

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



Form **990-PF** 

CONTRICTOR MAY 0 6 2016

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

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

OMB No 1545-0052

		nent of the Treasury Revenue Service Information about Form	cial security numbers on 1 990-PF and its separate		-	•	990pf Op	en to Public Inspection
F	or ca	lendar year 2015 or tax year beginning	<del></del>		, and end			, 20
_		of foundation W. PAUL MILLS & THO	ORA J. MILLS ME				oyer identifi	ication number
	FOU	NDATION	, 0				37-	1432256
		er and street (or P O box number if mail is not delivered	to street address)	<del></del>	Room/sui	te B Telep		er (see instructions)
					}			
	106	SOUTH MAIN STREET, STE 16			1		33	0-384-7301
		town, state or province, country, and ZIP or foreign pos	tal code		<u> </u>			0 301 /301
		•				C If exer	nption applica	tion is
	AKR	ON, OH 44308				pendii	ng, check here	
		ck all that apply:   Initial return	Initial return	of a former p	ublic cha	rity D 4 5		
		Final return	Amended ret	•		.		ions, check here P
		Address change	Name change			859	% test, check h	ere and attach
H	Che	ck type of organization: X Section 501				cor	nputation .	▶ []
Ī	$\neg$	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri		ion			status was terminated
Ť			unting method: X Ca		rual			
•			ther (specify)			1		n a 60-month termination (1)(B), check here .
			column (d) must be on cas					
E		Analysis of Revenue and Expenses (The		,			-	(d) Disbursements
_	-	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inve		(c) Adjust		for charitable
		may not necessarily equal the amounts in column (a) (see instructions) )	books	incom	ne	incon	ne	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)						(00,000,000,000,000,000,000,000,000,000
	2	Check if the foundation is not required to						
	3	attach Sch B		· · · · · · · · · · · · · · · · · · ·				<del></del>
	4	Dividends and interest from securities	31,044.	3	1,044.			STMT 1
	5a	Gross rents	02/021					<del></del>
	b	Net rental income or (loss)		-				
a	l	Not goin or (loss) from only of posets not on line 10	30,798.					<del></del>
Revenue	Б	Gross sales price for all 357, 671.						<del></del>
š	7	Capital gain net income (from Part IV, line 2) .		3	0,798.			
æ	8	Net short-term capital gain			<u> </u>			1
	9	Income modifications			F	(ECEIV	<u> </u>	1
ć	آمه ا	Gross sales less returns and allowances					Ç	
Č	]0а Б ь	Less Cost of goods sold			12	10/ 10 2	016	
ر د	C	Gross profit or (loss) (attach schedule)			P	VIAT A VI 2	210	기
<u>ر</u>	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	61,842.	6	1,842	:GU=11,	UI	
<	13	Compensation of officers, directors, trustees, etc.	25,456.	1	2,728.			12,728
ėŠ	14	Other employee salaries and wages						
ŝ	15	Pension plans, employee benefits						
ğ	13 14 15 16a c 17 18 19	Legal fees (attach schedule)						
TI C	Ъ	Accounting fees (attach schedule) STMT 3	1,000.		500.		NONE	500
ž	. c	Other professional fees (attach schedule)						
ē	17	Interest						
ist	18	Taxes (attach schedule) (see instructions, 4.	4,804.		267.		_	
Ē	19	Depreciation (attach schedule) and depletion.						
õ	20	Occupancy						
þ	21	Travel, conferences, and meetings						
au	21 22	Printing and publications						
g	23	Other expenses (attach schedule) STMT. 5.	274.		74.	<u>-</u>		274
atı	24	Total operating and administrative expenses.					-	
jec	23 24	Add lines 13 through 23	31,534.	1	3,569.		NONE	
õ	25	Contributions, gifts, grants paid	53,150					<u>53,150</u> .
_	26	Total expenses and disbursements Add lines 24 and 25	84,684.	1	<u>3,569.</u>		NONE	66 <u>,</u> 652.
ļ	27	Subtract line 26 from line 12:						
	1	Excess of revenue over expenses and disbursements	-22,842.					
		Net investment income (If negative, enter -0-)		4	8,273.			
	C	Adjusted net income (if negative, enter -0-)						

Form **990-PF** (2015)

39-41

For	m 990	D-PF (2015)	<u>37</u>	<u>-1432256</u>	Page 2
Pa	rt II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	250.	119.	
- 1	2	Savings and temporary cash investments	45,383.	14,966.	14,966
- }	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable			
1		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
- {		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			<del></del>
		A contract of the contract of	to the 1 ct as formation that the state of t		re recent to the test of the contract of the
က္	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
	10a	Investments - U.S. and state government obligations (attach schedule).			
		Investments - corporate stock (attach schedule) . STMT .6.	631.883.	673.963.	777,213
[	C	CDM 7	551,240.	516.837	490,608
ļ	11	Investments - land, buildings,			
		Less, accumulated depreciation	i i		
- }	12	(attach schedule) Investments - mortgage loans			<del> </del>
- 1	13	Investments - other (attach schedule)			<del></del>
	14	Land, buildings, and			
1			المرابب المرابطين المرابطين المراب المام	and the party and the second of the party of	The second section of the second section and the second section sectio
[	15	Cattach schedule) Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, Item I)	1 228 756	1 205 885	1,294,641
_	 17	Accounts payable and accrued expenses		1/203/003.	1/231/011
- 1	18	Grants payable			
	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons.			
. <u>~</u>	20 21	Mortgages and other notes payable (attach schedule)			
Lia	22	Other liabilities (describe CASH OVERDRAFT)			
'		Other habilities (describe > Chair Othibian 1			
	23	Total liabilities (add lines 17 through 22)		NONE	
$\pm$		Foundations that follow SFAS 117, check here .		110111	
88		and complete lines 24 through 26 and lines 30 and 31.			
2	2.4	Unrestricted			
al.	25	Temporarily restricted			
<b>∞</b>   ;	25	Permanently restricted			
립.		·			
Net Assets or Fund Balance		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.		İ	1
ŏ,	7	Capital stock, trust principal, or current funds	1,228,756.	1,205,885.	
t)	28	Paid-in or capital surplus, or land, bldg, and equipment fund	1,220,130.	1,205,005.	, 1
SSe	29	Retained earnings, accumulated income, endowment, or other funds			į
Ϋ́	20	Total net assets or fund balances (see instructions)	1,228,756.	1,205,885.	
필:	31	Total liabilities and net assets/fund balances (see	1/220/150.	1,203,003.	
		instructions)	1,228,756.	1,205,885.	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balan		1,203,003.	
		al net assets or fund balances at beginning of year - Part II		nust agree with	
		of-year figure reported on prior year's return)		<u> </u>	1,228,756.
		er amount from Part I, line 27a			-22,842.
		er increases not included in line 2 (itemize) > 2014 INCOME PC		3	1,254.
		lines 1, 2, and 3			1,207,168.
		reases not included in line 2 (itemize) > SEE STAT		5	1,283.
		al net assets or fund balances at end of year (line 4 minus lin			1,205,885.
			, , , , , , , , , , , , , , , , , , , ,	<u></u>	Form <b>990-PF</b> (2015)

