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Department of the Treasury

Internal Revenue Service

DLN: 93491228000106

OMB No 1545-0052

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at $\underline{www.irs.gov/form990pf}$.

Open to Public Inspection

For	cale	ndar year 2015, or tax y	year beginning 01-0	1-2015	, ar	nd ending 1	2-31-2015	
	e of four	ndation P EMPLOYEES FOUNDATION INC				A Employer id	entification numb	er
GF	'D GROU	P EMPLOYEES FOUNDATION INC				46-3799183		
Num	ber and	street (or P O box number if mail is	not delivered to street address)	Room/suite		B Telephone nur	nber (see instruction	s)
52	0 S MAIN	N ST NO 2531				(330) 572-2100	ı	
City	or town,	, state or province, country, and ZIP c	or foreign postal code			C If exemption	application is pendin	g, check here 🕨
AKR	ON, OH	44311						
G C	neck al	l that apply Initial return	Initial return of a fo	ormer public charity		D 1. Foreian or	ganizations, check h	ere 🕨
		∏Final return ∏Address chan	A mended return ge Name change			•	ganizations meeting	•
H C ł	neck tv	pe of organization Section	- · · · · · · · · · · · · · · · · · · ·	e foundation			k here and attach co Indation status was i	
∏S€	ection 4	1947(a)(1) nonexempt charita	ble trust Other taxable	e private foundation		under section	n 507(b)(1)(A), ched	:k here ► I
		et value of all assets at end rom Part II, col. (c),	JAccounting method Other (specify)	✔ Cash Accrual			ation is in a 60-mont n 507(b)(1)(B), chec	
		\$ 2,362,669	(Part I, column (d) must	be on cash basıs.)			(- , (- , (- , ,	
Pa	rt I	Analysis of Revenue a		Revenue and				Disbursements
		(The total of amounts in columns in necessarily equal the amounts in c		expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	for charitable purposes
	T .	<i>instructions))</i> Contributions, gifts, grants, e	ats recoved (attach	(4)				(d) (cash basis only)
	1	schedule)	etc , received (attach	978,344				
	2	Check ► ☐ If the foundation	is not required to attach	370,311				
		·						
	3	Interest on savings and temp	oorary cash investments					
	4	Dividends and interest from s	securities	27,393		27,393		
	5a	Gross rents						
	ь	Net rental income or (loss) _						
\$	6a	Net gain or (loss) from sale o	if assets not on line 10	46,665				
Revenue	b	Gross sales price for all asse 869,659	ets on line 6a					
Re	7	Capital gain net income (fron	n Part IV, line 2)			46,665		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and						
	ь	allowances Less Cost of goods sold .						
	С	Gross profit or (loss) (attach						
	11	Other income (attach schedu	ıle)	% 31,307		0		
	12	Total.Add lines 1 through 11		1,083,709		74,058		
	13	Compensation of officers, dir	ectors, trustees, etc	0		0		(
	14	O ther employee salaries and	_					
ě.	15	Pension plans, employee ber						
Expenses	16a 	Legal fees (attach schedule)		2,900		0		2,900
Ë	Ь р	Accounting fees (attach scho						2,900
	C	Other professional fees (atta		11,657		11,657		,
rati	17 18	Interest		% 1,575		0		200
돌	19	Taxes (attach schedule) (see Depreciation (attach schedu	•	2,3.15				
Administrative	20	Occupancy		-				
Ă	21	Travel, conferences, and med						
and (22	Printing and publications	_					
2	23	Other expenses (attach sche	edule)	40,764		0		8,608
Operating	24	Total operating and administ	rative expenses.					
<u>ā</u>		Add lines 13 through 23		56,896		11,657		11,708
0	25	Contributions, gifts, grants p		202,386				202,386
	26	Total expenses and disburser 25	nents.Add lines 24 and	259,282		11,657		214,094
	27	Subtract line 26 from line 12		239,282		11,037		
	a	Excess of revenue over expe		824,427				
	b	Net investment income (if ne	gatıve, enter -0-)			62,401		
	С	Adjusted net income(If negation	cive, enter -0-)					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	•
	1	Cash—non-interest-bearing	(a) Book Value 55,073	(b) Book Value 48,052	(c) Fair Market Value 48,052
		Savings and temporary cash investments	559,304		593,284
	2	Accounts receivable	337,304	333,204	373,204
	3	Less allowance for doubtful accounts			
		Pledges receivable			
	4	Less allowance for doubtful accounts			
	_				
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	_	Less allowance for doubtful accounts -			
١٤	8	Inventories for sale or use	5.020	F 000	F 000
Assets	9	Prepaid expenses and deferred charges	5,938	5,089	5,089
Ă	10a	Investments—U S and state government obligations (attach schedule)			
		Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) -			
	12	Investments—mortgage loans	ļ		
	13	Investments—other (attach schedule)	999,431	1,716,244	1,716,244
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
	15	O ther assets (describe 🟲)	100	*5	0
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	1,619,846	2,362,669	2,362,669
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lla	21	Mortgages and other notes payable (attach schedule)			
	22	O ther liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
J.		Foundations that follow SFAS 117, check here 🕨 🔽			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
lan	24	Unrestricted	1,619,846	2,362,669	
8	25	Temporarily restricted			
Ξ	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, check here 🕨 🦵			
5		and complete lines 27 through 31.			
Ş	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
4	29	Retained earnings, accumulated income, endowment, or other funds			
Net	30	Total net assets or fund balances (see instructions)	1,619,846	2,362,669	
	31	$\textbf{Total liabilities and net assets/fund balances} (\texttt{see} \ \texttt{instructions}) . .$	1,619,846	2,362,669	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree	
		with end-of-year figure reported on prior year's return) \dots		1	1,619,846
2		Enter amount from Part I, line 27a		2	824,427
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		4	2,444,273
5		Decreases not included in line 2 (itemize) ▶		_ % 3 5	81,604
6		Total net assets or fund balances at end of year (line 4 minus line 5)—l		ine 30 . 6	2,362,669

