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

2015

Department of the Treasury
Internal Revenue Service

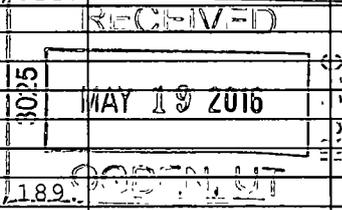
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Open to Public Inspection

For calendar year 2015, or tax year beginning , 2015, and ending

Name of foundation BROADBENT FAMILY FOUNDATION, INC.		A Employer identification number 81-0161642
Number and street (or P O box number if mail is not delivered to street address) Room/suite P O BOX 1019		B Telephone number (see instructions) (248) 666-9300
City or town, state or province, country, and ZIP or foreign postal code LIVINGSTON, MT 59047		C If exemption application is pending, check here. ▶ <input type="checkbox"/>
G Check all that apply		D 1 Foreign organizations, check here ▶ <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	2 Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>
H Check type of organization. <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation		
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, column (c), line 16) ▶ \$ 3,015,064.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>				
REVENUE				
1 Contributions, gifts, grants, etc. received (attach schedule)	66,670.			
2 Ck ▶ <input type="checkbox"/> If the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	14.	14.		
4 Dividends and interest from securities	29,271.	29,271.		
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	114,727.	L-6a Stmt		
b Gross sales price for all assets on line 6a	277,919.			
7 Capital gain net income (from Part IV, line 2)		114,727.		
8 Net short-term capital gain			0.	
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
ORDINARY INC INVESTMENTS	-2.			
12 Total Add lines 1 through 11.	210,680.	144,012.	0.	
ADMINISTRATIVE EXPENSES				
13 Compensation of officers, directors, trustees, etc.				
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach sch)	600.			
c Other prof fees (attach sch)				
17 Interest	109,189.	109,189.		
18 Taxes (attach schedule)(see instrs) See Line 18 Stmt	4,086.	86.		
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) See Line 23 Stmt	36,481.			
24 Total operating and administrative expenses. Add lines 13 through 23	150,356.	109,275.		
25 Contributions, gifts, grants paid	155,000.			155,000.
26 Total expenses and disbursements Add lines 24 and 25	305,356.	109,275.		155,000.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-94,676.			
b Net investment income (if negative, enter -0-)		34,737.		
c Adjusted net income (if negative, enter -0-)			0.	



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
ASSETS	1	Cash — non-interest-bearing	1,868.	133.	133.
	2	Savings and temporary cash investments	1,391.	4,983.	4,983.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		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 sch) ▶			
		Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments — U.S. and state government obligations (attach schedule)			
	b	Investments — corporate stock (attach schedule)			
	c	Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶				
12	Investments — mortgage loans				
13	Investments — other (attach schedule) L-13 Stmt	2,540,421.	2,443,888.	3,009,948.	
14	Land, buildings, and equipment basis ▶				
	Less: accumulated depreciation (attach schedule) ▶				
15	Other assets (describe ▶)				
16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I).	2,543,680.	2,449,004.	3,015,064.	
LIABILITIES	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)			
FUNDED ASSETS	Foundations that follow SFAS 117, check here ▶				
	and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ X				
	and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
28	Paid-in or capital surplus, or land, bldg, and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds	2,543,680.	2,449,004.		
30	Total net assets or fund balances (see instructions)	2,543,680.	2,449,004.		
31	Total liabilities and net assets/fund balances (see instructions)	2,543,680.	2,449,004.		

Part 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 agree with end-of-year figure reported on prior year's return)	1	2,543,680.
2	Enter amount from Part I, line 27a	2	-94,676.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	2,449,004.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	2,449,004.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a 1000 SH WALGREEN STOCK	D	09/24/12	07/07/15
b FOUNDATION PARTNERS LP ID#94-3124318 LT GAIN	P	01/01/98	12/31/15
c FOUNDATION PARTNERS LP ID#94-3124318 ST LOSS	P	01/01/15	12/31/15
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 85,503.		35,670.	49,833.
b 192,416.		0.	192,416.
c 0.		127,522.	-127,522.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any	
a			49,833.
b			192,416.
c			-127,522.
d			
e			