_	11 990-FF (2015)					Page 3
Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and	(b) How acquired	(c) Date	(d) Date sold		
	2-story b	P - Purchase D - Donation	acquired (mo., day, yr.)	(mo., day, yr.)		
1a	PUBLICLY TRADED	SECTIPITTES	······································	D - Donation		-
	TODDICHI INTELE	DECKTIED				
<u>b</u>						
_ <u>C</u>						
<u>d</u>						
<u>e</u>	72.72					
	(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	ss)
	(e) Gloss sales price	(or allowable)	plus expense of sale		(e) plus (f) minu	ıs (g)
a	357,671.		326,873.			30,798.
_ <u>u</u> b	33,70,2:		320,073.			30,730.
_ <u>c</u>			·			
<u>d</u>						
<u>e</u>						
	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	in minus
	(1) F M V f 40 /24 /60	(j) Adjusted basis	(k) Excess of col. (ı)		(k), but not less t	han -0-) <b>or</b>
	(i) FMV as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from co	l. (h))
a						30,798.
_ <u>u</u>		<del></del>				30,730.
<u> </u>						
<u>d</u>						<del></del>
е_						
•	Carital asia ast income		gain, also enter in Part I, line 7			
Z	Capital gain net income of	or (net capital loss)	(loss), enter -0- in Part I, line 7	2		30,798.
3	Net short-term capital gai	in or (loss) as defined in sections 1				
-		art I, line 8, column (c) (see ins				
-	rt V Qualification U		uced Tax on Net Investment Ir	3		
	ection 4940(d)(2) applies, s the foundation liable for t	·	outable amount of any year in the ba	ase period	<sub>ქ</sub> 7	Yes X No
lf "\	es," the foundation does n	not qualify under section 4940(e).	Do not complete this part.			
1	Enter the appropriate am	ount in each column for each year	; see the instructions before making	any entr	ies.	
	(a)	(b)	(c)	<del>/</del>	(d)	
C-	Base period years lendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
Ca	2014	CC 00E	1 272 406		(cor (b) divided by	
		66,085.	1,372,486.		<u>.</u>	0.048150
	2013	59,267.	1,319,498.			0.044916
	2012	69,170.	1,307,732.			0.052893
	2011	73,793.	1,321,008.			0.055861
	2010	62,609.	1,302,702.			0.048061
						-
2	Total of line 1, column (d	)		2		0.249881
3		for the 5-year base period - divide				0.213001
3				ا ء		0.049976
	number of years the foun	dation has been in existence if les	s than 5 years	3		0.049976
					_	
4	Enter the net value of nor	ncharitable-use assets for 2015 fro	om Part X, line 5	4	1,	<u>334,356.</u>
				1		
5	Multiply line 4 by line 3			5		66,686.
Ŭ	wattipry into 4 by into 0 .			i		
_	Futon 40/ -5	nt income /40/ -f.B41 ! - 07! }		6		483.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)	• • • • • • • • • • • • • • • • • • • •	<del>-                                    </del>		
				<u>,</u>		67 160
7	Add lines 5 and 6			7		67,169.
8	Enter qualifying distribution of the street	ons from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complete t	8 hat part	using a 1% tax	66,652. rate. See the

•	•			
	**************************************	inetru		age 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	1113110		<u> </u>
Ia	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		9	965
	here ▶ and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			_
3	Add lines 1 and 2		9	965
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			ЮИ
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			965
6	Credits/Payments:			
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 2,740.			
Ь	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
ď	Backup withholding erroneously withheld		2 5	740.
7	Total credits and payments. Add lines 6a through 6d			40.
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,7	775
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax > 965. Refunded > 11			310
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1 1		
	published or distributed by the foundation in connection with the activities.			_
	Did the foundation file Form 1120-POL for this year?	1c		<u></u> 3
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation. \$(2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
2	foundation managers. > \$  Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		)
2	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		}}
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		λ
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		>
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	
_	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	_^	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)  OH			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
J	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8ь	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1