the Part VI instructions

Form 99	0-PF(2015)								Page 3
Part I	V Capital Gains	and Lo	osses for Tax on Inve	stment Incom	ie				
			d(s) of property sold (e g , re or common stock, 200 shs		(How acquired P—Purchase b) D—Donation	l Da	ate acquired no , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data	Table							
b					\top				
					\top				
d					十				
					\top				
(e) Gross sales price		Depreciation allowe (f) (or allowable)			r other basis pense of sale			n or (loss) (f) minus (g)
a	See Additional Data	Table		(3).					
b									
С С									
d									
е									
Cor	nplete only for assets	showing	gaın ın column (h) and owne	ed by the foundation	on o	n 12/31/69		Gains (Col	(h) gain minus
(i)	F M V as of 12/31/69		A djusted basis (j) as of 12/31/69			ss of col (ı) ol (j), ıf any	(I)	ol (k), but no	ot less than -0-) or (from col (h))
a	See Additional Data	Table							
b									
С С									
d									
e									
2	Capital gain net inco	·		If gain, also ente If (loss), enter -0) - In		2		46,665
3		_	or (loss) as defined in sectio ine 8, column (c) (see instru • • • • • •			er-0-	3		
Part V	V Qualification	Jnder	Section 4940(e) for R	educed Tax o	n N	et Investme		come	
(For opt		orivate f	oundations subject to the se						
Was the	foundation liable for th	e sectio	on 4942 tax on the distribut fy under section 4940(e) D				erıod?		┌ Yes ┌ No
			ach column for each year, s				riac		
	(a) period years Calendar		(b)	(0	=)			(d) Distributio	
year (c	r tax year beginning in)	Adju	usted qualifying distributions	Net value of nonch	arıtaı		(col (b) divided	, , , , ,
	2014		19,368			667,513			0 029015
	2013		13,331			88,179			0 151181
	2012								
	2010								
		n (d).					2		0 180196
3			r the 5-year base period—di dation has been in existenc			by 5, or by	3		0 090098
4			aritable-use assets for 201!				4		1,605,895
5				•		⊢	5		144,688
6			income (1% of Part I, line 2			⊢	6		624
7							7		145,312
8			from Part XII, line 4				8		214,094
-			r than line 7, check the box					ıng a 1% ta	-

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	1940(e)	. or 4948—se	e page	18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here		,	\ \					
Ia	and enter "N/A" on line 1	- 1							
	Date of ruling or determination letter			ļ					
	(attach copy of letter if necessary—see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V	, check	(ļ	1				624
	here Fand enter 1% of Part I, line 27b								
C	All other domestic foundations enter 2% of line 27b Exempt foreign organiz Part I, line 12, col (b)	zations	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ındatıor	s only Othe	ers	2				0
3	Add lines 1 and 2				3				624
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable for	undatıoı	ns only Oth	ers	4				
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less,	antar - (n_		5				624
	Credits/Payments	enter -t)	•	Э				024
6 a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	I	796					
b	Exempt foreign organizations—tax withheld at source	6b		7 3 0					
c	Tax paid with application for extension of time to file (Form 8868)	6c	+	1,200					
d	Backup withholding erroneously withheld	6d		1,200					
u 7	Total credits and payments Add lines 6a through 6d				7				1 006
8	Enter any penalty for underpayment of estimated tax. Check here if Form				8				1,996
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				10				1,372
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	1,372	Refunded		11				1,3/2
	t VII-A Statements Regarding Activities	1,572	- Ter anaca						
1a	During the tax year, did the foundation attempt to influence any national, stat	e orlo	ral legislatio	n or di				Yes	No
	it participate or intervene in any political campaign?				<u> </u>		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for	politica	l purposes (see In	structi	ons			
	for definition)?						1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activitie	s and co	opies of any i	nateria	ls				
	published or distributed by the foundation in connection with the activities.		,						
c	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impo			r					
	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers	> \$ _		0					
e	Enter the reimbursement (if any) paid by the foundation during the year for po	litical e	xpenditure t	ax ımp	osed				
	on foundation managers 🕨 \$0								
2	Has the foundation engaged in any activities that have not previously been re	eported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in	ıts gov	erning instru	ment,	articles	5			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a contact of the similar instruments of the similar instruments of the similar instruments of the similar instruments. If "Yes," attach a contact of the similar instruments of the similar	formed	copy of the c	hanges			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more	during t	the year?.				4a		No
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 \boldsymbol{d}	uring th	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4	945) sa	itisfied eithe	r					
	By language in the governing instrument, or	L - L							
	By state legislation that effectively amends the governing instrument so to the state of th					I			
_	that conflict with the state law remain in the governing instrument?						6	Yes	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the yea and Part XV.	r <i>ii "Ye</i> • • •	s," complete	Part 11,), 	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered $% \left(1\right) =\left(1\right) \left(1\right) \left$	(see in:	structions)						
	► ОН								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9								
	General (or designate) of each state as required by General Instruction G? If						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see ins	tructions for	rart X	1 A) 3		^		NI -
10	If "Yes," complete Part XIV		h a schedula	licting	their	· · ·	9	$\vdash \vdash \vdash$	No
10	and addresses.			_			10	Yes	

