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_{Fბт} 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

orm990pf. Open to Public Inspection

For	calen	dar year 2015 or tax year beginning	, 201	5, and 6	ending		, 20
Nar	ne of for	undation	-		A Employe	r identification numbe	r
Enr	ight Fa	mily Foundation				47-4831271	
Nur	nber and	d street (or P O box number if mail is not delivered to street address)	Room	/suite	B Telephon	e number (see instruction	ons)
230	4 E Sh	nurts Circle				217-898-3785	
City	or towr	n, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pendi	ng, check here 🕨 📝
Urb	ana, IL	61801					
G	Check	all that apply: 🗹 Initial return 🔲 Initial return	of a former public	charity	D 1. Foreigi	n organizations, check t	nere ▶ _
		☐ Final return ☐ Amended r			2. Foreigi	n organizations meeting	the 85% test,
		Address change Name char				here and attach compu	·
		type of organization Section 501(c)(3) exempt p				foundation status was t 07(b)(1)(A), check here	erminated under
		n 4947(a)(1) nonexempt charitable trust					_
		narket value of all assets at J Accounting method	· 🗹 Cash 📙 A	ccrual		ndation is in a 60-month	
		f year (from Part II, col. (c),			under se	ction 507(b)(1)(B), check	nere ►
	line 16	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	on cash basis)	Γ —			400 0 1
Pá	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and expenses per		investment	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	books	ır	come	ıncome	purposes (cash basis only)
	4		288062				
	1	Chack To differ the foundation is not required to attach Sch. B	200002			7	······································
	2	Check ► ☐ If the foundation is not required to attach Sch B	0				·
	3	Interest on savings and temporary cash investments Dividends and interest from securities	0	1			
	4	Gross rents	0	<u> </u>			
	5a b	Net rental income or (loss) 0 00					
an.	6a	Net gain or (loss) from sale of assets not on line 10	0	<u> </u>		**	· · · · · · · · · · · · · · · · · · ·
Revenue	b	Gross sales price for all assets on line 6a				, ; ; ; ;	(4 (3 ¹⁰)
<u>Ve</u>	7	Capital gain net income (from Part IV, line 2)			0		k
Re	8	Net short-term capital gain			•	0	
	9	Income modifications				0	
	10a	Gross sales less returns and allowances 0					
	b	Less Cost of goods sold 0	*				
	С	Gross profit or (loss) (attach schedule)	0			0	
	11	Other income (attach schedule)	0		0	0	
	12	Total. Add lines 1 through 11	288062		0	0	
S	13	Compensation of officers, directors, trustees, etc.	0	 			
se	14	Other employee salaries and wages .	0				
Expenses	15	Pension plans, employee benefits	0	ļ	.		
X	16a	Legal fees (attach schedule)	1880	 -			
Je l	b	Accounting fees (attach schedule) Other professional fees (attach schedule)		 			
	c	Other professional fees (attach schedule)	,	ļ			
šť	17	Taxes (attach schedule) (see instructions)	0 1 1 0	 			
Ξ̈́	18 19	Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	100				
Ĕ	20	Occupancy		1			
ĕ	21	Travel, conferences, and meetings	0				
P	22	Printing and publications	0				
g G	23	Other expenses (attach schedule)	35				
ij	24	Total operating and administrative expenses.					
Fa		Add lines 13 through 23	1915			<u> </u>	
Operating and Administrati	25	Contributions, gifts, grants paid	C	1			
_	26	Total expenses and disbursements. Add lines 24 and 25	1915	<u> </u>			
	27	Subtract line 26 from line 12:]				
	а	Excess of revenue over expenses and disbursements	286147	<u> </u>			
	ь	Net investment income (if negative, enter -0-)					
_	С	Adjusted net income (if negative, enter -0-) .		L		286147	L