2 Capital gain net income or (net capital loss)	[If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7]	2	114,727.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	[]	3	-127,522.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If 'Yes,' the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
	2014	130,500.	3,151,497.	0.041409
	2013	144,000.	2,995,018.	0.048080
	2012	145,000.	2,912,316.	0.049789
	2011	135,000.	2,678,720.	0.050397
	2010	124,000.	2,494,388.	0.049712

2 Total of line 1, column (d)	2	0.239387
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.047877
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	3,061,078.
5 Multiply line 4 by line 3	5	146,555.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	347.
7 Add lines 5 and 6	7	146,902.
8 Enter qualifying distributions from Part XII, line 4	8	155,000.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 — see instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1			
Date of ruling or determination letter _____ (attach copy of letter if necessary — see instrs)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	347.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	347.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	347.
6 Credits/Payments:			
a 2015 estimated tax prmts and 2014 overpayment credited to 2015	6 a		5,113.
b Exempt foreign organizations — tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments Add lines 6a through 6d		7	5,113.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	4,766.
11 Enter the amount of line 10 to be Credited to 2016 estimated tax 4,766. Refunded		11	

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		X
<i>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</i>		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		X
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? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
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 conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, col (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) MT - Montana		
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? <i>If 'No,' attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5 a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(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? Yes No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No
- (4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions) Yes No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6 b

If 'Yes' to 6b, file Form 8870.

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes No

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?

7 b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
WILLIAM S BROADBENT 75 PECKSLAND RD GREENWICH CT 06831	PRESIDENT&DIR 0.50	0.	0.	0.
WILLIAM S BROADBENT, JR 241 5TH AVE 7C NEW YORK NY 10016	VP&DIR 0.10	0.	0.	0.
CAMILLE W BROADBENT 75 PECKSLAND RD GREENWICH CT 06831	TREASURER&DIR 0.10	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 None

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
a	Average monthly fair market value of securities	1 a	3,085,873.
b	Average of monthly cash balances	1 b	21,820.
c	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1 d	3,107,693.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,107,693.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	46,615.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,061,078.
6	Minimum investment return. Enter 5% of line 5	6	153,054.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	153,054.
2 a	Tax on investment income for 2015 from Part VI, line 5	2 a	347.
b	Income tax for 2015 (This does not include the tax from Part VI)	2 b	
c	Add lines 2a and 2b	2 c	347.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	152,707.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	152,707.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	152,707.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes		
a	Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	155,000.
b	Program-related investments — total from Part IX-B.	1 b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	155,000.
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	347.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	154,653.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				152,707.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years 20 __, 20 __, 20 __				
3 Excess distributions carryover, if any, to 2015				
a From 2010	0.			
b From 2011	4,600.			
c From 2012	4,121.			
d From 2013	0.			
e From 2014	0.			
f Total of lines 3a through e	8,721.			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 155,000.				
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				152,706.
e Remaining amount distributed out of corpus	2,294.			
5 Excess distributions carryover applied to 2015 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	11,015.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount – see instructions		0.		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount – see instructions			0.	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				1.
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)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	11,015.			
10 Analysis of line 9				
a Excess from 2011	4,600.			
b Excess from 2012	4,121.			
c Excess from 2013	0.			
d Excess from 2014	0.			
e Excess from 2015	2,294.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a 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 foundation is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
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					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a '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					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)

- 1 Information Regarding Foundation Managers:**
- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before 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 who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
- NONE
-
- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:**
- Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d
- a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
- N/A
-
- b** The form in which applications should be submitted and information and materials they should include.
- N/A
-
- c** Any submission deadlines.
- N/A
-
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
- N/A