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► WWW GPDFOUNDATION ORG			
14	The books are in care of ►JAMES SHIVES) 572	-2100	
	Located at \$\infty\$520 S MAIN ST STE 2531 AKRON OH ZIP+4 \$\infty\$44311			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year	• •	- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	1	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t 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.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	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 were not corrected before the first day of the tax year beginning in 2015?	1c		No
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))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes Vo			
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	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			
	▶ 20 <u>,</u> , 20 <u>,</u> , 20 <u>,</u> , 20 <u>,</u>			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2015.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Form	1990-PF (2015)				Page 6
Pa	rt VIII-B Statements Rega	ording Activities for	Which Form 4720	May Be Required (Cons	tinued)
5a	During the year did the foundation	n pay or incurany amoun	t to		
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e legislation (section 49	45(e))? Yes	No
	(2) Influence the outcome of any	specific public election	(see section 4955), or to	carry	
	on, directly or indirectly, any	voter registration drive?			
	(3) Provide a grant to an individu	al for travel, study, or otl	ner sımılar purposes?	☐ Yes 「	√ No
	(4) Provide a grant to an organiza				
	in section 4945(d)(4)(A)? (se	ee instructions)		T Yes 「	No
	(5) Provide for any purpose other educational purposes, or for t				√ No
b	If any answer is "Yes" to 5a(1)-((5), dıd any of the transac	tions fail to qualify under	r the exceptions described in	
	Regulations section 53 4945 or	ın a current notice regard	ling disaster assistance	(see instructions)?	5b
	Organizations relying on a curren	nt notice regarding disast	er assistance check her	e	_
c	If the answer is "Yes" to question	n 5a(4), does the foundat	ion claim exemption fron	n the	
	tax because it maintained expend	diture responsibility for tl	ne grant?	T Yes「	No No
	If "Yes," attach the statement requ	ured by Regulations sectio	n 53.4945–5(d).		
6a	Did the foundation, during the yea	ar, receive any funds, dire	ectly or indirectly, to pay	premiums on	
	a personal benefit contract?				√ No
b	Did the foundation, during the yea	ar, pay premiums, directl	y or indirectly, on a perso	onal benefit contract?	. 6b No
	If "Yes" to 6b, file Form 8870.				
7a	At any time during the tax year, v	was the foundation a part	y to a prohibited tax shel	lter transaction? Yes	✓ No
b	If yes, did the foundation receive	any proceeds or have ar	y net income attributabl	e to the transaction?	. 7b
Da	31 38 74 8 8 8	t Officers, Directors	s, Trustees, Founda	ation Managers, Highly	Paid Employees,
	and Contractors	<i>c</i>			
	List all officers, directors, trustee	s, roundation managers a	ing their compensation ((d)	
	(a) Name and address	Title, and average hours per week	(c) Compensation(If not paid, enter	Contributions to	Expense account,
		(b) devoted to position	-0-)	employee benefit plans and deferred compensation	(e) other allowances
DARR	IN KOTECKI	PRESIDENT	0		0
520	SOUTH MAIN STREET SUITE	0 25			
253					
	ON, OH 44311		_		
	S SHIVES	TREASURER 0 25	0	0	0
253	SOUTH MAIN STREET SUITE	0 23			
	ON,OH 44311				
JEFFF	REY EVANS	SECRETARY	0	0	0
520	SOUTH MAIN STREET SUITE	0 25			
253					
	ON, OH 44311 Compensation of five highest-paid	d amployacs (ather than	 these included on line 1-	_coo instructions) If none o	ntor"NONE"
				Contributions to	III III III III III III III III III II
Nar	(a) me and address of each employee more than \$50,000	Title, and aver paid hours per we (b) devoted to pos	ek (c) Compensation	employee henefit	Expense account, (e) other allowances
NON	IE				
-					
	I number of other employees paid	1			<u> </u>

Part VIII Information About Officers, Directors, To and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional serv	vices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional serv	Ices	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Incluorganizations and other beneficiaries served, conferences convened, research paper		Expenses
1		
2		
4		
Part IX-B Summary of Program-Related Investme	nts (see instructions)	l
Describe the two largest program-related investments made by the foundation of	during the tax year on lines 1 and 2	A mount
1 NONE		C
2		
All other program-related investments See instructions		
3		-
Total Add lines 1 through 3	•	

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	<u> </u>	
	purposes		
а	A verage monthly fair market value of securities	1a	1,434,382
Ь	A verage of monthly cash balances	1b	195,968
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,630,350
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,630,350
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	24,455
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,605,895
6	Minimum investment return. Enter 5% of line 5	6	80,295
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	80,295
2a	Tax on investment income for 2015 from Part VI, line 5 2a 624		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	624
3	Distributable amount before adjustments Subtract line 2c from line 1	3	79,671
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	79,671
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	79,671
	Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1-	214.004
a L	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	214,094
	Program-related investments—total from Part IX-B	1b	0
2		١,	
,	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the	2-	l
a	Suitability test (prior IRS approval required)	3a	
b 4	Cash distribution test (attach the required schedule)	3b	314.004
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	214,094
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	(3.4
_	Income Enter 1% of Part I, line 27b (see instructions)	5	624
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	foundation qualifies for
	the section 4940(e) reduction of tax in those years	iei tile	iounuation quannes for

