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990-PF

Return of Private Foundation

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

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

SCANNED NOV 2 1 2016

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

Open to Public Inspection

Fo	r cale	endar year 2015 or tax year beginning			_12/	30 , 2015 ,	, and ending			12/31, 20 15
	lame o	f foundation						Α	Employer identific	cation number
]	PPB	CHARITABLE FOUNDATION INC							81-	0836352
	Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (r (see instructions)		
1	PΛ	BOX 630858							51	3-534-5310
		own, state or province, country, and ZIP or foreign po	stal co	de			·	_		3 331 3310
	,	, , ,						С	If exemption applicati	on is
	TNI	CINNATI, OH 45263-0858							pending, check here.	PLA
_		ck all that apply: X Initial return			Initial return	of a former n	ublic charit	, 		.□
•	Cite	Final return		-	Amended ret	•	Jubilo Gilarit	ין י	Foreign organization Foreign organization	
		Address change		Н	Name change				85% test, check he	re and attach
급	Char	ck type of organization: X Section 501	(0)(2)				-		computation	
T	_		(0)(3)	1				E	If private foundation	►
1		ection 4947(a)(1) nonexempt charitable trust			ner taxable pri			\dashv	under section 507(b)	(1)(A), check here . P
ı		1,		_	nethod: X Ca	asn Acc	rual	F		a 60-month termination
		- 1)ther	-				-	under section 507(b)	(1)(B), check here .
				1N (O) must be on ca	sn dasis)	1			(d) Disbursements
L	art i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	<u>'</u>	exp	evenue and enses per books	(b) Net inve		(c)	Adjusted net income	for charitable purposes (cash basis only)
	1		1		91,052.					(oddir badis crity)
	1 2	Contributions, gifts, grants, etc., received (attach schedule). Check if the foundation is not required to			J±, UJZ.					
	3	attach Sch B							-	
	4	Dividends and interest from securities		-				-		
	-	Gross rents								
		Net rental income or (loss)								-
a	1	Net gain or (loss) from sale of assets not on line 10								
Revenue	b	Gross sales price for all								
-≷	-7-	Capital gain net income from Part IV, line 2.		ar tank	THE DAY STORES					
æ		Net short!termlcapital gain								
	9	Income modifications / 1 8 (UID O	1							
	10a	Gross saleslies returns and allowances								
	ь	1 1 ·	1							
	С	Gross profit or (loss) (attach schedule)	- B 							
	11	Other income (attach schedule)	L							
_	12	Total. Add lines 1 through 11			91,052.					
	13	Compensation of officers, directors, trustees, etc $\ \ .$								
enses	14	Other employee salaries and wages					NONE		NONE	
		Pension plans, employee benefits	L				NONE		NONE	
×	16a	Legal fees (attach schedule)								
e E	b	Accounting fees (attach schedule)								
₹	C	Other professional fees (attach schedule)								
tra	17	Interest								
isi	18	Taxes (attach schedule) (see instructions)								
Administrative Exp	19	Depreciation (attach schedule) and depletion .								
Þ	20	Occupancy								
7 p	21	Travel, conferences, and meetings					NONE		NONE	
an	21 22	Printing and publications					NONE		NONE	
nq	23	Other expenses (attach schedule)								
ati	24	Total operating and administrative expenses.								
ĕ	23 24 25	Add lines 13 through 23			···		NONE		NONE	
Õ	25	Contributions, gifts, grants paid	<u></u>							
_	26	Total expenses and disbursements Add lines 24 and 25	1				NONE		NONE	
	27	Subtract line 26 from line 12:								
	а	Excess of revenue over expenses and disbursements			91,052			_		
		Net investment income (if negative, enter -0-)			-					
=	1	Adjusted net income (if negative, enter -0-).		. <u> </u>						E 000 DE
410		perwork Reduction Act Notice, see instruction		^					3	Form 990-PF (2015)
		FJY677 5889 11/09/2016 13:2	/: I	4						५८℃ 3 -