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
HARVARD UNIVERSITY VARSITY CLUB 65 NORTH HARVARD ST BOSTON MA 02163		501C3	EDUCATION SPORTS-VARSITY CLUB	90,000.
BROWN UNIVERSITY BOX 1098 PROVIDENCE RI 02912		501C3	EDUC SPORTS FDN ATHLETIC DIRECTORS EXCELLENCE ANNUAL FD	2,000.
CLEVELAND FOUNDATION 1422 EUCLID AVE STE 1300 CLEVELAND OH 44115		501C3	SALVATION ENDOWMENT FUND	1,000.
MONTANA LAND RELIANCE 324 FULLER AVE HELENA MT 59624		501C3	LAND & RESOURCE CONSERVATION AND MANAGEMENT	7,000.
GREENWICH LIBRARY 4 NEW ST GREENWICH OH 44837		501C3	EDUCATIONAL RESOURCE AND ENRICHMENT	500.
MCKEE GARDENS 350 US HIGHWAY 1 VERO BEACH FL 32962		501C3	PUBLIC GARDEN MAINTENACE AND EDUCATION	5,000.
ST PAUL'S CATHEDRAL IN AMERICA P.O. BOX 132 MASSEY MD 21650		501C3	2015 ANNUAL FUND	1,000.
VERO BEACH MUSEUM OF ART 3001 RIVERSIDE PARK DRIVE VERO BEACH FL 32963		501C3	MUSEUM ART EDUCATION AND ENRICHMENT	20,000.
MUSEUM OF THE BIG BEND 400 N. HARRISON ST C-101 ALPINE TX 79832		501C3	CULTURAL HISTORIC MUSEUM	1,000.
See Line 3a statement				27,500.
Total ▶ 3a				155,000.
b Approved for future payment				
Total ▶ 3b				

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization

Employer identification number

BROADBENT FAMILY FOUNDATION, INC.

81-0161642

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

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

Name of organization BROADBENT FAMILY FOUNDATION, INC.	Employer identification number 81-0161642
--	---

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM S BROADBENT ----- 75 PECKSLAND ROAD ----- GREENWICH CT 06831	\$ 35,670.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
2	ROBERT BROADBENT ----- TOWER CITY CENTER 2900 TERMINAL TOWER ----- CLEVELAND OH 44113	\$ 31,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
---	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
---	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
---	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
---	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization BROADBENT FAMILY FOUNDATION, INC.	Employer identification number 81-0161642
---	--

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1000 SHARES WALGREENS (WBA) ----- ----- -----	\$ 85,290.	07/06/15
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----

Name: BROADBENT FAMILY FOUNDATION, INC. Employer Identification Number: 81-0161642

Asset Information:

Description of Property: 1000 WALGREENS
Date Acquired: 09/24/12 How Acquired: Donated
Date Sold: 07/07/15 Name of Buyer: BARCLAYS
Sales Price: 85,503. Cost or other basis (do not reduce by depreciation): 35,670.
Sales Expense: Valuation Method:
Total Gain (Loss): 49,833. Accumulation Depreciation:

Description of Property: FOUNDATION PARTNERS, LP ID#94-3124318 LT GAIN
Date Acquired: 01/01/98 How Acquired: Purchased
Date Sold: 12/31/15 Name of Buyer: FOUNDATION PARTNERS
Sales Price: 192,416. Cost or other basis (do not reduce by depreciation): 0.
Sales Expense: Valuation Method:
Total Gain (Loss): 192,416. Accumulation Depreciation:

Description of Property: FOUNDATION PARTNERS, LP ID#94-3124318 ST LOSS
Date Acquired: 01/01/15 How Acquired: Purchased
Date Sold: 12/31/15 Name of Buyer: FOUNDATION PARTNERS
Sales Price: 0. Cost or other basis (do not reduce by depreciation): 127,522.
Sales Expense: Valuation Method:
Total Gain (Loss): -127,522. Accumulation Depreciation:

Description of Property:
Date Acquired: How Acquired:
Date Sold: Name of Buyer:
Sales Price: Cost or other basis (do not reduce by depreciation):
Sales Expense: Valuation Method:
Total Gain (Loss): Accumulation Depreciation:

Description of Property:
Date Acquired: How Acquired:
Date Sold: Name of Buyer:
Sales Price: Cost or other basis (do not reduce by depreciation):
Sales Expense: Valuation Method:
Total Gain (Loss): Accumulation Depreciation:

Description of Property:
Date Acquired: How Acquired:
Date Sold: Name of Buyer:
Sales Price: Cost or other basis (do not reduce by depreciation):
Sales Expense: Valuation Method:
Total Gain (Loss): Accumulation Depreciation:

Description of Property:
Date Acquired: How Acquired:
Date Sold: Name of Buyer:
Sales Price: Cost or other basis (do not reduce by depreciation):
Sales Expense: Valuation Method:
Total Gain (Loss): Accumulation Depreciation:

Description of Property:
Date Acquired: How Acquired:
Date Sold: Name of Buyer:
Sales Price: Cost or other basis (do not reduce by depreciation):
Sales Expense: Valuation Method:
Total Gain (Loss): Accumulation Depreciation:

