the fair marl | et value of the goods, oth         | er assets,                     |        |
| or ser          | vices given by the reporting fo  | oundation. If the foundation receiv  | ved less than fair market value       | in any transaction or  | sharing arrangement, sho           | w in                           |        |
| colum           | nn (d) the value of the goods, o | other assets, or services received   |                                       |                        |                                    |                                |        |
| A)Line no       | (b) Amount involved              | (c) Name of noncharitable  | le exempt organization                | (d) Description of t   | ransfers, transactions and sha     | arıng arrangem                 | ents   |
|                 |                                  | N/A  |                                       | -                      |                                    |                                |        |
|                 |                                  |  |                                       | -                      |                                    |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       |                        | <del></del>                        |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       | ļ <u>-</u>             |                                    |                                |        |
| _               |                                  |  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
|                 |                                  |  | <u>-</u>                              |                        | 455                                |                                |        |
|                 |                                  |  | · · · · · · · · · · · · · · · · · · · |                        |                                    |                                |        |
|                 |                                  | L  |                                       |                        |                                    |                                |        |
|                 |                                  | ,  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
| 2a Is the       | foundation directly or indirect  | tly affiliated with, or related to, one  | e or more tax-exempt organiza         | itions described       |                                    |                                |        |
|                 |                                  | r than section 501(c)(3)) or in sec  | · -                                   |                        |                                    | Yes X                          | □ No   |
|                 | s," complete the following sch   |  |                                       |                        |                                    | 100 (22                        |        |
| <b>B</b> 11 100 | (a) Name of org                  |  | (b) Type of organization              | (c)                    | Description of relationship        | <u> </u>                       |        |
| •               | N/A                              | paritation.  | (b) Typo or or gameanon               |                        |                                    | •                              |        |
|                 | N/A                              |  |                                       |                        |                                    |                                |        |
|                 |                                  |  |                                       |                        |                                    |                                |        |
|                 | <del></del>                      |  | <u> </u>                              |                        | <del></del>                        |                                |        |
|                 |                                  |  | ļ                                     |                        |                                    |                                |        |
| 1               |                                  | 4  |                                       |                        |                                    |                                |        |
|                 |                                  | that I have examined this return, including including the Ceclaration of preparer (other the |                                       |                        | any knowledge May the return shown | with the preparabelow (see ins | rer    |
|                 | Signature of officer or truster  | - TOUT   | Date                                  | Title                  |                                    |                                |        |
| <u> </u>        | Print/Type preparer's na         | me Peparer's s   | signature                             | Date Ch                | eck if PTIN                        |                                |        |
|                 |                                  |  | 1 1 1                                 | ci., se                | lf- employed                       |                                |        |
| Paid            | MARC D. VO                       |  |                                       | 5/12/2016 5            |                                    | 934100                         |        |
| Prepar          |                                  |  | <u> </u>                              |                        | irm's EIN ► 42-07                  |                                |        |
| Jse Or          |                                  | / /  |                                       |                        | mmscm <b>&gt; 42</b> − 0 / .       | r <del>1</del> 777             |        |
|                 |                                  | S. WACKER DRIVE  | 2 CM2 000                             |                        |                                    |                                |        |
|                 |                                  |  |                                       | _                      | . 212 62                           | 4 2400                         |        |
|                 | Сн                               | ICAGO, IL 60606  | )                                     | <u> </u> P             | hone no. 312-63                    |                                |        |
|                 |                                  |  |                                       |                        | Forr                               | n <b>990-PF</b>                | (2015) |

### Schedule B

(Form 990, 999-EZ. or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

### Schedule of Contributors

Attach to Form 990. Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and OMB No 1545-0047

Employer identification number

its instructions is at www.irs.gov/form990

MICHAEL SWEIG FOUNDATION 36-7333404 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ 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