D.	art II	Palance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
	art III	Balance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng	NONE	NONE NONE	
	2	Savings and temporary of	cash investments	NONE	NONE	
	3	Accounts receivable				
		Less: allowance for doub	otful accounts >			74
	4	Pledges receivable ▶_	<u> </u>			
		Less allowance for doub	otful accounts			
ļ	5	Grants receivable				<u> </u>
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (atta	ach schedule) (see instructions)			MAAD SECTION OF CONSTRUCT BY 1.27.
			eceivable (attach schedule)			
			otful accounts NONE			
ssets	8		se			
Ass	9	•	eferred charges			
1			government obligations (attach schedule).	11011	01 050	002 004
		•	stock (attach schedule)	,,	91,052	992,894
	11 11	Investments - corporate Investments - land, building	bonds (attach schedule)			
		and equipment basis Less accumulated deprecia	<u> </u>			
		(attach schedule)	<u> </u>			
	12 13		loans			
	14	Land, buildings, and	>		Karayyar da ay kara	
		equipment basis Less accumulated deprecia	ation			
	15	(attach schedule) Other assets (describe	· · · · · · · · ·			
	16		completed by all filers - see the			
		instructions Also, see p	age 1, item I)	NONE	91,052	. 992,894
	17	Accounts payable and a	ccrued expenses			
	18	Grants payable				
es	19	Deferred revenue				
abilities	20	Loans from officers, directo	rs, trustees, and other disqualified persons			
<u>-ĕ</u>	21-	• •	otes-payable (attach-schedule)			
_	22	Other liabilities (describe	e ▶)			
		T-4-111-1-11141	47 Abranch 20\		NON	
_	23		es 17 through 22)		NONI	1
Ś			low SFAS 117, check here . ▶ 24 through 26 and lines 30 and 31.			
alances		·	•			
쿌	24	Temporarily restricted	• • • • • • • • • • • • • • • • • • • •			
Assets or Fund B	-0	•	not follow SFAS 117, ►X			1
互			plete lines 27 through 31.			
ō	27		cipal, or current funds	NONE	91,052	
ets	28		r land, bldg , and equipment fund			
SSI	29	Retained earnings, accumu	lated income, endowment, or other funds			
		Total net assets or fund	d balances (see instructions)	NONE	91,052	
Ž	30 31	Total liabilities and	net assets/fund balances (see			
			 		91,052	
			nges in Net Assets or Fund Bala			
1			balances at beginning of year - Part			17017
_			d on prior year's return)			NONE
_			line 27a			91,052.
						01 050
4		i lines 1, 2, and 3 reases not included in	ling 2 (itamuza)	• • • • • • • • • • • • • • • • • • • •	4	91,052.
5			alances at end of year (line 4 minus	line 5) - Part II, column //		91,052.
_	, 100	ur net aaaeta Or Iuilu D	dianoca at one of year time 4 fillings	mio oj - i art ii, coluifiii (i	<u> </u>	5 990 PE (2015)

Pa	Part IV Capital Gains and Losses for Tax on Investment Income								
`	(a) List and	(b) How	(c) Date acquired	(d) Date sold					
	2-story br	rick warehouse; or common stock, 200) shs MLC Co.)	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)			
<u>1a</u>			<u> </u>						
<u>b</u>									
									
<u>d</u>	· · · · · · · · · · · · · · · · · · ·								
<u>e</u>		(0.0	(a) Cost or other book		L	L <u>. </u>			
	(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)					
					(-, p(-,				
b				-					
c				-					
d									
е									
	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	ain minus			
	(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (ı)		(k), but not less t	han -0-) or			
	.,,	as of 12/31/69	over col. (j), if any		Losses (from co	l. (h))			
<u>a</u>					-				
<u>b</u>					_				
<u> </u>			<u> </u>						
d									
<u>e</u>			f gain, also enter in Part I, line 7	 					
2	Capital gain net income of		f (loss), enter -0- in Part I, line 7	2					
3	Net short-term capital gai	'') 'in or (loss) as defined in sections		-					
	_		structions). If (loss), enter -0- in						
				3					
Pa	rt V Qualification U	nder Section 4940(e) for Rec	luced Tax on Net Investment I	ncome	N,	'A			
Wa		the section 4942 tax on the distri	butable amount of any year in the b	ase perio	1 7	Yes No			
If "۱		not qualify under section 4940(e).							
1		ount in each column for each yea	r; see the instructions before makin	g any enti					
	(a) Base period years	(b)	(c)		(d) Distribution ra	tio			
Ca	endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	col (c))			
	2014 ⁻ 2013								
_	2013								
	2011								
	2010								
			<u> </u>						
2	Total of line 1, column (d	1)		2					
3			e the total on line 2 by 5, or by the			_			
	number of years the foun	dation has been in existence if les	ss than 5 years	3	<u></u>				
4	Enter the net value of no	ncharitable-use assets for 2015 fr	om Part Y line 5	4	-				
7	4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5								
5	Multiply line 4 by line 3.		• • • • • • • • • • • • • • • • • • • •	5					
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6					
7	Add lines 5 and 6			7					
	Enter quellé des alletelle et	one from Dark VIII the Life		•					
8	If line 8 is equal to or good Part VI instructions.	ons from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	using a 1% tax	rate. See the			