(a) (b) (c) (d) 2015 1 Distributable amount for 2015 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only	
2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only	
a Enter amount for 2014 only	79,671
b Total for prior years 20 , 20 , 20	
Excess distributions carryover, if any, to 2015 a From 2010	
a From 2010	
a From 2010	
b From 2011	
<pre>d From 2013</pre>	
<pre>d From 2013</pre>	
f Total of lines 3a through e	
f Total of lines 3a through e	
4 Qualifying distributions for 2015 from Part XII, line 4 \$	
XII, line 4 \$ 214,094 a Applied to 2014, but not more than line 2a 1,270 b Applied to undistributed income of prior years (Election required—see instructions) c Treated as distributions out of corpus (Election required—see instructions) d Applied to 2015 distributable amount	
A Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required—see instructions) c Treated as distributions out of corpus (Election required—see instructions) d Applied to 2015 distributable amount	
b Applied to undistributed income of prior years (Election required—see instructions) c Treated as distributions out of corpus (Election required—see instructions) d Applied to 2015 distributable amount	
(Election required—see instructions) c Treated as distributions out of corpus (Election required—see instructions) d Applied to 2015 distributable amount	
required—see instructions) d Applied to 2015 distributable amount	
e Remaining amount distributed out of corpus 133,153	79,671
5 Excess distributions carryover applied to 2015 0	0
(If an amount appears ın column (d), the same amount must be shown ın column (a).)	
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	
b Prior years' undistributed income Subtract	
line 4b from line 2b	
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	
d Subtract line 6c from line 6b Taxable amount —see instructions	
e Undistributed income for 2014 Subtract line	
4a from line 2a Taxable amount—see	
Instructions	<u>:</u>
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must	
be distributed in 2015	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)	
8 Excess distributions carryover from 2010 not	
applied on line 5 or line 7 (see instructions)	
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	
10 Analysis of line 9	
a Excess from 2011	
b Excess from 2012	
c Excess from 2013	
d Excess from 2014	
e Excess from 2015	

NOT ORDINARILY MAKE COMMITMENTS FOR MULTI-YEAR GRANTS OR CONSIDER GRANTS TO ANNUAL FUND DRIVES, TO UNITS OF GOVERNMENT, OR ORGANIZATIONS WHICH ARE PRIMARILY TAX-SUPPORTED REQUESTS FROM THE SAME

ORGANIZATION CAN BE CONSIDERED ONLY ONCE DURING A TWELVE-MONTH PERIOD

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 202,386 **b** Approved for future payment

Part XVI-A Analysis of Income-Produ	cing Activities	s			Page 12
Enter gross amounts unless otherwise indicated		siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a b					
c d					
e f					
g Fees and contracts from government agencies2 Membership dues and assessments3 Interest on savings and temporary cash					
Investments			14	27,393	;
a Debt-financed property					
b Not debt-financed property.6 Net rental income or (loss) from personal property					
7 Other investment income8 Gain or (loss) from sales of assets other than					
9 Net income or (loss) from special events			18	46,665	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a GOLF OUTING FUNDRAISER			01	31,307	,
b					
d				105.005	
 Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify 	calculations)			105,365 3	105,365
Part XVI-B Relationship of Activities t	to the Accomp				ently to
the accomplishment of the foundation instructions)					

Par	t XVI	Information Re Noncharitable				actions a	and Relationships	With		
		rganization directly or i	ndırectly e	engage in any of t	the following wit				Yes	No
		501(c) of the Code (othe	er than sec	ction 501(c)(3) c	organizations) o	r in section	527, relating to politica		163	140
	ganızat		adation to			tion of				
		s from the reporting foui h						1a(1)		No
-	•	erassets						1a(1)	1 1	No
•	•	er assets						Ia(2)		NO
		es of assets to a noncha	ritable eve	empt organization	n			1b(1)		No
		chases of assets from a							\vdash	No
		tal of facilities, equipme							+	No
		nbursement arrangemer							\vdash	No
		ns or loan guarantees.							\vdash	No
		rmance of services or m							\vdash	No
		of facilities, equipment,							+	No
	_	swer to any of the above	_							140
of	the god any tra	ods, other assets, or se ansaction or sharing arr (b) Amount involved	rvices giv angement	en by the reporti	ng foundation I (d) the value of	the founda the goods,	tion received less than	fair market value es received	e	nts
(,		(-,	(-,			(,	,	,		
de	scribe	undation directly or indidinsection 501(c) of the complete the following (a) Name of organization	ne Code (d schedule	ther than section		in section 5	27°	tion of relationship	es 🔽	No
Sign	the	der penalties of perjury, best of my knowledge a ormation of which prepai	and belief,	ıt ıs true, correct					sed on	all
Here	e 👠	*****			2016-08-13	🛦 **	****	return with the prepa		
		Signature of officer or t	rustee		Date	Tit	le	below (see instr)?		
		Print/Type preparer's LAURA B CULP	name	Preparer's Sign	ature	Date	Check if self- employed ▶	PTIN P00050	877	
Use	arer	Firm's name FIRM's name FIRM's address FIRM's address					Firm's EIN ► 36	5-3168081		
Only	•	1735 MERRIMAN RO	AD AKRO	N,OH 443139	007		Phone no (330)	864-6661		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
162 439 SHS AMERICAN BEACON FDS	Р	2001-01-01	2015-03-06
99 325 SHS ARTISAN FDS INC	Р	2001-01-01	2005-03-06
1,497 875 SHS BAIRD INTERMEDIATE BD FD	Р	2001-01-01	2015-03-06
36 360 SHS COLUMBIA ACORN INTL FD	Р	2001-01-01	2015-03-06
71 622 SHS DODGE & COX INTL STOCK FD	Р	2001-01-01	2015-03-06
1,097 312 SHS DODGE & COX INCOME FD	Р	2001-01-01	2015-03-06
91 886 SHS EAGLE SMALL CAP GROWTH FD	Р	2001-01-01	2015-07-07
593 023 SHS EATON VANCE FLOATING RATE FD	Р	2001-01-01	2015-03-06
90 521 SHS GOLDMAN SACHS M/C	Р	2001-01-01	2015-03-06
134 895 SHS GOLDMAN SACHS GROWTH FD	Р	2001-01-01	2015-03-06