,

<u> </u>		Attached schedules and amounts in the description column	Beginning of year	End o	f year
Pa	rt II	Balance Sheets should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	0	286147	286147
	2	Savings and temporary cash investments	0	0	0
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶	0	0	0
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	o	0	0
	7	Other notes and loans receivable (attach schedule) ▶	_	_	_
		Less allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
As	10a	Investments—U S. and state government obligations (attach schedule)	0	0	0
	ь	Investments—corporate stock (attach schedule)	0	0	0
	С	Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment basis ▶			Salman a
		Less accumulated depreciation (attach schedule) ▶	0	0	0
	12	Investments—mortgage loans	0	0	0
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment, basis ▶		*	as hardwares a los preses set to secono
		Less accumulated depreciation (attach schedule) ▶	0	0	0
	15	Other assets (describe ►	0	0	0
	16	Total assets (to be completed by all filers-see the			
		ınstructions. Also, see page 1, item I)	0	286147	286147
	17	Accounts payable and accrued expenses			. %
(0	18	Grants payable	0	0	,
Ë	19	Deferred revenue	0	0	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	* 20 /
<u>a</u>	21	Mortgages and other notes payable (attach schedule)	0	0	
_	22	Other liabilities (describe ►)	0	0	
	23	Total liabilities (add lines 17 through 22)	0	0	{
(0		Foundations that follow SFAS 117, check here ▶ ☑			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
ä	24	Unrestricted	0	268147	
æ	25	Temporarily restricted			in
þ	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ □			
Ľ		and complete lines 27 through 31.			
Net Assets or Fun	27	Capital stock, trust principal, or current funds			ļ
ė,	28	Paid-in or capital surplus, or land, bldg, and equipment fund	-		
SS	29	Retained earnings, accumulated income, endowment, or other funds		20/147	
ţ	30	Total net assets or fund balances (see instructions)	0	286147	
ž	31	Total liabilities and net assets/fund balances (see		204147	ļ
		instructions)	0	286147	<u> </u>
Pa	art III	Analysis of Changes in Net Assets or Fund Balances at net assets or fund balances at beginning of year—Part II, colu		st agree with	
7	1 1068 And	of-year figure reported on prior year's return)	inini (a), inie oo (iiia:	· · · · 1	0
_				2	286147
		er amount from Part I, line 27a		3	0
		er increases not included in line 2 (itemize) I lines 1, 2, and 3		4	286147
				5	200147
	Dec	reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—	Part II. column (b) 1		286147
_	, (()	arrier assers or rund balances at end of year (line 4 minds line o)	11, 00101111 (0), 1		Form 990-PE (2015)

Part	V Capital Gains a	nd Losses for Tax on Investm	ent Income	(b) University		
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo., day, yr)	
<u>1a</u>	none					
<u> </u>						
<u>c</u>	<u> </u>					
<u>d</u> _						
<u> </u>	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g)
a						
<u> </u>						
<u>с</u> d		-				
e			.= .			
	Complete only for assets s	howing gain in column (h) and owned l	by the foundation	on 12/31/69	(I) Gains (Co	! (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but no	t less than -0-) or from col (h))
а						
b						
<u>C</u>						
<u>d</u>				<u>-</u>		
e		(If gain	also enter in Pa	rt Lline 7)		
2	Capital gain net income	or (net capital loss) { If (loss),	enter -0- in Pa	rt I, line 7	2	
3	If gain, also enter in Pa	gain or (loss) as defined in sections art I, line 8, column (c) (see instruc	ctions). If (loss)			
Part		nder Section 4940(e) for Redu		let Investment	lncome	
Was t	s," the foundation does n	ne section 4942 tax on the distribu ot qualify under section 4940(e) D	o not complete	this part.		☐ Yes ☐ No
1	Enter the appropriate a	mount in each column for each yea	ar; see the instri	uctions before m	aking any entries.	
Cal	(a) Base period years endar year (or tax year beginning	(b) Adjusted qualifying distributions	s Net value o	(c) f noncharitable-use a		(d) tribution ratio divided by col (c))
	2014					
	2013					
	2012					
	2011					
	2010					
2	Total of line 1, column	(d)			2	
3		io for the 5-year base period—divi	de the total on	line 2 by 5, or by		
		undation has been in existence if le			. 3	
			5	-		
4	Enter the net value of n	oncharitable-use assets for 2015 f	rom Part X, line	5	4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investr	nent income (1% of Part I, line 27b)		. 6	
7	Add lines 5 and 6 .				. 7	
8	Enter qualifying distribu	itions from Part XII, line 4 reater than line 7, check the box ii		,	that part using a	10/ tay rata Cas th
	Part VI instructions.	reater than line 1, check the box ii	irait vi, iiile li	o, and complete	and part using a	. , , tun 1410. OCC 11