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ction	s)
,1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		N	ONE
	here and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J			
	Part I, line 12, col (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2		- N	TONE
3	Add lines 1 and 2			IONE
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			<u>IONE</u>
6	Credits/Payments.			
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a Exempt foreign organizations - tax withheld at source			
b				
C				
d			N	ONE
7 8	Total credits and payments. Add lines 6a through 6d		1	10111
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		N	ONE
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10112
11	Enter the amount of line 10 to be Credited to 2016 estimated tax			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		l x
	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.			
c	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			,
	(1) On the foundation ► \$ (2) On foundation managers ► \$			·
—е-	-Enter-the-reimbursement-(if-any)-paid-by-the-foundation-during-the-year-for-political-expenditure-tax-imposed-on-	سندسند	a management	
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	İ		١
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			,
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	ء ا	Х	
7	conflict with the state law remain in the governing instrument?	7	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	_	Α.	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
h	FL If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
J	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
٠	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
10	names and addresses	10	Х	
			0-PF	(2045)

	01 4 5 11 4 11 11 ()			
	t Vil-A Statements Regarding Activities (continued)			
,11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
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	.,	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► N/A			
14	The books are in care of ▶ FIFTH THIRD BANK Telephone no ▶ (513) 534	<u>-531</u>	<u>0</u>	
	Located at ► 38 FOUNTAIN SQUARE PLAZA, CINCINNATI, OH ZIP+4 ► 45202			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		🕨	·Ш
	and enter the amount of tax-exempt interest received or accrued during the year			
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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			74.3
	the foreign country >	- 7A	7.50	(4) 7
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	V07.0000		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	23.57	Yes	No
1 a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	33		
	disqualified person?	3363		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available 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	1 13	10.11	
	foundation agreed to make a grant to or to employ the official for a period after	S 14.7	13 m 72 m	
	termination of government service, if terminating within 90 days)		Sec.	
	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4 L		882238
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	7158	n Winds
_	Organizations relying on a current notice regarding disaster assistance check here			
	:-Did-the-foundation-engage-in-a-prior-year-in-any-of-the-acts-described-in-1a,-other-than-excepted-acts;-that-	_		X
2	were not corrected before the first day of the tax year beginning in 2015?	1c	7000	Λ.
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	K		
	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	7 (20)		
•	6e, Part XIII) for tax year(s) beginning before 2015?	\$2.4X		
	If "Yes," list the years			
ŀ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			Ţ,
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		3.4	1.6
	all years listed, answer "No" and attach statement - see instructions)	2b		Х
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	537	30.50	eit.
	>			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	700 de 200		
	at any time during the year?			
t	of 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		3	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1] j	
	foundation had excess business holdings in 2015)	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	3-1	₹%′°	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X