Form 990-PF, Page 1, Part I, Line 18
Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
2015 FED EXCISE TAX	4,000.			
FOREIGN TAX	86.	86.		
Total	<u>4,086.</u>	<u>86.</u>		

Form 990-PF, Page 1, Part I, Line 23
Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
BANK FEES	60.			
FOUNDATION PARTNERS ID#94-3124318	36,421.			
Total	<u>36,481.</u>			

Form 990-PF, Page 6, Part VIII, Line 1
Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> JOHN P BAILEY P O BOX 1019 LIVINGSTON MT 59047	EXECDIR&DIR 0.10	0.	0.	0.
Person . . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> JAMES A POSEWITZ P O BOX 5088 HELENA MT 59604	SECRETARY&DIR 0.10	0.	0.	0.
Person . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> AVERY W BROADBENT 26 E 63RD STREET 9C NEW YORK NY 10065	DIRECTOR 0.05	0.	0.	0.

Total

0. 0. 0.

Form 990-PF, Page 11, Part XV, line 3a
Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
a Paid during the year				
US COURT TENNIS PRESERVATION FDN PO BOX 194 JAMESTOWN RI 02835	----- ----- -----	----- ----- 501C3	CHARLESTON FUND	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
INDIAN RIVER LAND TRUST 1904 12TH COURT VERO BEACH FL 32960	----- ----- -----	----- ----- 501C3	LAND AND WATER CONSERVATION EDUCATION	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 5,000.
NORTHERN PLAINS RESOURCE COUNCIL 220 S.27TH ST STE A BILLINGS MT 59101	----- ----- -----	----- ----- 501C3	PROTECT AND PRESERVE WATER QUALITY FAMILY FARMS&RANCHES	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 3,000.
FAIRMONT PRESBYTERIAN CHURCH 2757 FAIRMOUNT BLVD CLEVELAND OH 44118	----- ----- -----	----- ----- 501C3	RELIGIOUS BENEFIT	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
JOHNS ISLAND FOUNDATION 3055 CARDINAL DRIVE VERO BEACH FL 32960	----- ----- -----	----- ----- 501C3	COMMUNITY OUTREACH	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
BOYS&GIRLS CLUBS OF INDIAN RIVER CNTY 1729 17TH AVE VERO BEACH FL 32960	----- ----- -----	----- ----- 501C3	YOUTH SUPPORT PROGRAMS AND ACTIVITIES	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
MONTANA ENVIRON INFOR CENTER 1107 W. LAWRENCE STREET HELENA MT 59624	----- ----- -----	----- ----- 501C3	PROMOTE CLEAN RELIABLE ENERGY CONSERVATION	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 5,500.
ORION THE HUNTERS INSTITUTE 59 EAST MAIN STREET TRUMANSBURG NY 14886	----- ----- -----	----- ----- 501C3	CONSEVATION AND WILDLIFE ADVOC RESPONS HUNTING	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 2,000.
WILLIAMSTOWN RURAL LANDS FDN 671 COLD SPRING ROAD WILLIAMSTOWN MA 01267	----- ----- -----	----- ----- 501C3	PROTECT RURAL CHARATER ENDOWMT FOR 21ST CENTURY	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 8,000.

Total

27,500.

Form 990-PF, Page 1, Part I
Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EVERETT BUSINESS SERVICE	ACCOUNTING & TAX SERVICES	600.			

Total

600.

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
FOUNDATION PARTNERS FED ID#94-3124318	2,443,888.	3,009,948.
Total	<u>2,443,888.</u>	<u>3,009,948.</u>

Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount
Robert Broadbent 3/4/15 Cash	31,000.
William S Broadbent 1000 Sh Walgreen Basis 9/24/12 35.67Sh	35,670.
Fair Market Value 7/6/15 85.29Sh 85,290.	
Total	<u>66,670.</u>

Supporting Statement of:

Form 990-PF, p2/Line 1(a)

Description	Amount
BARCLAYS	29.
FIRST INTERSTATE CHECKING	1,839.
Total	<u>1,868.</u>

Supporting Statement of:

Form 990-PF, p2/Line 2(b)

Description	Amount
FIRST INTERSTATE INTEREST CHECKING	29.
FIRST INTERSTATE SAVINGS	4,954.
Total	<u>4,983.</u>