10 Form 990-PF (2015)

		7- 1				
orm"	990-PF (201	5)	37-1432256		F	Page <b>5</b>
Pari	t VII-A	Statements Re	egarding Activities (continued)			
11		_	year, did the foundation, directly or indirectly, own a controlled entity within the	11	Yes	No X
12	Did the	foundation make	a distribution to a donor advised fund over which the foundation or a disqualified	12		Х
13	Did the f		87 If "Yes," attach statement (see instructions)	13	X	<del></del>
14	The books	are in care of ►_	FIRSTMERIT BANK, NA Telephone no. ► (330)384-	730	1	
15			MAIN ST, 5TH FL, AKRON, OH ZIP+4 ► 44308 ppt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here · · · · · · · ·		_	$\Box$
13			exempt interest received or accrued during the year			
16	At any ti	me during calend	ar year 2015, did the foundation have an interest in or a signature or other authority <sub>r</sub>	16	Yes	No
			er financial account in a foreign country?	16	L	X
		country >				
Pari	t VII-B	Statements Re	egarding Activities for Which Form 4720 May Be Required			
	File Form	4720 if any item	n is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the	year did the founda	ation (either directly or indirectly):			1
	(1) Engag	e in the sale or exch	nange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrov	w money from, ler	nd money to, or otherwise extend credit to (or accept it from) a		,	
	disqua	lified person?	Yes X No			( )
	•	•	r facilities to (or accept, them from) a disqualified person?			
			nay or reimburse the expenses of, a disqualified person?			
			assets to a disqualified person (or make any of either available for	-	!	
		·	qualified person)?Yes X No			
			r property to a government official? (Exception. Check "No" if the			1
			make a grant to or to employ the official for a period after			li
		•	t service, if terminating within 90 days.)			
			a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
U				1b		X
	Organizati	ons relying on a cur	urrent notice regarding disaster assistance (see instructions)?	-15		
C			in a prior year in any of the acts described in 1a, other than excepted acts, that	1	/	V
			first day of the tax year beginning in 2015?	<u>1c</u>		X
2			oute income (section 4942) (does not apply for years the foundation was a private in section 4942(j)(3) or 4942(j)(5)):			
а		•	5, did the foundation have any undistributed income (lines 6d and		!	
			ginning before 2015?			
b			in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
			tion of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
			nd attach statement - see instructions.)	2b		X
c	•		4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	,,		
•						
32			ore than a 2% direct or indirect interest in any business enterprise		1	
Ju			Yes X No		1	
h	•	• .	ss business holdings in 2015 as a result of (1) any purchase by the foundation or			
.,			May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
			4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

4a Drd the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? 4b Form 990-PF (2015)

orm 9	990-PF (2015)			37-14	32256		Page <b>6</b>
Par	t VII-B Statements Reg	arding Activities f	or Which Form	4720 May Be Rec	uired (continued)		
5a	During the year did the foundatio	n pay or incur any amo	unt to:				
	(1) Carry on propaganda, or other	rwise attempt to influe	nce legislation (section	on 4945(e))?	. Yes X No	.	
	(2) Influence the outcome of a	any specific public ele	ection (see section	4955); or to carry o	n,		
	directly or indirectly, any vote	er registration drive?			Yes X No	.	
	(3) Provide a grant to an individu				·	1 1	
	(4) Provide a grant to an orga	• • • • • • • • • • • • • • • • • • • •					
	section 4945(d)(4)(A)? (see II			-		,	
	(5) Provide for any purpose of				•		
	purposes, or for the prevention			•		,	
h	If any answer is "Yes" to 5a(1						
~	Regulations section 53.4945 or in	•		• •	•	. 5b	
	Organizations relying on a curren	-	-				
_	- · · · ·					<u> </u>	
C	If the answer is "Yes" to que			•			
	because it maintained expenditur	•	•			'	
	If "Yes," attach the statement requ	, ,	, ,				
6a	Did the foundation, during the	• •	•	• • • •		_	
	on a personal benefit contract?				• —		x
b	Did the foundation, during the ye	ar, pay premiums, direc	tly or indirectly, on a	personal benefit contra	act?	. <u>6b</u>	- <u>^</u> -
_	If "Yes" to 6b, file Form 8870.						
7a L	At any time during the tax year, v	•	•	_	· — —	i i	
	If "Yes," did the foundation received Information About	• •			s, Highly Paid Em		
	and Contractors					p10 y 000,	
1	List all officers, directors, trus	tees, foundation ma					
	(a) Name and addres	ss	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
IRST	' MERIT BANK NA		TRUSTEE				
06_S	. MAIN ST, 16th FL., AKRON, OF	I 44308	1	25,456.	-0-		-0-
JOSEP	H GIBSON, ESQ.		TRUSTEE				
739	KARG DR, AKRON, OH 44313			-0-	-0-		-0-
RONAL	D B. TYNAN, SR		TRUSTEE				
.06 S	. MAIN ST, STE 1600, AKRON, OF	H 44308		-0-	-0-		-0-
REV.	DR. MARK T. RUPPERT		TRUSTEE				
47 E	MARKET ST, AKRON, OH 44304			-0-	-0-		-0-
	Compensation of five highe	st-paid employees	(other than thos	se included on lin	e 1 - see instruction	ons). If no	ne, enter
	"NONE."		/L) Talls and access	1	(d) Contributions to		
(a)	Name and address of each employee pa	aid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense other allo	
			devoted to position		compensation	Other and	
<u>IONI</u>	€			NONE	NONE	No	ONE
						<del></del>	<del></del>
						<u></u>	
		450.000	· · · · · · · · · · · · · · · · · · ·			47/	ONTE

Form 990-PF (2015) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE NONE NONE Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc 1NONE Summary of Program-Related Investments (see instructions) Part IX-B Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1NONE All other program-related investments. See instructions **3**NONE 

37-1432256 Form 990-PF (2015)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc	.,	
	purposes:		
а	Average monthly fair market value of securities	1a	1,322,625.
b	Average of monthly cash balances	1b	32,051.
C	Fair market value of all other assets (see instructions).	1c	NONE
d			1,354,676.
е	,		
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets		NONE
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, se	3	1,354,676.
4			
	instructions)	. 4	20,320.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line		1,334,356.
6	Minimum investment return. Enter 5% of line 5		66,718.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ▶ and do not complete this part.)	undations	
1	Minimum investment return from Part X, line 6		66,718.
2a		<u>5.</u>	
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b	<b></b>	
C		. 2c	<u>965.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1		65,753.
4	Recoveries of amounts treated as qualifying distributions		NONE NONE
5	Add lines 3 and 4, , , , , , , , ,	. 5	65,753.
6	Deduction from distributable amount (see instructions)	. 6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII	u,	
	line 1	. 7	65 <u>,75</u> 3.
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		66,652.
b		. 1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc	.,	
	purposes	. 2	NONE NONE
3	Amounts set aside for specific charitable projects that satisfy the:	1 1	
а	Suitability test (prior IRS approval required)	. 3a	NONE_
b	Cash distribution test (attach the required schedule)		NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line	4 4	66,652.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incom	е.	<del></del>
	Enter 1% of Part I, line 27b (see instructions)	. 5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	66,652.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when	calculating v	vhether the foundation