Dago	4
Page	

Part \		nstru	ictio	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.)					
	Date of ruling or determination letter. (attach copy of letter if necessary – see instructions)					
Ь						
_	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
3	Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u> </u>		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			<u> </u>		
6	Credits/Payments:					
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a			1		
b	Exempt foreign organizations—tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) . 6c					
_d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d					
8 9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be Credited to 2016 estimated tax Refunded 11			 		
	VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No		
	participate or intervene in any political campaign?	1a		~		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		,		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?	1c		~		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			36		
	(1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		~		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
_	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		-		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		~		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		~		
	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 	İ				
	conflict with the state law remain in the governing instrument?	6	"	-		
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)	Ė	<u> </u>			
Ju	Illinois		1			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	~			
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		-		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	İ				
	names and addresses	10		<u> </u>		

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		~
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		~
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	i
_	Website address ► N/A			·
14		7-898-	3785	
	Located at ► 2304 E Shurts Circle, Urbana, IL ZIP+4 ►	6180	1	
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 \Delta 15	•	•	▶ ☑
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		~
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
5. 4		L		L
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	V	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	Yes	No
1a	During the year did the foundation (either directly or indirectly). (1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes No			
	(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? . Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes 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)			
b	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		
^	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
С	were not corrected before the first day of the tax year beginning in 2015?	1c	,	~
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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			İ
	all years listed, answer "No" and attach statement—see instructions.)	2b		-
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		
Ŭ	► 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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			ļ
_	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		-
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	-	1

Part	VII-B	Statements Regarding Activities	s for W	hich Form	4720	May Be R	equire	d (contii	nued)			
5a		he year did the foundation pay or incur a						_	_			
	(1) Carr	y on propaganda, or otherwise attempt t	o influe	nce legislatio	n (sect	ion 4945(e))?	☐ Yes	✓ No			
		ence the outcome of any specific public		on (see secti	on 495	5); or to ca	rry on,	_	_	1		
		ctly or indirectly, any voter registration dr			•		•	∐ Yes	<u>⊬</u> No	,		
		ride a grant to an individual for travel, stu						Yes	✓ No	* *,,	* *	
		ride a grant to an organization other than						_		*	\$, `	
		ion 4945(d)(4)(A)? (see instructions) .						∐ Yes	✓ No	1	, · · ,	
	(5) Prov	ride for any purpose other than religious	, charita	able, scientifi	c, litera		ational	_		, .	×	
		poses, or for the prevention of cruelty to						Yes	No 🖳			
d	If any a	nswer is "Yes" to 5a(1)-(5), did any of the ons section 53.4945 or in a current notice	e transa rogardu	ctions fall to	quality	unger the (exceptions)	ons desci	ribea in	-		
	-						action is,	• • •		5b		
_		ations relying on a current notice regardinswer is "Yes" to question 5a(4), does t					 the tay	• •				
С		e it maintained expenditure responsibility						□Yes	□No			
		attach the statement required by Regula					•	1es				
6a		foundation, during the year, receive any					emiums					
Va		rsonal benefit contract?						Yes	✓ No			
b		foundation, during the year, pay premiun	ns dire	ctly or indired	etly, on	a personal	benefit	_		6b		~~~
		to 6b, file Form 8870.	,	•	,,	- p				,	ŧ.,	
7a		me during the tax year, was the foundation	a party t	to a prohibited	tax she	elter transac	tion?	☐ Yes	☑ No			
b	If "Yes,	' did the foundation receive any proceed	s or hav	e any net inc	come at	tributable t	o the tr	ansactio	n?.	7b		
Part	VIII	Information About Officers, Direct	tors, T	rustees, F	ounda	tion Mana	igers,	Highly I	Paid E	mploy	ees,	
		and Contractors										
1	List all	officers, directors, trustees, foundatio										
		(a) Name and address	` hou	e, and average rs per week	(If r	mpensation ot paid,	emplo	Contribution yee benefit	plans	(e) Expe	ense ace allowar	
			 	ed to position	en	ter -0-)	and defe	erred comp	ensation			
	e N Enrig		Preside	ent, 0 5 hr		o			0			0
		Circle, Urbana, IL 61801	Directo	r O br	 						-	
	th N Enr	-	Directo	n, 0 m		0		•	0			0
	L Enrigi	Circle, Urbana, IL 61801	Secreta	ary/Treasurer				-				
	•	., Thomasboro, IL 61878	0 hr	ar yr rreasurer	ŀ	0			0			0
	er E Enri		Directo	or, 0 hr								
		I Lane, Champaign, IL 61822				0			0			0
2	Compe	nsation of five highest-paid employe	es (oth	er than tho	se incl	uded on li	ne 1—	see instr	ruction	s). If n	one,	enter
	"NONE	"· •										
				(b) Title, and a	average			(d) Contrib employee		(e) Expe	nea ac	count
	(a) Name a	nd address of each employee paid more than \$50,00	00	hours per v		(c) Comper	nsation	plans and	deferred		allowar	
								compen	ISARON			
none												
						<u> </u>		·				
									·			
Total	number	of other employees paid over \$50,000 .						· -	. ▶		0	
					· <u></u>					Form 99	M-PF	(2015)