Form 9	90-PF (2015)			36352	Pa	ige 6
Par	VILB Statements Regarding Activities t	or Which Form 4	720 May Be Req	uired (continued)		
ͺ5a	During the year did the foundation pay or incur any amo	unt to				
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X No	,	
	(2) Influence the outcome of any specific public ele	ection (see section	4955); or to carry or	n,		
	directly or indirectly, any voter registration drive?			. Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes	?	. Yes X No	•	
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described i			
	section 4945(d)(4)(A)? (see instructions)			Yes X No	•	
	(5) Provide for any purpose other than religious, c	·	. ,,			
	purposes, or for the prevention of cruelty to children					
b	If any answer is "Yes" to 5a(1)-(5), did any of the		•		ן י	
	Regulations section 53 4945 or in a current notice regard	-			5b	
	Organizations relying on a current notice regarding disas				\square	
C	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ax		
	because it maintained expenditure responsibility for the	grant ⁷		Yes No	•	
	If "Yes," attach the statement required by Regulations see					
6a	Did the foundation, during the year, receive any fur					
	on a personal benefit contract?					
b	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a	personal benefit contra	act ⁷	6b	<u>X</u>
- -	If "Yes" to 6b, file Form 8870.			□ चि		
_	At any time during the tax year, was the foundation a pa				- I/ I	
b Par	If "Yes," did the foundation receive any proceeds or have VIII Information About Officers, Director					
r ai	and Contractors		_			
1	List all officers, directors, trustees, foundation m	anagers and their (
	(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans	(e) Expense account other allowances	nt,
-		devoted to position	enter -0-j	and deferred compensation		
SEE	STATEMENT 2					
			<u> </u>		<u></u>	
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin	e 1 - see instruction	ons). If none, e	nter
(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	nt,
NONE						
			-0-	-0-	-	-0-
_						

NONE Form **990-PF** (2015)

Part VIII Information About Officers, Directors, Trustees, Foundation I and Contractors (continued)	Managers, Highly Paid Emplo	yees,
3 Five highest-paid independent contractors for professional services (see in	structions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	-	NONE
	-	
	-	
	-	
	-	
Total number of others receiving over \$50,000 for professional services		NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis organizations and other beneficiaries served, conferences convened, research papers produced, etc.	tical information such as the number of	Expenses
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 line	s 1 and 2	Amount
1 NONE		
2		
All other program-related investments. See instructions		
3 NONE		
Total Add lines 1 through 3		_

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn foundations,	
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	992,894.
b	Average of monthly cash balances	1b	NONE
С	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	992,894.
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	NONE
3	Subtract line 2 from line 1d	3	992,894.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	14,893.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	978,001.
6	Minimum investment return. Enter 5% of line 5	6	268.
Part		dations	
1	Minimum investment return from Part X, line 6	1	268.
2a	Tax on investment income for 2015 from Part VI, line 5 2a NONE		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	268.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	268.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	268.
	Qualifying Distributions (see instructions)		
1	- / www.darra-para (wordaning-darramonative expenses)-te-decomplian-enarrable,-etc.,-parpeace.		
a		1a	
	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	NONE
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	NONE
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years.	lculating whether t	the foundation

Form **990-PF** (2015)

Form	990-PF (2015)				Page 9
Par	t XIII Undistributed Income (see instri	uctions)			
	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
•	line 7				268.
•	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only.			NONE	
	Total for prior years 20,20,20		NONE	1,01,12	
			110112		
	Excess distributions carryover, if any, to 2015 NONE				
	27027				
_	MONE				
	MONE				
	MONE				
_	110111 2014 111111	NONTE			
	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2015 from Part XII,				
	line 4: ▶ \$ <u>NONE</u>			NONTE	
а	Applied to 2014, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election required - see instructions)	NONE	!		
		110112			NONE
	Applied to 2015 distributable amount	NONE			
	Remaining amount distributed out of corpus	NONE			NONE
	Excess distributions carryover applied to 2015. (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:	Nonz			
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	NONE			
	Prior years' undistributed income. Subtract				
L	line 4b from line 2b		NONE	THE PERSON STREET, AND THE PROPERTY OF THE PARTY OF THE P	Ry - y - y - Tuberyy a fining estimating by S
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		NONE		
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions		NONE		
e	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount - see instructions			NONE	
	Undistributed income for 2015. Subtract lines				
•	4d and 5 from line 1 This amount must be distributed in 2016				268.
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONE			
۰	Excess distributions carryover from 2010 not				
•	applied on line 5 or line 7 (see instructions)	NONE			······································
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	NONE			
10	Analysis of line 9				•
	Excess from 2011 NONE				
	Excess from 2012 NONE				
	Excess from 2013 NONE				
	Excess from 2014 NONE				
	Excess from 2015 NONE				
	LACCOS HOIN 2010 . I . I	L			Form 990-PF (2015)