Form 990-PF (2015)

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

Form 990-PF (2015)

Page **9** 

Lite	TO Alli Unaistributea income (see instri	uctions)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
	line 7				65,753.
2	Undistributed income, if any, as of the end of 2015.				
	Enter amount for 2014 only			53,149.	
	Total for prior years: 20 <u>13</u> ,20,20		NONE		
3	Excess distributions carryover, if any, to 2015:				
ē	From 2010   NONE				
t	Prom 2011 NONE				
C	From 2012 NONE				
C	From 2013   NONE				
	From 2014 NONE				
	Total of lines 3a through e	NONB			
	Qualifying distributions for 2015 from Part XII, line 4. > \$ 66,652.				
a	Applied to 2014, but not more than line 2a			53,149.	·
t	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
	Treated as distributions out of corpus (Election required - see instructions)	NONE			
C	Applied to 2015 distributable amount				13,503.
	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2015 . (If an amount appears in column (d), the same amount must be shown in column (a).)	NONB			NONE
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONB			· <del>- · · · · · · · · · · · · · · · · · ·</del>
b	Prior years' undistributed income. Subtract				
c	line 4b from line 2b		NONE		
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions		NONE		
е	Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions				
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2016				52,250.
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)	NONE			
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9:				
	Excess from 2011 NONE				
	Excess from 2012 NONE  Excess from 2013 NONE				
	17017				
	Excess from 2014 NONE Excess from 2015 NONE				
-	LACCOS HOLLIZOTS   NOINE			<u>_</u>	Form <b>990-PF</b> (2015)

Form	990-PF (2015)			37-1	1432256			Page <b>10</b>
Pa	rt XIV Private Ope	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)		NOT	<u>APPLICABL</u> E
1 a	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	ating			
	foundation, and the ruling	g is effective for 2015, en	ter the date of the ruling		▶			·-•··
Ь	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section	4942(j)	(3) or	4942(j)(5)
2a	Enter the lesser of the ad-	Tax year		Prior 3 years			] ,	e) Total
	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 20	12	<u></u> '	e/ Total
	I or the minimum investment return from Part X for each		-	,				
	year listed						<u> </u>	
b	85% of line 2a							
С	Qualifying distributions from Part							
	XII, line 4 for each year listed .							
d	Amounts included in line 2c not used directly for active conduct of exempt activities							
е	Qualifying distributions made	, , , , , , , , , , , , , , , , , , , ,						
	directly for active conduct of							
	exempt activities Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the							
а	alternative test relied upon "Assets" alternative test - enter.							
_	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test-							
	enter 2/3 of minimum invest-							
	ment return shown in Part X, line 6 for each year listed							
С	"Support" alternative test - enter							
	(1) Total support other than							
	gross investment income (interest, dividends, rents,				ļ			
	payments on securities				İ			
	loans (section 512(a)(5)), or royalties)							
	(2) Support from general							
	public and 5 or more exempt organizations as				1		1	
	provided in section 4942 (j)(3)(B)(iii)						1	
	(3) Largest amount of sup-							
	port from an exempt organization						1	
	(4) Gross investment income .		•					
Par		tary Information (Curing the year - see		only if the foundat	tion had \$5	5,000 or	more i	in assets at
1	Information Regarding					_		
	List any managers of	_		e than 2% of the tota	al contributio	ns receiv	ed by th	ne foundation
-	before the close of any	tax year (but only if th	ey have contributed n	nore than \$5,000). (Se	ee section 50	7(d)(2).)	ou	
	N/A							
b	List any managers of					ın equally	/ large p	ortion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	interest.			
	N/A Information Regarding	0 1 1 1 1 0 1	0.6.1					
				_				
	Check here ► if the check here							
	unsolicited requests for other conditions, comp			ints, etc. (see instruct	tions) to indi	ividuais o	r organiz	zations under
	·				1:4:	الممام المال		<del></del>
а	The name, address, and		r e-mail address of the	person to wnom app	lications sno	uia be add	ressea:	
1.	SEE STATEMENT S		mitted and information	n and matarials there	hould includ	0:		
D	The form in which appl			m and materials they s	snoura merda	c.		
	SEE ATTACHED ST	TATEMENT FOR LI	NE Z					
	Any submission deadling	nes:		<del></del>				
•			NE 2					
	SEE ATTACHED STATEMENT FOR LINE 2							
ď	Any restrictions or li	mitations on awards,	such as by geogra	phical areas, charita	ble fields, l	unds of	institutio	ns, or other
	factors:							
	SEE ATTACHED ST	CATEMENT FOR LI	NE 2					

37-1432256

	990-PF (2015)				Page 11
Pa	t XV Supplementary Information (c	continued)			
3	Grants and Contributions Paid Durin Recipient Name and address (home or business)	g the Year or Appro	oved for F	uture Payment	1
	Recipient	show any relationship to	status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	CONTIDUTION	\ <u></u> -
a	Paid during the year		Ì		
	SEE STATEMENT 27				E2 150
	SEE STATEMENT 27				53,150.
			İ		
			İ		
			İ		
	Total	<u> </u>		3a	53,150.
b	Approved for future payment				
			L		
	Total			▶ 3b	

Form 990-PF (2015)