3 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) Comper none Total number of others receiving over \$50,000 for professional services List the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 none 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions)	Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compendance Total number of others receiving over \$50,000 for professional services Total number of others receiving over \$50,000 for professional services Lest the foundation's four largest direct charitable activities Lest the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 none 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount none. All other program-related investments. See instructions	3 Five		ŧΕ."
Total number of others receiving over \$50,000 for professional services .			(c) Compensation
List the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 none 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amoutable Activities All other program-related investments See instructions	none		
List the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 none 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amoutable Activities All other program-related investments See instructions			
List the foundation's four largest 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 none 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount of the program-related investments See instructions			
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Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments sade by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions			
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List the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 none 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amou 1 none 2 All other program-related investments See instructions		_	1
and other beneficiaries served, conferences convened, research papers produced, etc 1 none 2	Part IX-A	Summary of Direct Charitable Activities	
2 3 4 Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amou 1 none 2 All other program-related investments See instructions			Expenses
Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amou 1 none 2 All other program-related investments See instructions	1 none		
Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amou 1 none 2 All other program-related investments See instructions			
Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amou 1 none 2 All other program-related investments See instructions			
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amou 1 none 2 All other program-related investments See instructions	2		
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amou 1 none 2 All other program-related investments See instructions			
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Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 none All other program-related investments See instructions	3		
Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 none All other program-related investments See instructions			
Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 none All other program-related investments See instructions	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 none 2 All other program-related investments See instructions	7		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 none 2 All other program-related investments See instructions			
1 none 2 All other program-related investments See instructions	Part IX-B	Summary of Program-Related Investments (see instructions)	
2 All other program-related investments See instructions	Describe th	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
All other program-related investments. See instructions	1 none		
All other program-related investments. See instructions			
All other program-related investments. See instructions			-
· ·	2		
· ·			
· ·	All other pr	ogram-related investments. See instructions	-
·	•	Saran talata masamana ada mananana	
	J		
Total. Add lines 1 through 3	Total. Add	ines 1 through 3	<u> </u>

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	gn found	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	112083
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	112083
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	112083
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1681
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	110402
6	Minimum investment return. Enter 5% of line 5	6	2314
Part		oundatio	ons
1	Mınımum investment return from Part X, line 6	1	2314
2a	Tax on investment income for 2015 from Part VI, line 5		<u> </u>
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b	1	
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2314
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	2314
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	2314
	XII Qualifying Distributions (see instructions)	T	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		1515
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1915
ь	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1915
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_6	1915
_	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	g whethe	er the foundation

Part	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	line 7			-	2314
2	Undistributed income, if any, as of the end of 2015				2314
a	Enter amount for 2014 only			o	
b	Total for prior years 20,20,20		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
c	From 2012				
d	From 2013				
e	From 2014				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 1915				
а	Applied to 2014, but not more than line 2a.			o	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)		o		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	0			
d	Applied to 2015 distributable amount				1915
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2015	0			0
	(If an amount appears in column (d), the same		~		
	amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:		:	*	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed		o		
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions		0		
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f	Undistributed income for 2015. Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2016				399
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	0			······
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2016.	1			
	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
а	Excess from 2011	-			
b	Excess from 2012	4			
c	Excess from 2013 .	4			
d	Excess from 2014	-			
е	Excess from 2015	1	1	l	·