Employer identification number

## MICHAEL SWEIG FOUNDATION

36-7333404

| Part I      | Contributors (see instructions) Use duplicate copies of Part I if  | additional space is needed |   |
|-------------|--|----------------------------|---|
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                  | (c) Total contributions    | (d)<br>Type of contribution   |
| 1           | MICHAEL SWEIG  1306 HIGHWAY 50 PO BOX 10769  ZEPHYR COVE, NV 89448 | \$\$                       | Person X Payroll  |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                  | (c)<br>Total contributions | (d)<br>Type of contribution   |
|             |  | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                  | (c)<br>Total contributions | (d)<br>Type of contribution   |
| _           |  | <br>\$                     | Person Payroll Oncash Complete Part II for noncash contributions )  |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                  | (c)<br>Total contributions | (d)<br>Type of contribution   |
|             |  | \$                         | Person Payroll Oncash Complete Part II for noncash contributions )  |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                  | (c)<br>Total contributions | (d)<br>Type of contribution   |
|             |  |                            | Person Payroll Complete Part II for noncash contributions )         |
| (a)<br>No.  | (b) Name, address, and ZIP + 4                                     | (c) Total contributions    | (d)<br>Type of contribution   |
|             |  | \$                         | Person Payroll Oncash Complete Part II for noncash contributions )  |
| 523452 10-2 | 6-15   | Schedule B (Form           | 990, 990-EZ, or 990-PF) (2015)                                      |

Employer identification number

## MICHAEL SWEIG FOUNDATION

36-7333404

| Part II                      | Noncash Property (see instructions) Use duplicate copies of P | art II if additional space is needed           |                            |
|------------------------------|---|--|----------------------------|
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                  | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received       |
| _   _                        |   | <br><br>                                       |                            |
|                              |   |  |                            |
| (a)<br>No.<br>rom<br>art I   | (b) Description of noncash property given                     | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received       |
| -                            |   |  |                            |
|                              |   |  |                            |
| (a)<br>No.<br>om<br>art I    | (b) Description of noncash property given                     | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received       |
| 1-                           |   |  |                            |
| _   _                        |   |  |                            |
| -                            |   |  |                            |
| (a)<br>No.<br>om<br>art I    | (b)<br>Description of noncash property given                  | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received       |
|                              |   |  |                            |
|                              | ······································                        |  |                            |
| (a)<br>No.<br>com            | (b)  Description of noncash property given                    | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received       |
| _                            |   |  |                            |
| -   -                        |   |  |                            |
| (a)                          |   |  |                            |
| lo.<br>om<br>art l           | (b) Description of noncash property given                     | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received       |
| _                            |   |  |                            |
| - -                          |   |  |                            |
| 53 10-26-15                  |   | Schodulo B (Form)                              | 990, 990-EZ, or 990-PF) (2 |

| Schedule B | (Form 990) | 990-F7 | or 990-PF | (2015 |
|------------|------------|--------|-----------|-------|

| lame of organ             | nization   |  |  | Employer identification number |  |  |  |  |  |
|---------------------------|--|--|--|--------------------------------|--|--|--|--|--|
|                           | SWEIG FOUNDATION   |  |  | 36-7333404                     |  |  |  |  |  |
| Part III                  | Exclusively religious, charitable, etc., contrib<br>the year from any one contributor. Complete col<br>completing Part III, enter the total of exclusively religious, of<br>Use duplicate copies of Part III if additional | umns (a) through (e) and the follo<br>thanitable, etc., contributions of \$1,000 c | OWING line entry For organization        | is .                           |  |  |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift  | (d) Desc                                 | ription of how gift is held    |  |  |  |  |  |
| -                         |  |  |  |                                |  |  |  |  |  |
|                           | I_   | (e) Transfer of gi   | ft                                       |                                |  |  |  |  |  |
| -                         | Transferee's name, address, and  | ZIP + 4  | Relationship of tra                      | nsferor to transferee          |  |  |  |  |  |
| (a) No.                   |  |  |  |                                |  |  |  |  |  |
| Part I                    | (b) Purpose of gift  | (c) Use of gift  | (d) Desc                                 | ription of how gift is held    |  |  |  |  |  |
| -<br> -                   |  |  |  |                                |  |  |  |  |  |
|                           | (e) Transfer of gift   |  |  |                                |  |  |  |  |  |
| -                         | Transferee's name, address, and  | Relationship of tra  | nsferor to transferee                    |                                |  |  |  |  |  |
| <del>-</del>              |  |  |  |                                |  |  |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift  | (d) Desc                                 | scription of how gift is held  |  |  |  |  |  |
| -                         |  |  |  |                                |  |  |  |  |  |
| -                         |  | (e) Transfer of gr   | ft                                       |                                |  |  |  |  |  |
|                           | Transferee's name, address, and  | ZIP + 4  | Relationship of tra                      | nsferor to transferee          |  |  |  |  |  |
| -                         |  |  |  |                                |  |  |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift  | (d) Desc                                 | ription of how gift is held    |  |  |  |  |  |
| —   <del>-</del>          |  |  |  |                                |  |  |  |  |  |
| -                         | (e) Transfer of gift   |  |  |                                |  |  |  |  |  |
| _                         | Transferee's name, address, and  | Relationship of tra  | Relationship of transferor to transferee |                                |  |  |  |  |  |
| -                         |  |  |  |                                |  |  |  |  |  |
| -                         |  |  |  |                                |  |  |  |  |  |