2230	
	Page 12

Part XVI-A	Analysis of Income-Produ	ucing Acti	ivities			
Enter gross ar	nounts unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
Ū		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
_	service revenue:	<del></del>				(See instructions )
				-		
	<del></del>			+		<del></del>
_	<del></del>			+		
	<del></del>			+		
e f				<del></del>		
				-		
-	nd contracts from government agencies			-		
	nip dues and assessments					
	savings and temporary cash investments			14	31,044.	
	and interest from securities			<del> </del>	31,011.	
	income or (loss) from real estate:		<del></del>		******	
	nanced property					
	bt-financed property · · · · · ·					
	ncome or (loss) from personal property. •					
	estment income			18	30,798.	
	s) from sales of assets other than inventory			1	30,730.	
	ee or (loss) from special events					
	fit or (loss) from sales of inventory enue: a					
		<u> </u>				i
e	<del></del>			<del>-</del>		
	Add columns (b), (d), and (e)			"-	61,842.	<del> </del>
	I line 12, columns (b), (d), and (e)					
	et in line 13 instructions to verify calcu					<u> </u>
Part XVI-B			ccomplishment of E	xempt Pur	poses	
Line No.	Explain below how each activit	•				
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purpose:	s). (See instructions.)
	···					
						· · · · · · · · · · · · · · · · · · ·
					<del></del>	· · · · · · · · · · · · · · · · · · ·
						<del></del>
	· - · · · · · · · · · · · · · · · · · ·				····	
			NOT APPLICABI	ΞE		
_				<del></del>	· · · · · · · · · · · · · · · · · · ·	
				-		
_			<del></del>			-
		·				

JSA 5E1492 1 000

37-143	2256	
--------	------	--

Part XVI		Regarding Transfers nizations	To and Transact	ions and Relation	ships With None	haritabl	e
in se orga	ction 501(c) of the Co	ly or indirectly engage in ode (other than section E	501(c)(3) organization	ns) or in section 527,		Yes	No
		g foundation to a noncha				1a(1)	X
						1a(2)	X
	r transactions:					15.(2)	
(1) S	Sales of assets to a non	icharitable exempt organ	ization			16(1)	X
(2) P	urchases of assets from	m a noncharitable exemp	ot organization			1b(2)	X
(3) R	Rental of facilities, equip	pment, or other assets				1b(3)	X
		ements				1b(4)	X
		es				1b(5)	X
		s or membership or fund				1b(6)	X
		nent, mailing lists, other a ne above is "Yes," comp				the fair	<del>'</del>
		assets, or services giver					
		r sharing arrangement, s					
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of trans	fers, transactions, and shar	ıng arrangem	ents
		=					
					<del></del> -		
-							
			<del></del>				
							-
		<del> </del>	<del></del>				
		<del> </del>					
desci	ribed in section 501(c)	or indirectly affiliated w of the Code (other than		· · · · · · · · · · · · · · · · · · ·	ot organizations	Yes	X No
<u>b</u> If "Ye	es," complete the follow (a) Name of organizatio		(b) Type of organization		(c) Description of relations	hin	
	(a) Name of organizatio	11	(b) Type of organization		(c) Description of Telations	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>
	<del></del>				·· <del>-</del>		
Un	der penalties of perjury, I declar rrect and complete Declaration o	are that I have examined this return to the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the	irn, including accompanying s ised on all information of which	chedules and statements, and preparer has any knowledge	to the best of my knowledg	e and belief,	it is true,
Sign Here	BY 13 1 MEXII B BY 13 1 L n. ska Grand Victor Presiden	. Mouray	5-4-16	Title	May the IRS with the pro	eparer shown	
	AICE LIESINGI	it, Trust Onlopi			<u>L</u>		
Paid	Print/Type preparer's na	me Kebar	rer's signature	Date	CHECK II	TIN	
	JOSEPH B HUL		V 17/M	04/14/		P001358	
Preparer	11111131101110	NST & YOUNG U.S.			Firm's EIN ► 34-	<u>6565596</u>	
Use Onl	· 1	00 YARD STREET, RANDVIEW HEIGHTS,	STE 200 OH 43	212		32-7290	
					For	m 990-PF	(2015)

16- 1

W. PAUL MILLS & THORA J. MILLS MEMORIAL

SECURITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
1	ii
PART I	
990PF,	11 11 11 11 11
FORM	

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
AMERICAN EXPRESS CO AMGEN INC AMPHENOL CORP APACHE CORP COMMON APPLE COMPUTER INC C R BARD INC C R BARD INC C R BARD INC C R BARD INC C R COMPUTER INC C R DAIL ONE FINANCIAL CHEVRONTEXACO CORP COSTCO WHOLESALE CORP DANAHER CORP MALT DISNEY CO E M C CORPORATION E COLAB INC EXXON MOBIL CORP FEDERATED INST HI YLD BOND FUND FED SHORT TERM INC FUND #65 FEDERATED INST HI YLD BOND FUND FED SHORT TERM INC FUND FEDERATED INST HI YLD BOND FUND FEDERATED INST HI YLD BOND FUND FEDERATED INST HI YLD BOND FUND FEDERATED INST HI YLD BOND FUND FEDERATED TOTAL RETURN BND-R6 FIRSTMERIT PRIVATEBANK CASH ACCOUNT HOME DEPOT INC INTUIT INTUIT ISHARES RUSSELL MIDCAP ETF ISHARES TRUST S&P SM CAP 600 JP MORGAN CHASE & CO JOHNSON & JOHNSON CO JOHNSON & JOHNSON CO JOHNSON & JOHNSON CO JOHNSON & GONTROLS INC. M & T BANK CORP MCKESSON HBOC INC NIKE INC CLASS B AXZ456 L668 04/14/2016 09:37:43	1055. 1744. 1745. 2747. 2747. 2746. 2746. 2746. 2746. 2746. 2746. 2746. 2746. 2746. 1111. 1111. 1259. 1259. 1264. 1264. 1264. 1264. 1264. 1264. 1264. 1264. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 1266. 12	105 105 105 105 105 105 105 105 105 105