Par	t XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, question	on 9)		NOT	<u>APPLICABL</u> E
1a	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 v	whether the foundation	is a private operating	foundation described in	section	4942(j)	(3) or	4942(j)(5)
2a	Enter the lesser of the ad-	Tax year	_	Prior 3 years				(e) Total
	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 201	2	ļ	
	I or the minimum investment return from Part X for each		ı				1	
	year listed						 	
b	85% of line 2a		· · · · · · · · · · · · · · · · · · ·					
c	Qualifying distributions from Part						ŀ	
	XII, line 4 for each year listed						 -	
a	Amounts included in line 2c not used directly for active conduct							
	of exempt activities						 	
е	Qualifying distributions made directly for active conduct of							
	exempt activities Subtract line]			
3	2d from line 2c Complete 3a, b, or c for the						 	
-	alternative test relied upon							
а	"Assets" alternative test - enter							
	 Value of all assets Value of assets qualifying 					-		
	under section				1			
b	4942(j)(3)(B)(i) "Endowment" alternative test-							
	enter 2/3 of minimum invest-							
	ment return shown in Part X, line 6 for each year listed						ļ	
C	"Support" alternative test - enter							
	(1) Total support other than gross investment income		•					
	(interest, dividends, rents,						ļ	
	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)(m)						+	
	(3) Largest amount of sup- port from an exempt							
	organization (4) Gross investment income .			-	1		 	
Pa		ntary Information (Complete this part	only if the founda	tion had \$5	,000 o	r more	in assets at
		luring the year - see				•		
	Information Regarding							
а	List any managers of	the foundation who y tax year (but only if t	have contributed mor	re than 2% of the tot	al contributio	ns receiv	red by t	the foundation
	_	y tax year (but only if t	ney have continuited i	more man \$5,000) (5	ee section 50	/ (U/(Z/./		
_	N/A List any managers of	the foundation who	own 10% or more o	of the stock of a corr	oration for a	n equall	v Jarge	nortion of the
		rship or other entity) o				ii equali	y large	portion of the
		, , , , , , , , , , , , , , , , , , ,		J				
	N/A							
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:	-			
	Check here ▶ if	the foundation only	makes contributions	to preselected char	ıtable organi	zations	and doe	es not accept
	unsolicited requests	for funds. If the found	lation makes gifts, gr	ants, etc. (see instruc	tions) to indi	viduals o	or organ	izations under
	•	plete items 2a, b, c, ar						
- 6	The name, address, a	nd telephone number	or e-mail address of th	e person to whom app	olications show	uld be ad	idressed	•
_	SEE STATEMENT				 			
ı	The form in which app			on and materials they	should includ	e:		
	SEE ATTACHED S	TATEMENT FOR L	INE 2					
	Any submission dead	lines:						
•	•	TATEMENT FOR L	INE 2					
-	d Any restrictions or	limitations on award	s, such as by geogr	aphical areas, charit	able fields, l	cinds of	ınstıtut	ions, or other
	factors:							
JSA		STATEMENT FOR L	INE 2					n 990-PF (2015)
	000						FOIL	11 J J J J T T (2015)

Part XV Supplementary Information (continued)									
3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	contribution						
Paid during the year	İ								
		! !							
		1							
			i						
				1					
		1							
				1					
		[
		1							
	1								
		1	J						
		1							
Total			▶ 3a						
Approved for future payment				,					
				[
				1					
	:		1						
	<u></u>								

Part XVI-A	Analysis of Income-Produ	ucing Acti	vities			
	nounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
Ū		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
_	ervice revenue			Excidition code		(See instructions)
				 		
				-		
				 		
e						
•						
-	id contracts from government agencies					
	up dues and assessments					
	savings and temporary cash investments			 		
	and interest from securities income or (loss) from real estate:					
	nanced property			1		
	bt-financed property · · · · · · ·					
	ncome or (loss) from personal property.					
	estment income					
	s) from sales of assets other than inventory					
	e or (loss) from special events	1				
	it or (loss) from sales of inventory					
•	enue a					
					<u> </u>	
е						
	Add columns (b), (d), and (e)			<u> </u>	<u> </u>	
	l line 12, columns (b), (d), and (e)				13	
	et in line 13 instructions to verify calci			- 4 5		·
Part XVI-B	Relationship of Activities	s to the A	ccomplishment of E	xempt Pur	poses	
Line No. ▼	Explain below how each activit accomplishment of the foundation					
						