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Pana	7	ı

Part	XIV Private Operating Founda	tions (see ınstru	ctions and Part	VII-A, question 9)					
1a	If the foundation has received a ruling or determination letter that it is a private operating								
foundation, and the ruling is effective for 2015, enter the date of the ruling									
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se	ction 🗌 4942(j)	(3) or 4942(j)(5)			
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total			
	income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(0) 102			
	each year listed								
b	85% of line 2a								
C	Qualifying distributions from Part XII,								
	line 4 for each year listed								
d	Amounts included in line 2c not used directly for active conduct of exempt activities .		i						
	Qualifying distributions made directly								
е	for active conduct of exempt activities.								
	Subtract line 2d from line 2c								
3	Complete 3a, b, or c for the				.,,,				
	alternative test relied upon								
а	"Assets" alternative test - enter								
	(1) Value of all assets								
	(2) Value of assets qualifying under								
	section 4942(j)(3)(B)(i)			_					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in								
	Part X, line 6 for each year listed .								
C	"Support" alternative test-enter								
	(1) Total support other than gross								
	investment income (interest, dividends, rents, payments on								
	securities loans (section								
	512(a)(5)), or royalties)				****	_			
	(2) Support from general public and 5 or more exempt								
	organizations as provided in section 4942(j)(3)(B)(III)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	(3) Largest amount of support from an exempt organization								
						 			
Part	(4) Gross investment income XV Supplementary Information	n (Complete th	is part only if the	ne foundation ha	ad \$5.000 or m	ore in assets at			
ı aı ı	any time during the year-				,.,				
1	Information Regarding Foundation		,	· ·					
a	List any managers of the foundation		ited more than 2%	6 of the total contr	ibutions received	by the foundation			
	pefore the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2).)								
	none								
b	List any managers of the foundation					arge portion of the			
	ownership of a partnership or other e	ntity) of which the	foundation has a	10% or greater inte	erest.				
	none								
2	Information Regarding Contribution								
	Check here ▶ ✓ If the foundation unsolicited requests for funds. If the t								
	other conditions, complete items 2a,		girts, grants, etc.	(see instructions) t	o individuais or c	nganizations under			
а	The name, address, and telephone no		dress of the ners	on to whom applica	ations should be	addressed.			
a	The name, address, and telephone no	amber or e man ac	dicoo oi tiio perot	on to whom applied					
b	The form in which applications should	d be submitted and	d information and	materials they sho	uld include.				
	• •			-					
С	Any submission deadlines:								
		warda ayah as b	v goographical a	roon obarriable for	lde kinde of in	etitutione or other			
d	Any restrictions or limitations on av	wards, such as D	y geographical al	reas, charitable 116	aus, Kilius Ol III	sututions, or other			
	idolora								

3 Grants and Contributions Paid During		ed for Fut	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
none				
Total			▶ 3a	(
b Approved for future payment				
United Methodist ChurchKafakumba 1 Jacope Rd Fisenge Farm, Luanshya Turn Off, Zambia		NC	Assistance for retired pastors	23840
United Methodist ChurchKafakumba 1 Jacope Rd Fisenge Farm, Luanshya Turn Off, Zambia		NC	Assistance for school expenses	10500
			<u> </u>	L

Pa	t XVI-A Analysis of Income-Producing Ac	tivities				
Ente	r gross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Program service revenue:					
	a none					
	b					
	c		-	- "		
	d					
	е					
	f		_		·	
	g Fees and contracts from government agencies				·	
2	Membership dues and assessments				,,	
	Interest on savings and temporary cash investments					
	Dividends and interest from securities					
						*
Э	Net rental income or (loss) from real estate			· · · · · · · · · · · · · · · · · · ·		
	a Debt-financed property					
_	b Not debt-financed property			 		
6	Net rental income or (loss) from personal property					
7	Other investment income				<u></u> ,	
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue. a					
	b		_			
	С					
	d					
	e			ll		
12	e				-	
	e Subtotal. Add columns (b), (d), and (e)				13	
13	Subtotal. Add columns (b), (d), and (e)				13	
13 Sec	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	s)		t Purposes	13	
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations TXVI-B Relationship of Activities to the A	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			nportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			nportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			nportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			nportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			nportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			nportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the stions)
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the stions)
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the stions)
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the stions)
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the stions)
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the stions)
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the stions)
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the
13 See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation: XVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s) ccomplishm	ent of Exemp			mportantly to the