16

W. PAUL MILLS & THORA J. MILLS MEMORIAL

17- 1

TIES	
SECURIT	
FROM	
INTEREST	
AND	
DIVIDENDS	
ı Н	
PART	
990PF,	
FORM	

NET INVESTMENT INCOME	!!!!!!	26.	187.	Ŋ	136.	S	0	4	~	Н	180.	Н	50.	σ	263.	α	247.	13	4	N	0		76.	•   (     t	31,044.
REVENUE AND EXPENSES PER BOOKS	]	$^{\circ}$	187.	IJ	$\sim$	വ	0	4	7	$\vdash$	180.	Н	50.	σ	9	ω	247.	13	4	Н	0	0	7	•   (	31,044.
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	$\circ$	INTL BOND FD-I	EIMER SR FLOAT R		USTRIES IN	PROCIER & GAMBLE CO	QUALCOMM INC	SPDR DOW JONES REIT ETF	SCHLUMBERGER LID	STARBUCKS CORP		団	TRAVELERS COMPANIES INC	US BANCORP	щ	UNITED TECHNOLOGIES CORP		LOPED MARKETS ETF	OTECTED SECURI	INTERMEDIATE TI		ACCENTURE PLC CL A		TOTAL

N

9	
S	
$^{\circ}$	
N	
m	
4	
_!	
7	
$\mathcal{C}$	

W. PAUL MILLS & THORA J. MILLS MEMORIAL

18- 1

ACCOUNTING FEES	
1	1
H	<u> </u>
PAR	1
90PF,	
<u>۲</u> و	1
FORM	

CHARITABLE PURPOSES		.000
ADJUSTED NET INCOME		NONE
NET INVESTMENT INCOME	500.	1
REVENUE AND EXPENSES PER BOOKS	1,000.	1,000.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC	TOTALS

G
ហ
$^{\prime}$
$^{\circ}$
ᠬ
4
$\leftarrow$
1

TAXES
ı
$\vdash$
PART
990PF,
FORM

į	$egin{array}{c}  ext{NVESTMENT} \end{array}$	INCOME	   1   1   1			200.	67.	1 1 1 1 1 1 1 1 1 1	267.	
REVENUE	AND EXPENSES	PER BOOKS	1 1 1 1 1 1 1	1,797.	2,740.	200.	. 79		4,804.	
		DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FEDERAL TAX PAYMENT - PRIOR YE	FEDERAL ESTIMATES - PRINCIPAL	FOREIGN TAXES ON QUALIFIED FOR	FOREIGN TAXES ON NONQUALIFIED		TOTALS	

W. PAUL MILLS & THORA J. MILLS MEMORIAL

	•		CHARITABLE PURPOSES		200.	274.
1	37-1432256		NET INVESTMENT INCOME	 	74.	74.
	IAL		REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1	200.	274.
20- 1	W. PAUL MILLS & THORA J. MILLS MEMORIAL	FORM 990PF, PART I - OTHER EXPENSES	DESCRIPTION	! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	OTHER ALLOCABLE EXPENSE-PRINCI OTHER NON-ALLOCABLE EXPENSE -	TOTALS

Ŋ

21

W. PAUL MILLS & THORA J. MILLS MEMORIAL

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

EQUITIES

ENDING BOOK VALUE

ENDING FMV

777,213. 777,213.

673,963. 

673,963.

TOTALS

37-1432256

21-1

۲

STATEMENT

W. PAUL MILLS & THORA J. MILLS MEMORIAL

37-1432256

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

FIXED

ENDING BOOK VALUE

516,837.

490,608. 

TOTALS

516,837.

490,608.

ENDING FMV

22

22 - 1

. W. PAUL MILLS & THORA J. MILLS MEMORIAL

37-1432256

==========

FORM 990PF,	PART			DECREASES				
DESCRIPTION							AMOUNT	
2015 INCOME ROUNDING	POSTE	D IN	2016				1,27	7. 6.
				тот	ΔΤ.		1.28	 3.

200000

. W. PAUL MILLS & THORA J. MILLS MEMORIAL FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME: BRENDA MOUBRAY

ADDRESS:

FIRSTMERIT BANK, NA, 106 S. MAIN ST., 16th FLOOR AKRON, OH 44308

RECIPIENT'S PHONE NUMBER: 330-384-7301

FORM, INFORMATION AND MATERIALS:

NO SPECIFIC FORMAT; MUST BE SUBMITTED IN WRITING

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

GRANTS ARE GENERALLY RESTRICTED TO AKRON AND

SUMMIT COUNTY 501(c)(3) ORGANIZATIONS.

· W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: MAGICAL THEATRE COMPANY ADDRESS: P.O. BOX 386 BARBERTON, OH 44203 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 750. RECIPIENT NAME: GREATER AKRON MUSICAL ASSOC. INC. SPONSOR FOR AKRON SYMPHONY ADDRESS: 92 N MAIN STREET AKRON, OH 44308 **RELATIONSHIP:** NONE PURPOSE OF GRANT: NEW PERFORMANCES, EDUCATION & OUTREACH FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: TUESDAY MUSICAL ASSOCIATION ADDRESS: ONE SOUTH MAIN STREET, SUITE 301 AKRON, OH 44308 **RELATIONSHIP:** NONE PURPOSE OF GRANT: EDUCATION & COMMUNITY OUTREACH PROGRAM FOUNDATION STATUS OF RECIPIENT: 500. 

W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: WESTERN RESERVE HISTORICAL SOCIETY HALE FARM & VILLAGE ADDRESS: 10825 EAST BOULEVARD CLEVELAND, OH 44106 RELATIONSHIP: NONE PURPOSE OF GRANT: EDUCATIONAL PROGRAMS AT HALE FARM FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: JUNIOR ACHIEVEMENT USA OF NORTH CENTRAL OHIO ADDRESS: P.O. BOX 26006 AKRON, OH 44319 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAMS FOR SUMMIT COUNTY SCHOOLS FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: CROWN POINT ECOLOGY CENTER ADDRESS: 3220 IRA ROAD BATH, OH 44210 RELATIONSHIP: NONE PURPOSE OF GRANT: 2015 SUMMER FARM & SCIENCE CAMP FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000.