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
3,122		3,259	-137
3,088		3,023	65
16,641		16,836	-195
1,569		1,690	-121
3,114		3,055	59
15,187		15,154	33
5,430		5,300	130
5,337		5,450	-113
3,785		3,990	-205
3,792		4,071	-279

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basıs (j) as of 12/31/69	Excess of col (ı) (k) over col (յ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))
			-137
			65
			-195
			-121
			59
			33
			130
			-113
			-205
			-279

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
170 396 SHS HARDING LOEVNER INTL EQUITY	Р	2001-01-01	2015-03-06
76 SHS ISHARES MSCI EMERGING MKTS	Р	2001-01-01	2015-03-06
13 SHS ISHARES S&P SMALL CAP 600 VALUE ETF	Р	2001-01-01	2015-03-06
1,063 98 SHS MFS VALUE FD	Р	2001-01-01	2015-05-12
306 437 SHS MAINSTAY EPOCH GLOBAL EQUITY YIELD FD	Р	2001-01-01	2015-03-06
443 247 SHS METROPOLITAN WEST UNCONST BOND FD	Р	2001-01-01	2015-03-06
274 559 SHS T ROWE PRICE GROWTH STOCK FD	Р	2001-01-01	2015-03-06
1,092 697 SHS T ROWE PRICE VAULE FD INC	Р	2001-01-01	2015-05-12
110 770 SHS T ROWE PRICE REAL ESTATE FD	Р	2001-01-01	2015-03-06
427 064 SHS TEMPLETON GLOBAL BOND FD	Р	2001-01-01	2015-03-06

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
3,118		3,033	85
2,978		3,053	-75
1,510		1,550	-40
37,814		37,846	-32
6,000		6,077	-77
5,288		5,292	-4
15,117		14,425	692
38,473		38,441	3 2
2,982		3,025	-43
5,291		5,577	-286

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	Gains (Col (h) gain minus		
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			85
			-75
			-40
			-32
			-77
			-4
			692
			32
			-43
			-286

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
808 443 SHS TOUCHSTONE SANDS CAPITAL SELECT GROWTH FD	Р	2001-01-01	2015-03-06
627,688 920 SHS PNC ADVANTAGE INSTITUTIONAL MONEY MKT # 133 A	Р	2001-01-01	2015-01-31
CAPITAL GAINS DIVIDENDS	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

TOTHI 990FT Fait IV - Capit	of the 330FF Fait 14 - Capital Gains and Losses for Tax on Theestinent Income - Columns e - In						
(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)				
15,126		15,158	-32				
627,689		627,689	0				
47,208			47,208				

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	Gains (Col (h) gain minus		
(i) F M V as of 12/31/69	A djusted basıs (j) as of 12/31/69	Excess of col (1) (k) over col (j), ıf any	col (k), but not less than -0-) or (l) Losses (from col (h))
			-32
			0
			47,208

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

DARRIN KOTECKI

JAMES SHIVES

JEFFREY EVANS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
AKRON CHILDREN'S HOSPITAL ONE PERKINS SQUARE AKRON,OH 44308		PC	PALLIATIVE CARE PROGRAM	5,000
AKRON CHILDREN'S MUSEUM 3867 WEST MARKET STREET AKRON,OH 44333		PC	FOUNDATION OUTREACH PROGRAM	1,500
FIRESTONE HIGH SCHOOL 333 RAMPART AVENUE AKRON,OH 44313		PC	PROGRAMMING FOR SUCCESS	12,790
ANNET CASE PTA 1393 WESTVALE AVENUE AKRON,OH 44313		PC	FUNDS FOR PLAYGROUND	10,000
ART SPARKS 450-C PORTAGE TRAIL CUYAHOGA FALLS, OH 44221		PC	HEALTH AND WELLNESS CURRICULUM	3,000
BOYS & GIRLS CLUB OF WESTERN RESERVE 889 JONATHAN AVENUE AKRON,OH 44306		PC	ANNUAL PROGRAM SUPPORT	8,062
BRECKSVILLE BROADVIEW HEIGHTS CITY SCHOOL DISTRICT- BOARD OF EDUCATION 6638 MILL ROAD BRECKSVILLE,OH 44141		PC	ANNUAL PROGRAM SUPPORT	18,282
CHILDHOOD LEAGUE INC 670 SOUTH 18TH STREET COLUMBUS,OH 43205		PC	ANNUAL PROGRAM SUPPORT	2,000
CLEVELAND HEARING AND SPEECH CENTER 11635 EUCLID AVENUE CLEVELAND,OH 44106		PC	REGIONAL INFANT HEARING PROGRAM SUPPORT	5,000
CLEVELAND SOCIETY FOR THE BLIND 1909 E 101ST STREET CLEVELAND,OH 44106		PC	EARLY INTERVENTION SERVICE SUPPORT	5,000
COVENTRY LOCAL SCHOOLS 2910 SOUTH MAIN STREET AKRON,OH 44319		PC	COMMUNITY PLAYGROUND FUNDING	10,000
DOWNS ON THE FARM 12221 W RIDGE ROAD OBERLIN,OH 44074		PC	OPERATIONS SUPPORT	2,000
EMBRACING FUTURES INC 50 S MAIN STREET SUITE LL100 AKRON,OH 44308		PC	ORTHODONTIC CARE PROGRAM SUPPORT	5,249
FIELD LOCAL SCHOOLS 2900 ST RT 43 MOGADORE,OH 44240		PC	LIFE SKILLS EDUCATIONAL PROGRAM SUPPORT	5,580
INVENT NOW INC 3701 HIGHLAND PARK NW		PC	CAMP INVENTION 2015 PROGRAM SUPPORT	5,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