MICHAEL SWEIG FOUNDATION FEIN: 36-7333404 CONTRIBUTIONS 12/31/2015

| Amount       | 856.00                | 200.00                | 1,000.00              | 150.00                | 5,000.00              | 50,000.00                          | 5,000.00                           | 2,500.00                           | 850.00                | 1,200.00                           | 10,000.00                     | 3,000.00                             | 800.00                | 5,000.00               | 300.00                  | 3,000.00                                | 3,000.00                  | 8,700.00              | 22,250.00                          | 50,000.00                  | 50,000.00      | 25,000.00      | 5,000 00               |
|--------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------------------|------------------------------------|------------------------------------|-----------------------|------------------------------------|-------------------------------|--------------------------------------|-----------------------|------------------------|-------------------------|---|---------------------------|-----------------------|------------------------------------|----------------------------|----------------|----------------|------------------------|
| Status       | Public Charity                     | Public Charity                     | Public Charity                     | Public Charity        | Public Charity                     | Public Charity                | Public Charity                       | Public Charity        | Public Charity         | Public Charity          | Public Charity                          | Public Charity            | Public Charity        | Public Charity                     | Public Charity             | Public Charity | Public Charity | Public Charity         |
| Relationship | None                  | None                  | None                  | None                  | None                  | None                               | None                               | None                               | None                  | None                               | None                          | None                                 | None                  | None                   | None                    | None                                    | None                      | None                  | None                               | None                       | None           | None           | None                   |
| Location     | Orange County, CA     | Chicago, IL           | Orange County, CA     | Orange County, CA     | Orange County, CA     | Chicago, IL                        | Chicago, IL                        | Chicago, IL                        | Orange County, CA     | Chicago, IL                        | Chicago, IL                   | Chicago, IL                          | Orange County, CA     | Tustin, CA             | Atlanta, GA             | Minden, NV                              | Carson City, NV           | Orange County, CA     | Chicago, IL                        | San Diego, CA              | Rochester, MN  | Chicago, IL    | Tustın, CA             |
| Donee        | Orange County Sheriff | Legacy Charter School | Orange County Sheriff | Orange County Sheriff | Orange County Sheriff | Chicago Police Memorial Foundation | Chicago Police Memorial Foundation | Chicago Police Memorial Foundation | Orange County Sheriff | Chicago Police Memorial Foundation | U of C Kolver Diabetes Center | InfraGard National Member's Alliance | Orange County Sheriff | Make a Wish Foundation | American Cancer Society | Douglas County Sheriff Advisory Council | Carl Howell Memorial Fund | Orange County Sheriff | Chicago Police Memorial Foundation | Blood Cancer Research Fund | Mayo Clinic    | PAWS           | Make a Wish Foundation |
| Date         | 1/20/2015             | 1/2/2015              | 1/28/2015             | 3/10/2015             | 3/10/2015             | 4/20/2015                          | 4/23/2015                          | 4/28/2015                          | 6/1/2016              | 6/15/2015                          | 6/15/2015                     | 6/26/2015                            | 7/1/2015              | 7/8/2015               | 7/15/2015               | 7/17/2015                               | 9/2/2015                  | 10/19/2015            | 10/22/2015                         | 11/9/2015                  | 11/16/2015     | 11/23/2015     | 12/21/2015             |