						
	·					
						
	· · · · · · · · · · · · · · · · · · ·				_	
						
						
	· -		 -		 .	··
						
				-		
			NOT APPLICABL	Ē	·	
		_				
						<u> </u>
			 -			
1						

Form 990-PF					1-0836352		Page 13
Part XV			sfers To and Trans		Relationships With Non	charita	
in se					other organization described tion 527, relating to political	\	es No
		_	noncharitable exempt o	•			
						1a(1)	<u> </u>
			• • • • • • • • • • • • • • • • • • • •			1a(2)	X
	er transactions: Sales of assets to a non	charitable evemn	t organization			15(1)	X
							X
							X
							X
							X
							X
valu	e of the goods, other	assets, or service	s given by the reportin	g foundation. If	f the foundation received less f the goods, other assets, or s	than fa	ir market
(a) Line no			charitable exempt organization		ption of transfers, transactions, and sha		
	 						
					10.00		
	<u> </u>		 -				
-							
-							
		_					
	 	 					
	 		· 				
	+	 					
	· ·	•	ated with, or related to er than section 501(c)(3		tax-exempt organizations 527?	Yes	X No
b_lf "Y	es," complete the follow		# N.T		(1) December of other	-k	
	(a) Name of organization	on	(b) Type of organizat	ion	(c) Description of relation	snip	
-	· 		·····				
	1		4 4 - 1		national and to the best of any beauties		enf. at an trans
ļ c			payer) is based on all information of		tatements, and to the best of my knowled y knowledge	ge and bei	iei, it is tide
Sign	1. 1. A	m	11/18/16	Chair	May the IR		
Here '	Signature of afficer or trustee		Date	Title	with the p	ns)? X	
Paid	Print/Type preparer's na	ame	Preparer's signature			PTIN	
Prepare	Dallas G Fa	erguson	Dallar & Fe	yun-	11/9/1 6 self-employed		320 Y
Use On	Tillia silaine		ANK /		Firm's EIN ► 31-	06768	65
OSE OII	•	O BOX 63085 INCINNATI,	OH	45263-085	8 Phone no 800 - 3	36-67	82
		THCTHINKTT,	<u></u>	43403-003			PF (2015)

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

Department of the Treasury Internal Revenue Service Name of the organizatio

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization		Employer identification number
DDD CUADITADIE ECIMINA	TION INC	81-0836352
PPB CHARITABLE FOUNDA Organization type (check one):	ATTOM THE	61-0636332
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
Note. Only a section 501(c)(7), instructions. General Rule	(8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributi property) from any one contributor. Complete Parts I and II. See instruction tributions.	
Special Rules		
regulations under sec 13, 16a, or 16b, and	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1, tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 of that received from any one contributor, during the year, total contributions the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Co	or 990-EZ), Part II, line s of the greater of (1)
contributor, during th	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re e year, total contributions of more than \$1,000 <i>exclusively</i> for religious, ch I purposes, or for the prevention of cruelty to children or animals. Complet	naritable, scientific,
contributor, during th contributions totaled during the year for an General Rule applies	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re e year, contributions exclusively for religious, charitable, etc., purposes, but more than \$1,000. If this box is checked, enter here the total contributions exclusively religious, charitable, etc., purpose. Do not complete any of the to this organization because it received nonexclusively religious, charitable one during the year	at no such s that were received parts unless the e, etc., contributions
990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file So answer "No" on Part IV, line 2, of its Form 990; or check the box on line H ertify that it does not meet the filing requirements of Schedule B (Form 99	l of its Form 990-EZ or on its

JSA 5E1251 2 000

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			
PPB CHARITABLE	FOUNDATION	INC	

Employer identification number 81-0836352

Part I	Contributors (see instructions). Use duplicate copies	s of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	GORDON J. BURRER JR. 3240 LAKE POINTE BLVD. #108 SARASOTA, FL 34231	\$91,052.	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

PPB CHARITABLE FOUNDATION INC

Employer identification number

81-0836352

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_	2,000 SHARES C.H. ROBINSON WORLDWIDE INC 5,924 SHARES CHUBB CORP CUSIP 171232101 1,600 SHARES SYSCO CORP CUSIP 871829107 410 SHS US BANCORP DEL CUSIP 90297330	\$1,003,255.	12/30/2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

GORDON J. BURRER JR. 3240 LAKE POINTE BLVD. #108 SARASOTA, FL 34231 FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

GORDON J. BURRER JR.