	I			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JAMES WHITCOMB RILEY MEMORIAL ASSOCIATION 30 SOUTH MERIDIAN STREET SUITE 200 INDIANAPOLIS,IN 46204		PC	RILEY HOSPITAL FOR CHILDREN SCHOOL PROGRAM SUPPORT	5 ,0 0 0
LAKEWOOD CITY SCHOOLS 1470 WARREN ROAD LAKEWOOD,OH 44107		PC	TECHNOLOGY FUNDING	10,000
LEDGEVIEW ELEMENTARY SCHOOL 9130 SHEPERD ROAD MACEDONIA,OH 44056		PC	HISTORY PROGRAM SUPPORT	1,166
LINKING EMPLOYMENT ABILITIES AND POTENTIAL 2545 LORAIN AVENUE CLEVELAND,OH 44113		PC	SCHOOL TO WORK PROGRAM FOR YOUTH WITH DISABILITIES	5,000
MARION CITY SCHOOL DISTRICT 420 PRESIDENTIAL DRIVE SUITE B MARION,OH 43302		PC	ITECH TOOLS FOR AUTISM PROJECT	19,522
METROPOLITAN SCHOOL DISTRICT OF LAWRENCE TOWNSHIP 6501 SUNNYSIDE ROAD INDIANAPOLIS,IN 46236		PC	CAMP KALEIDOSCOPE SUPPORT	20,000
NATIONWIDE CHILDREN'S HOSPITAL FOUNDATION 525 EAST MOUND STREET COLUMBUS,OH 43215		PC	INPATIENT MUSIC THERAPY SUPPORT	7,500
PARMA CITY SCHOOL DISTRICT 5311 LONGWOOD AVENUE PARMA,OH 44134		PC	GIVING A VOICE TO ALL PROJECT SUPPORT	17,000
PERRY TOWNSHIP SCHOOLS 6548 ORINOCO AVENUE INDIANAPOLIS,IN 46217		PC	DEVELOPMENTAL PRESCHOOL PROGRAM SUPPORT	11,355
STOW MUNROE FALLS CITY SCHOOL DISTRICT 7232 CURRY CIRCLE HUDSON,OH 44236		PC	AMERICAN STUDIES PROGRAM SUPPORT	1,380
TALLMADGE MIDDLE SCHOOL 2241 CROCKETT CIRCLE STOW,OH 44224		PC	TEACHING ENHANCEMENTS SUPPORT	1,000
UNIVERSITY HOSPITALS HEALTH SYSTEMS INC 11100 EUCLID AVENUE CLEVELAND,OH 44106		PC	SCHOOL INTERVENTION SPECIALIST PROGRAM SUPPORT	5,000

TY 2015 Accounting Fees Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,900	0		2,900

TY 2015 Investments - Other Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BAIRD INTERMEDIATE BOND FUND	FMV	157,977	157,977
DODGE & COX INCOME FUND	FMV	149,217	149,217
EATON VANCE FLOATING RATE FUND	FMV	64,131	64,131
METROPOLITAN WEST UNCONSTRAINED BOND FUND	FMV	63,996	63,996
TEMPLETON GLOBAL BOND FUND	FMV	64,002	64,002
ISHARES MSCI EMERGING MARKETS	FMV	25,494	25,494
I SHARES S&P SMALL CAP	FMV	12,871	12,871
AMERICAN BEACON FUNDS INTL EQUITY FD	FMV	35,771	35,771
ARTISAN FDS INC INTERNATIONAL FUND	FMV	35,565	35,565
COLUMBIA ACORN INTL FUND	FMV	17,998	17,998
DODGE & COX INTERNATIONAL STOCK FUND	FMV	35,868	35,868
GOLDMAN SACHS M/C VALUE INST	FMV	45,012	45,012
HARDING LOEVNER INTERNATIONAL EQUITY PORTFOLIO	FMV	35,583	35,583
MFS VALUE FUND CLASS I	FMV	162,224	162,224
MAINSTAY EPOCH GLOBAL EQUITY YIELD FUND	FMV	63,506	63,506
T ROWE PRICE GROWTH STOCK	FMV	196,756	196,756
T ROWE PRICE VALUE FD	FMV	180,353	180,353
T ROWE PRICE REAL ESTATE FUND	FMV	35,751	35,751
TOUCHSTONE SANDS CAPITAL SELECT GROWTH FD	FMV	162,181	162,181
GOLDMAN SACHS GRTH OPPORTUNITY FD	FMV	45,057	45,057
DEUTSCHE X-TRACKERS MSCI EUR ETF	FMV	44,669	44,669
ASTON/LMCG SM CAP GROWTH	FMV	18,262	18,262
PAYDEN LOW DURATION BOND FUND	FMV	64,000	64,000