Part	XVII		n Regarding Trar ganizations	nsfers To and Tr	ransaction	s and F	Relationshi	ps With N	Noncharital		90.0
1	ın sed organ	ne organization of tion 501(c) of th nizations?	directly or indirectly ne Code (other than	section 501(c)(3) o	rganizations) or in se	ection 527, re			Yes	No
а	Trans	fers from the rep	porting foundation to	o a noncharitable e	exempt orga	nızatıon	of:				
	(1) C	ash							. 1a(1	_	~
	(2) O	ther assets .							. 1a(2	2)	1
b	Other	r transactions									
	(1) S	ales of assets to	a noncharitable exe	empt organization					. 1b(1)	V_
	(2) P	urchases of asse	ets from a noncharit	able exempt organ	ization				1b(2	2)	~
	(3) R	ental of facilities,	, equipment, or othe	er assets					1b(3	3)	~
	(4) Reimbursement arrangements							1b(4		~	
		oans or loan gua	-						1b(5	_	~
		_	ervices or membersh	nip or fundraising s	solicitations				. 1b(6	_	1
С			quipment, mailing li			ovees	_	_	1c	+	~
		-	of the above is "Ye			-	Column (b) s	hould alwa			narket
(a) Line	value		ther assets, or servi on or sharing arrang (c) Name of nonc		lumn (d) the	value o	f the goods,	other asse		s rece	ived
		-									
	-										
											
			-								
									 		
								- "			
		7,									
		•									
		<u> </u>				_					
						-					
2a			 ectly or indirectly af 501(c) of the Code (d							es 🗸	 No
b	If "Ye	s," complete the	e following schedule								
		(a) Name of organ	nization	(b) Type of	organization			(c) Description	n of relationship		
				<u></u>							
			declare that I have examin						my knowledge an	d belief, i	t is true,
Sign	corre	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge						May the IRS dis	ruce thic	retum	
Here				06/30/16 President			with the pre		with the prepare	r shown	below
		ature of officer or trus	stee Derise Enn.		Title				(see instructions)	⁷ ∐Yes	□No
		Print/Type preparer	Jense - "	Preparer's signature			Date	<u>'</u>	PTIN		
Paid		, , po proparor				-		Chect	< ∐if · ···· mployed		
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		Firm's address ▶ Phone no									

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No. 1545-0047

Employer identification number Name of the organization 47-4831271 **Enright Family Foundation** Organization type (check one). Filers of: Section:) (enter number) organization Form 990 or 990-EZ 501(c)(4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

47-4831271 **Enright Family Foundation** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 Person **Altamont Company Payroll** \$ 201000 Noncash 901 N Church St (Complete Part II for noncash contributions.) Thomasboro, IL 61878 (d) (c) (a) (b) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. ~ Person 2 **Enright Flight Ministries Payroll** \$ 87062 Noncash 1919 Jackson Lane (Complete Part II for noncash contributions.) Port Orange, FL 32128-6631 (c) (d) (b) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (b) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions.) (d) (b) (c) (a) Name, address, and ZIP + 4 Type of contribution **Total contributions** No. Person **Payroll** Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (b) (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. Person **Payroll** Noncash \$ (Complete Part II for noncash contributions.)

Name of organization Enright Family Foundation 47-4831271

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (see instructions) none \$ (a) No. (c) (b) (d) FMV (or estimate) from **Date received** Description of noncash property given Part I (see instructions) \$ (a) No. (c) (b) (d) FMV (or estimate) from **Date received** Description of noncash property given (see instructions) Part I \$ (a) No. (c) (d) (b) FMV (or estimate) from **Date received** Description of noncash property given Part I (see instructions) \$ (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given **Date received** Part I (see instructions) \$

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

	organization			Employer identification number 47-4831271			
Part III	amily Foundation Exclusively religious, charitable	ata contributions to o	raanizatione describer				
rartiii	(10) that total more than \$1,000 the following line entry. For organ contributions of \$1,000 or less for Use duplicate copies of Part III if it	for the year from any on izations completing Part II r the year. (Enter this infor	e contributor. Comple I, enter the total of excl mation once. See instru	te columns (a) through (e) and usively religious, charitable, etc.,			
(a) No.	(b) Purpose of gift	(c) Use of g		Description of how gift is held			
from Part I	(b) Fulpose of gift	(0) 036 01 ((4)				
1	religious and educational	pastors and school expe	enses cash				
		(e) Transfer	of gift				
	Transferee's name, address	s, and ZIP + 4	Relationship of	transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of (gift (d) C	Description of how gift is held			
2	religious and educational	pastors and school expe	enses cash				
-	(e) Transfer of gift						
	Transferee's name, address	Relationship of	Relationship of transferor to transferee				
į	,						
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift (d) [Description of how gift is held			
ŀ	(e) Transfer of gift						
	Transferee's name, address	s, and ZIP + 4	Relationship of	transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift (d) I	Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, addres	Relationship of	transferor to transferee				
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