· W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: OPPORTUNITY PARISH ECUMENICAL NEIGHBORHOOD - MINISTRY ADDRESS: 941 PRINCETON STREET AKRON, OH 44311 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FREE MEDICAL CLINIC FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: ACCESS INC. ADDRESS: 230 W MARKET STREET AKRON, OH 44303 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT HOMELESS WOMEN & CHILDREN FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: AKRON-CANTON REGIONAL FOODBANK ADDRESS: 350 OPPORTUNITY PARKWAY AKRON, OH 44307 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 4,000.

2238

. W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BATTERED WOMEN'S SHELTER ADDRESS: 974 EAST MARKET STREET AKRON, OH 44305 RELATIONSHIP: NONE PURPOSE OF GRANT: RENOVATION OF RESIDENTIAL SUITE IN NEW BUILDI FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: BOYS SCOUTS OF AMERICA GREAT TRAIL COUNCIL ADDRESS: 1601 S. MAIN STREET AKRON, OH 44301 **RELATIONSHIP:** NONE PURPOSE OF GRANT: ENTREPRENEURSHIP MERIT BADGE SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: CASA BOARD VOLUNTEER ASSOCIATION INC ADDRESS: 650 DAN STREET AKRON, OH 44310 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SERVICES FOR ABUSED AND NEGLECTED CHILDREN FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500.



· W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: COMMUNITY OUTREACH RESOURCES EXCHANGE-CORE FURNITURE BANK ADDRESS: 2900 STATE ROAD, UNIT 3 CUYAHOGA FALLS, OH 44223 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 500. RECIPIENT NAME: FIRST GLANCE STUDENT CENTER ADDRESS: 943 KENMORE BLVD AKRON, OH 44314 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAMS FOR AT-RISK TEENAGERS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 500. RECIPIENT NAME: GOODWILL INDUSTRIES OF AKRON INC. ADDRESS: 570 E WATERLOO ROAD AKRON, OH 44319 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 1,000.

. W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: HABITAT FOR HUMANITY OF SUMMIT COUNTY INC. ADDRESS: 2301 ROMIG ROAD AKRON, OH 44320 **RELATIONSHIP:** NONE PURPOSE OF GRANT: PROGRAMS & NEIGHBORHOOD INITIATIVES FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: INTERNATIONAL SOAP BOX DERBY INC., ALL AMERICA SOAP BOX DERBY ADDRESS: P.O. BOX 7225 AKRON, OH 44306 RELATIONSHIP: NONE PURPOSE OF GRANT: OPERATING COSTS FOR 2015 SOAP BOX DERBY FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: INVENT NOW INC. ADDRESS: 3701 HIGHLAND PARK NW NORTH CANTON, OH 44720 **RELATIONSHIP:** NONE PURPOSE OF GRANT: CAMP INVENTION 2015 FOUNDATION STATUS OF RECIPIENT: PCAMOUNT OF GRANT PAID ..... 500.

· W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: LOYOLA RETREAT HOUSE ADDRESS: 700 KILLINGER ROAD CLINTON, OH 44216 RELATIONSHIP: NONE PURPOSE OF GRANT: NEW MATTRESS & BOX SPRINGS IN GUEST ROOM FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: PEGASUS FARM ADDRESS: 7490 EDISON STREET, NE HARTVILLE, OH 44632 RELATIONSHIP: NONE PURPOSE OF GRANT: TAKE FLIGHT PROGRAM FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: URBAN VISION ADDRESS: P.O. BOX 1563 AKRON, OH 44309 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SET ON SUCCESS AFTER SCHOOL PROGRAM FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,500.

## 

. W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: VICTIM ASSISTANCE PROGRAM INC. ADDRESS: 150 FURNACE STREET AKRON, OH 44304 **RELATIONSHIP:** NONE PURPOSE OF GRANT: 24 HR CRISIS RESPONSE PROGRAM FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: FIRST PRESBYTERIAN CHURCH OF AKRON ADDRESS: 647 EAST MARKET STREET AKRON, OH 44304 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT OF VARIOUS PROGRAMS & REPAIRS FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 6,000. RECIPIENT NAME: CHILDREN'S CONCERT SOCIETY OF AKRON E.J. THOMAS PERFORMING ARTS HALL ADDRESS: THE UNIVERSITY OF AKRON AKRON, OH 44325 RELATIONSHIP: NONE PURPOSE OF GRANT: CONCERT SERIES & SCHOLASTIC COMPOSERS FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500.

· W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SUMMIT COUNTY HISTORICAL SOCIETY OF AKRON OHIO ADDRESS: 550 COPLEY ROAD AKRON, OH 44320 RELATIONSHIP: NONE PURPOSE OF GRANT: 4TH GRADE OUTREACH & ADULT PROGRAMS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 3,000. RECIPIENT NAME: PROJECT LEARN OF SUMMIT COUNTY ADDRESS: 60 S. HIGH STREET AKRON, OH 44326 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT OF VARIOUS PROGRAMS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: CONSERVANCY FOR CUYAHOGA VALLEY NATIONAL PARK ADDRESS: 1403 WEST HINES HILL ROAD PENINSULA, OH 44264 RELATIONSHIP: NONE PURPOSE OF GRANT: ALL THE RIVERS RUN OUTDOOR PROGRAM FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ...... 600.

## 12.331.0002 2.331.0002

. W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CHILDRENS HOSPITAL MEDICAL CENTER OF AKRON ADDRESS: ONE PERKINS SQUARE AKRON, OH 44308 RELATIONSHIP: NONE PURPOSE OF GRANT: BREASTMILK WARMERS FOR NEONATAL UNIT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,500. RECIPIENT NAME: FURNACE STREET MISSION -SAFETY FORCES CHAPLAINCY CENTER ADDRESS: 150 FURNACE STREET AKRON, OH 44304 **RELATIONSHIP:** NONE PURPOSE OF GRANT: ASSISTANCE TO POLICE, FIRE & DISPATCH FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: INTERVAL BROTHERHOOD HOME CORP. ADDRESS: 3445 SOUTH MAIN STREET AKRON, OH 44319 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT OF VARIOUS PROGRAMS FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000.