TY 2015 Other Assets Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
REFUNDABLE INCOME TAXES	100		

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TY 2015 Other Decreases Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Description	Amount
UNREALIZED LOSS ON INVESTMENTS	81,604

TY 2015 Other Expenses Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	992	0		992
COMPUTER PROGRAMMING	3,750	0		0
WEBSITE DEVELOPMENT FEES	3,000	0		3,000
WORKER'S COMPENSATION	100	0		100
DATA PROCESSING	648	0		648
GENERAL LIABILITY INSURANCE	967	0		3,868
GOLF OUTING FUNDRAISER EXPENSE	31,307	0		0

TY 2015 Other Income Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GOLF OUTING FUNDRAISER	31,307		31,307

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TY 2015 Other Professional Fees Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	11,657	11,657		0

TY 2015 Substantial Contributors Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Name	Address
JEFFERY D EVANS	1148 WOODSVIEW DRIVE AKRON,OH 44313
MOHAMED DARWISH AND DIANA STEWART	3673 SANCTUARY DRIVE AKRON,OH 44333
JAMES AND JULIE SHIVES	104 EAST MOHAWK DRIVE MALVERN, OH 44644
KATHLEEN AND DARRIN KOTECKI	7232 CURRY CIRLCE HUDSON,OH 44236
JOSEPH AND MARY JO CIUNI	23549 STANFORD ROAD SHAKEER HEIGHTS,OH 44122
WALID GEMAYEL	1305 COLLINS WAY WORTHINGTON, OH 43085
DAVID B AND SUSAN J GRANGER	2872 BYRON DRIVE NORTH CANTON, OH 44720
JOSEPH P AND VICKI L KIDDER	2146 FOREST OAK DRIVE AKRON,OH 44312
DIANA M AND DAVID J MARTIN	8640 CANDLEBERRY STREET NW MASSILON, OH 44646
PATRICK AND BECKY MCADAMS	2443 CREEKSIDE CHASE DRIVE MEDINA,OH 44256
TREVER G POWERS	708 COUNTRYWOOD DRIVE NOBLESVILLE,IN 46060
MARK AND JULIE SALOPEK	3638 WEST GALLOWAY DRIVE RICHFIELD,OH 44286
ANGELA D WELLS	3340 HEMPHILL ROAD NORTON,OH 44203
GPD SERVICES COMPANY INC	520 SOUTH MAIN STREET SUITE 2531 AKRON,OH 44311
GPD TELECOM INC	520 SOUTH MAIN STREET SUITE 2531 AKRON,OH 44311
GPD GROUP	520 SOUTH MAIN STREET SUITE 2531 AKRON,OH 44311

TY 2015 Taxes Schedule

Name: GPD GROUP EMPLOYEES FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OHIO CHARITABLE REGISTRATION	200	0		200
FEDERAL INCOME TAX	1,375	0		0

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As Filed Data

DLN: 93491228000106

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2015

Employer identification number

GPD GF	ROUP EMPLOYEES F	OUNDATION INC	
			46-3799183
Organia	zation type (check or	ne)	
Filers	of:	Section:	
Form 990 or 990-EZ		□ 501(c)() (enter number) organization	
			I
Form 99	00-PF	√ 501(c)(3) exempt private foundation	
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
		covered by the General Rule or a Special Rule. (), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule See instructions
Genera	al Rule		
দ		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a	
Special	Rules		
	under sections 509(a) received from any one	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% supplict) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Partile contributor, during the year, total contributions of the greater of (1) \$5,000 or Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that
	during the year, total o	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions of more than \$1,000 exclusively for religious, charitable, scientific, cruelty to children or animals. Complete Parts I, II, and III	-
·	during the year, contri this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received butions exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excludete any of the parts unless the General Rule applies to this organization becate, contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 If usively religious, charitable, etc, ause it received nonexclusively

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) For Paperwork Reduction Act Notice, see the Instructions

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 2 Name of organization **Employer identification number** GPD GROUP EMPLOYEES FOUNDATION INC 46-3799183 Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed Part I (d) (b) (c) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution See Additional Data Table Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contribution) (a) (b) (c) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II for noncash contribution) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (b) (c) (d) (a) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person Payroll Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash \$ (Complete Part II for noncash

ion	Employer identification number			
LOYEES FOUNDATION INC	46-3799183			
Part II Noncas h Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
/h)	(c)	(4)		
Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received		
(b)	(c) FMV (or estimate)	(d)		
Description of noncash property given	(see instructions) '	Date received		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
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(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
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	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given (b) Description of noncash property given	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) Description of noncash property given (g) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

e of organization			Page 4 Employer identification number
GROUP EMPLO	YEES FOUNDATION INC		46-3799183
total more line entry of \$1,000	e than \$1,000 for the year from any or	tions to organizations describ ne contributor. Complete colu ll, enter the total of <i>exclusivel</i> y mation once. See instructions	ped in section 501(c)(7), (8), or (10) that mns (a) through (e) and the following vreligious, charitable, etc., contributions
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
· -		(e) Transfer of gift	
:	Transferee's name, address, and		Relationship of transferor to transferee
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(a) Transfer of with	
-	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
-			