ADDRESS:

3240 LAKE POINTE BLVD.#108

SARASOTA, FL 34231

TITLE:

PRESIDENT AND DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 6

OFFICER NAME:

NANCY BURRER

ADDRESS:

3240 LAKE POINTE BLVD.#108

SARASOTA, FL 34231

TITLE:

VICE PRESIDENT AND DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 4

OFFICER NAME:

JEFFERY G. BURRER

ADDRESS:

23 SPEEN ST.

NATICK, MA 01760

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 4

OFFICER NAME:

C. AMY ROBSON

ADDRESS:

57 POWDERMAKER DR.

RIDGEFIELD, CT 06687

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 4

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

PHILLIP F. BURRER

ADDRESS:

451 HOPE AVE.

SISTERS, OR 97759

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 4

PPB CHARITABLE FOUNDATION INC FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

FOUNDATION OFFICE AT FIFTH THIRD BANK

ADDRESS:

38 FOUNTAIN SQUARE PLAZA MD 1090 CA

CINCINNATI, OH 45202

RECIPIENT'S PHONE NUMBER: 513-534-8786

FORM, INFORMATION AND MATERIALS:

WRITTEN REQUEST BY A QUALIFIED ORGANIZATION

UNDER SECTION 201(c)(3) WHICH ARE DEDUCTIBLE UNDER EACH OF THE SECTION 170(b)(1)(A), 170(c), 2055 AND 2522 OF THE CODE SECTION

SUBMISSION DEADLINES:

N/A

RESTRICTIONS OR LIMITATIONS ON AWARDS:

GRANTS FOR ORGANIZATIONS

THAT ARE IMPROVING, BENEFITTING, AND ADVANCING LONG-TERM NEEDS OF MANKIND THROUGH ENDEAVORS IN SCIENTIFIC DISCIPLINE



Portfolio Manager: CHARLES J. RYAN (513) 534-4103 Trust Officer: CAROL A. SCHNEIDER (513) 534-7240

IMA PPB CHARITABLE FOUNDATION

12/30/2015 - 12/31/2015

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THE FIFTH THIRD BANK	INVESTMENT MANAGEMENT FOR	GORDON & NANCY BURRER, DIRECTOR	OF PPB CHARITABLE FOUNDATION	INC. DATED 12/23/2015

		INVESTM	IENT ALLOC	IVESTMENT ALLOCATION SUMMARY	RY		-	
Equibes - 100%			Las	Last Statement	This Statement	Percent of	Est. Annual	Estimated
/		Description	4	Market Value	Market Value	Assets	Income	Yield
	O	Cash and Equivalents		\$0.00	\$0.00	%0	\$0.00	0.0%
	ŭ	Equities		\$0.00	\$992,894.06	100%	\$19,348.92	1.9%
	F1	Fotal Account Value		\$0.00	\$992,894.06	100%	\$19,348.92	1.9%
	1					Net change in	Net change in total account value 0.0 % Increase	0.0 % Increase
	ACCOUNT SUMMA	SUMMARY	a tru	* .		ACCOUNT OVERVIEW	VERVIEW	
	Income Cash	Principal Cash	Investments*	Total		Ö	Current Period	Calendar YTD
Beginning Balance	00'0	0.00	0.00	0.00	Contributions			
Contributions			\$1,000,551,18	\$ \$1,000,551.18	Security Deposits		\$1,000,551.18	\$1,000,551.18
Change in Market Value			\$(7,657.12)	\$(7,657.12)	۱Ľ		\$1,000,551.18	\$1,000,551,18
Ending Balance	0.00	00'0	\$992,894.06	\$992,894.06		Value	\$(7,657.12)	\$(7,657.12)
* Investments represent the activity in your equity, bond & other security holdings	d & other security holdings							
REA	REALIZED GAIN/(LOSS) S	(LOSS) SUMMARY	RY	, , , , , , , , , , , , , , , , , , ,				
					_			

INVESTMENT OBJECTIVE

\$0.00 \$0.00 \$0.00

Current Period \$0.00 \$0.00

\$0.00

Aggressive Growth

Net realized gain/(loss)

Short-term gain/(loss) Long-term galn/(loss) Long-term capital appreciation through aggressive long-term growth of capital, an expectation of a high degree of principal fluctuation.