• W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: GOOD NEIGHBORS INC. ADDRESS: 1453 GOODYEAR BLVD AKRON, OH 44305 **RELATIONSHIP:** NONE PURPOSE OF GRANT: FUNDS FOR FOOD CENTER FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 2,300. RECIPIENT NAME: HAVEN OF REST MINISTRIES INC. ADDRESS: 175 EAST MARKET STREET AKRON, OH 44309 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SHELTER, FOOD & SERVICES TO HUNGRY & HOMELESS FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: MOBILE MEALS INC. ADDRESS: 1063 SOUTH BROADWAY STREET AKRON, OH 44311 **RELATIONSHIP:** NONE PURPOSE OF GRANT: MEALS, SUPPLEMENTS & EDUCATION FOR NEEDY FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ...... 2,000.

. W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: THE SALVATION ARMY SUMMIT COUNTY AREA SERVICES ADDRESS: 190 SOUTH MAPLE STREET AKRON, OH 44302 **RELATIONSHIP:** NONE PURPOSE OF GRANT: HOT MEALS PROGRAM FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ...... 2,000. RECIPIENT NAME: YOUNG LIFE GREATER AKRON ADDRESS: 420 N. CASCADE COLORADO SPRINGS, CO 80903 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: YOUNG MEN'S CHRISTIAN ASSOCIATION OF AKRON OHIO ADDRESS: 50 S. MAIN STREET, SUITE LL 100 AKRON, OH 44308 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 1,000.

· W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: COMMUNITY HALL FOUNDATION PROGRAM ENDOWMENT - THE CIVIC ADDRESS: 182 SOUTH MAIN STREET AKRON, OH 44308 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT OF VARIOUS PROGRAMS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: ST. SEBASTIAN PARISH FOUNDATION ADDRESS: 476 MULL AVE. AKRON, OH 44320 RELATIONSHIP: NONE PURPOSE OF GRANT: REPLACE GREENHOUSE WINDOWS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: STEWARTS CARING PLACE ADDRESS: 2955 W. MARKET STREET, SUITE R AKRON, OH 44333 **RELATIONSHIP:** NONE PURPOSE OF GRANT: PROGRAMS FOR THOSE WITH CANCER FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 1,000.

## 22.00

. W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BOYS AND GIRLS CLUB OF THE WESTERN RESERVE INC. ADDRESS: 889 JOHATHAN AVE AKRON, OH 44306 RELATIONSHIP: NONE PURPOSE OF GRANT: YOUTH PROGRAMMING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 1,000. RECIPIENT NAME: PREGNANCY CARE OF SUMMIT COUNTY INC. ADDRESS: 195 E. TALLMADGE AVE. AKRON, OH 44310 **RELATIONSHIP:** NONE PURPOSE OF GRANT: PRENATAL, PARENTING & LIFE SKILLS EDUCATION FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: SOUTH STREET MINISTRIES INC. ADDRESS: 130 W. SOUTH STREET AKRON, OH 44311 RELATIONSHIP: NONE PURPOSE OF GRANT: FRONT PORCH PROJECT2ND FLOOR RENOVATION FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID .....

STATEMENT 2

500.



• W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: TRULY REACHING YOU-TRY MINISTRIES ADDRESS: P.O. BOX 814 AKRON, OH 44309 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT OF VARIOUS PROGRAMS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 500. RECIPIENT NAME: BROKEN CHAINS JAIL & PRISON MINISTRY ADDRESS: PO BOX 502 AKRON, OH 44309 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT OF VARIOUS PROGRAMS FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: ALZHEIMERS DISEASE AND RELATED DISORDERS ASSOCIATION ADDRESS: 70 W STREETSBORO ST., STE 201 HUDSON, OH 44236 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT IN SUMMIT COUNTY FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 1,000.

STATEMENT

24

## E CHANGE

• W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: DR. BOB'S HOME ADDRESS: 855 ARDMORE AVE AKRON, OH 44302 RELATIONSHIP: NONE PURPOSE OF GRANT: REPAIRS OF US HISTORICAL LANDMARK FOUNDATION STATUS OF RECIPIENT: PCAMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: EMBRACING FUTURES ADDRESS: 50 S MAIN ST, LL100 AKRON, OH 44308 RELATIONSHIP: NONE PURPOSE OF GRANT: ORTHODONTIC CARE FOR CHILDREN FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: OHIO & ERIE CANALWAY COALITION ADDRESS: 47 W EXCHANGE ST AKRON, OH 44308 **RELATIONSHIP:** NONE PURPOSE OF GRANT: RICHARD HOWE HOUSE EXPLORATION GARDEN FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID .....

500.

. W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_\_ RECIPIENT NAME: ELVES & MORE OF NORTHEAST OHIO ADDRESS: PO BOX 95 CUYAHOGA FALLS, OH 44222 RELATIONSHIP: NONE PURPOSE OF GRANT: BICYCLES FOR KIDS FOR CHRISTMAS FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: STAN HYWET HALL & GARDEN, INC ADDRESS: 714 N PORTAGE PATH AKRON, OH 44303-1399 **RELATIONSHIP:** NONE PURPOSE OF GRANT: 2015 ANNUAL FUND FOUNDATION STATUS OF RECIPIENT: PC 500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: SUMMIT EDUCATION INITIATIVE ADDRESS: QUAKER SQUARE, STE 303 AKRON, OH 44308-1745 **RELATIONSHIP:** NONE PURPOSE OF GRANT: PROFESSIONSAL DEVELOPMENT -BASED INTERVENTION FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID ......

26

500.

# 9500 CH2

. W. PAUL MILLS & THORA J. MILLS MEMORIAL 37-1432256 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: OHIO GUIDESTONE ADDRESS: 202 E BAGLEY RD BEREA, OH 44017 RELATIONSHIP: NONE PURPOSE OF GRANT: RECOVERY COACHING IN SUMMIT COUNTY FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 500. TOTAL GRANTS PAID: 53,150. ===========

STATEMENT

27