Software ID: Software Version:

EIN: 46-3799183

Name: GPD GROUP EMPLOYEES FOUNDATION INC

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOSEPH R AND MARY JO CIUNI 23549 STANDFORD ROAD SHAKER HEIGHTS, OH44122	\$ 20,000	Person
2	MOHAMED DARWISH AND DIANA STEWART 3673 SANCTUARY DRIVE AKRON, OH44333	\$ 57,000	Person P Payroll Noncash (Complete Part II for noncash contribution)
3	JEFFREY D EVANS 1148 WOODSVIEW DRIVE AKRON, OH44313	\$ 51,194	Person Payroll Noncash (Complete Part II for noncash contribution)
4	WALID GEMAYEL 1305 COLLINS WAY WORTHINGTON, OH43085	\$ 29,000	Person F Payroll Noncash (Complete Part II for noncash contribution)
5	DAVID AND SUSAN GRANGER 2872 BYRON DRIVE NORTH CANTON, OH44720	\$ 35,971	Person Payroll Noncash (Complete Part II for noncash contribution)
6	JOSEPH AND VICKI KIDDER 2146 FOREST OAK DRIVE AKRON, OH44312	\$ 31,290	Person Payroll Noncash (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	KATHLEEN AND DARRIN KOTECKI 7232 CURRY CIRCLE HUDSON, OH44236	\$ 48,726	Person Payroll Noncash
			(Complete Part II for noncash contribution)
8	PATRICK M MCADAMS		Person
	2443 CREEKSIDE CHASE DRIVE MEDINA, OH44256	\$ 31,065	Noncash
			(Complete Part II for noncash contribution) Person
9	TREVER G POWERS 708 COUNTRYWOOD DRIVE	\$ 37,865	Payroll Noncash
	NOBLESVILLE, IN 46060	- + 3.7,003	(Complete Part II for noncash contribution)
10	MARK AND JULIE SALOPEK		Person 🗸 🗸 Payroll 🗆
	3638 WEST GALLOWAY DRIVE RICHFIELD, OH44286	\$ 34,129	Noncash
			(Complete Part II for noncash contribution) Person
11	JAMES AND JULIE SHIVES 104 EAST MOHAWK DRIVE	\$ 48,129	Payroll Payroll
	MALVERN, OH44644		(Complete Part II for noncash contribution)
12	ANCELA DIWELLC		Person 🔽 🗸 Payroll
	ANGELA D WELLS 3340 HEMPHILL ROAD	\$ 37,129	Noncash
	NORTON, OH44203		(Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	GPD SERVICES COMPANYINC 520 SOUTH MAIN STREET SUITE 2531 AKRON, OH44311	\$ 125,000	Person F Payroll F Noncash
	ARRON, OTT 4-311		(Complete Part II for noncash contribution)
14	GPD TELECOM INC 520 SOUTH MAIN STREET SUITE 2531		Person 🔽 Payroll 🗆
	AKRON, OH44311	\$ 125,000	Noncash (Complete Part II for noncash contribution)
15	STEVEN MULLANEY 6967 CONSTITUTION PLACE	\$ 18,565	Person Payroll Noncash
	COLUMBUS, OH43235		(Complete Part II for noncash contribution)
16	M LINCOLN SCOTT 906 ELCLIFF DRIVE	\$ 11,065	Person 「ア ド Payroll 「 Noncash
	WESTERVILLE, OH43081		(Complete Part II for noncash contribution)
17	NSC INC COMMERCIAL INTERIORS 55 FURNANCE STREET	\$ 5,000	Person
	AKRON, OH44308		(Complete Part II for noncash contribution)
18	AGILITY SYSTEMS		Person ▽ □ Payroll □
	3867 W MARKET STREET 130 AKRON, OH44333	\$ 5,000	Noncash (Complete Part II for

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19			Person 🔽
	ADVANCED DRAINAGE SYSTEMS INC		Payroll
	4640 TRUEMAN BLVD PO BOX 3000	\$ 5,000	Noncash
	HILLIARD, OH43026		(Complete Part II for noncash contribution)
			Person <u></u> ✓
20	COMDOC		Payroll
	3458 MASSILLON RD	\$ 5,000	Noncash
	UNIONTOWN, OH44685		(Complete Part II for noncash contribution)
			Person
21	CANAL PLACE LTD		Payroll
	9960 W CHEYENNE AVENUE 212	\$ 5,000	Noncash
	LAS VEGAS, NV 89129		(Complete Part II for noncash contribution)
			Person <u></u> ✓
22	ALDA ADVISORS INC		Payroll
	2735 CRAWFIS BLVD SUITE 210	\$ 5,000	Noncash
	FAIRLAWN, OH44333		(Complete Part II for
			noncash contribution) Person
23			Payroll
	GPD GROUP 520 SOUTH MAIN STREET SUITE 2531	\$ 93,519	Noncash
	AKRON, OH44311		(Complete Part II for
			noncash contribution) Person
24			Payroll C
	UNITED WAY OF SUMMIT COUNTY 90 N PROSPECT STREET	\$ 9,330	Noncash
	AKRON, OH44304	4 3/333	Noncasn
	ARRON, OHTTOOT		(Complete Part II for noncash contribution)