TOTAL CONTRIBUTIONS

253,106

ALL THE ABOVE CONTRIBUTIONS WERE MADE FOR THE GENERAL, CHARITABLE, RELIGIOUS, EDUCATIONAL, OR SCIENTIFIC PURPOSE OF EACH DONEE ORGANIZATION.

| FORM 990-PF INTERE   | ST ON SAVIN                           | GS AND TEM                    | PORARY                 | CASH IN               | VESTMENTS  | STATEMENT 1   |  |  |  |
|--|---------------------------------------|-------------------------------|------------------------|-----------------------|--|---|--|--|--|
| SOURCE   |                                       | (A<br>REVEI<br>PER BO         | NUE                    | NET IN                | (B)<br>VESTMENT<br>COME  | (C)<br>ADJUSTED<br>NET INCOME   |  |  |  |
| NORTHERN TRUST CHEC  | KING                                  |                               | 6.                     |                       | 6.   | 6.  |  |  |  |
| TOTAL TO PART I, LI  | NE 3                                  |                               | 6.                     |                       | 6.   | 6.  |  |  |  |
| FORM 990-PF  | DIVIDENDS                             | AND INTER                     | EST FRO                | M SECUR               | ITIES  | STATEMENT 2   |  |  |  |
| SOURCE   | GROSS<br>AMOUNT                       | CAPITAL<br>GAINS<br>DIVIDENDS | RE                     | (A)<br>VENUE<br>BOOKS | (B)<br>NET INVES<br>MENT INCO                                    |   |  |  |  |
| NORTHERN TRUST<br>SECURITIES, INC.   | 161,746.                              | 123,11                        | 5.                     | 38,631.               | 38,63  | 38,631.   |  |  |  |
| TO PART I, LINE 4  | 161,746.                              | 123,11                        | 5.                     | 38,631.               | 38,63  | 38,631.   |  |  |  |
| FORM 990-PF  |                                       | OTHER E                       | XPENSES                |                       | STATEMENT 3  |   |  |  |  |
| DESCRIPTION  |                                       | (A)<br>EXPENSES<br>PER BOOKS  | (B<br>NET IN<br>MENT I | VEST-                 | (C)<br>ADJUSTEI<br>NET INCOM                                     |   |  |  |  |
| FILING FEES<br>BANK CHARGES  | _                                     | 15.<br>35.                    |                        | 0.<br>35.             |  | 0. 15.<br>0. 0.   |  |  |  |
| TO FORM 990-PF, PG   | 50.                                   |                               | 35.                    |                       | 0. 15.   |   |  |  |  |
| FORM 990-PF  |                                       | CORPORATI                     | E STOCK                | ····                  |  | STATEMENT 4   |  |  |  |
| DESCRIPTION  |                                       |                               |                        | воо                   | K VALUE  | FAIR MARKET<br>VALUE  |  |  |  |
| AMERICAN GRWTH FUND<br>ABM INDS INC.<br>VANGUARD TOTAL STK<br>VANGUARD GROWTH & I<br>VANGUARD US GROWTH<br>VANGURAD US VALUE I | NCOME INVES<br>PRTF INVEST<br>NVESTOR | TOR CL<br>OR                  |                        |                       | 628,556.<br>7,456.<br>140,850.<br>953,501.<br>12,245.<br>16,713. | 1,024,194.<br>14,235.<br>156,450.<br>1,020,429.<br>14,141.<br>18,338. |  |  |  |
| TOTAL TO FORM 990-P  | F, PART II,                           | LINE 10B                      |                        | 1                     | ,759,321 <b>.</b>  | 2,247,787.  |  |  |  |