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# EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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

OMB No 1545 0052

|                | calendar year 2015 or tax year beginning DEC   | 29, 2015                           | , and ending              | DEC 31, 2015  |   |
|----------------|--|------------------------------------|---------------------------|---|---|
| Nar            | ne of foundation .   |                                    |                           | A Employer identification                                 | number  |
| S              | TEFAN & TANYA GLEASON FOU  | NDATION, INC                       | •                         | 81-0935860  |   |
|                | nber and street (or P.O. box number if mail is not delivered to street   |                                    | Room/suite                | <b>B</b> Telephone number                                 |   |
| _P             | O BOX 49246  |                                    |                           | 208-577-22  |   |
|                | or town, state or province, country, and ZIP or foreign po   | ostal code                         |                           | C If exemption application is pe                          | nding, check here   |
|                | HARLOTTE, NC 28277   | <del></del>                        |                           |   |   |
| G C            | heck all that apply X Initial return   | Initial return of a fo             | rmer public charity       | D 1 Foreign organizations,                                | check here  |
|                | Final return   | Amended return                     |                           | 2 Foreign organizations mee<br>check here and attach con  | iting the 85% test  |
| ш с            | Address change  heck type of organization:  X Section 501(c)(3) ex   | Name change                        |                           | 1   |   |
| Γ.             |  | Other taxable private founda       | ition                     | E If private foundation state<br>under section 507(b)(1)( |   |
| L Fa           | ir market value of all assets at end of year   J   Accounting  |                                    | Accrual                   | F If the foundation is in a 6                             |   |
|                |  | her (specify)                      | 7.40.24                   | under section 507(b)(1)(                                  | . []  |
| ,,,,           |  |                                    | pasis)                    | \                   | •   |
| Pa             | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income                                   | (d) Disbursements<br>for charitable purposes<br>(cash basis only) |
|                | 1 Contributions, gifts, grants, etc., received   | 40,000.                            | ·                         | , ,   |   |
|                | 2 Check Interest on savings and temporary cash investments   | <u> </u>                           |                           |   |   |
|                | 4 Dividends and interest from securities   |                                    |                           |   |   |
|                | 5a Gross rents   |                                    |                           |   |   |
|                | Net rental income or (loss)  |                                    |                           |   |   |
| nue            | 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a                                   | >                                  |                           |   |   |
| Revenue        | 7 Capital gain net income (from Part IV, line 2)   |                                    | 0.                        |   |   |
| Œ              | 8 Net short-term capital gain  |                                    |                           |   |   |
|                | 9 Income modifications Gross sales less returns  |                                    |                           |   |   |
|                | 10a and allowances   |                                    |                           |   |   |
|                | b Less Cost of goods sold  |                                    |                           |   |   |
|                | c Gross profit or (loss)  11 Other income  |                                    |                           |   |   |
|                | 12 Total Add lines 1 through 11  | 40,000.                            | 0.                        | 0.  |   |
|                | 13 Compensation of officers, directors, trustees, etc  | 0.                                 | 0.                        | 0.  | 0.  |
|                | 14 Other employee salaries and wages   |                                    | -                         |   |   |
|                | 15 Pension plans, employee benefits - 1 - 1  | 1                                  |                           |   |   |
| Expenses       | 16a Legal fees   |                                    |                           |   |   |
| be             | b Accounting fees  |                                    |                           |   |   |
|                |  |                                    |                           |   |   |
| Ęį             | 17 Interest  |                                    |                           |   |   |
| Administrative | 18 Taxes 19 Depreciation and deptetion Till UT   | <u> </u>                           |                           |   |   |
| Ē              | 20 Occupancy   | <u>'</u>                           |                           |   |   |
| Adn            | 21 Travel, conferences, and meetings   |                                    |                           |   |   |
| and            | 22 Printing and publications   |                                    |                           |   |   |
| )9 a           | 23 Other expenses  |                                    |                           |   |   |
| Operating      | 24 Total operating and administrative  |                                    | _                         |   | _   |
| )per           | expenses Add lines 13 through 23   | 0.                                 | 0.                        | 0.  | 0.  |
| O              | 25 Contributions, gifts, grants paid   | 0.                                 |                           |   | 0.  |
|                | 26 Total expenses and disbursements.   |                                    | 0.                        | 0.  | 0.  |
|                | Add lines 24 and 25  | 0.                                 | <u> </u>                  | 0.  | 0.  |
|                | 27 Subtract line 26 from line 12:  | 40,000.                            |                           |   |   |
|                | a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)                                     | =0,000+                            | 0.                        |   |   |
|                | C Adjusted net income (if negative, enter -0-)   |                                    |                           | 0.  |   |
| 5235           |  | ·                                  |                           | <del>-</del>  | Form 990-PF (2015)  |

STEFAN & TANYA GLEASON FOUNDATION, INC. 81-0935860 Form 990-PF (2015) Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 40,000. 40,000. Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less allowance for doubtful accounts 4 Pledges receivable ► Less allowance for doubtful accounts Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable 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 b Investments - corporate stock c Investments - corporate bonds 11 Investments land buildings and equipment basis Less accumulated depreciation Investments - mortgage loans 13 Investments - other Land, buildings, and equipment: basis Less accumulated depreciation Other assets (describe 16 Total assets (to be completed by all filers - see the 40,000. 40,000. 0. instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 0. 23 Total liabilities (add lines 17 through 22) **▶** [X] Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31 **Fund Balances** 40,000 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 Vet Assets or 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 40,000 0. 30 Total net assets or fund balances 40,000 0. 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 40,000. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 Form **990-PF** (2015)

| (a) List and desc  | cribe the ki  | nd(s) of property sold (e g<br>or common stock, 200 shs | , real estate,  | t moone                               | 1 1          | How ac<br>- Purc<br>- Don   | equired<br>hase | (c) Date acq<br>(mo , day, | uired<br>yr.)         | (d) Date sold<br>(mo , day, yr )     |
|--|---------------|---|-----------------|---------------------------------------|--------------|---|-----------------|----------------------------|-----------------------|--------------------------------------|
| 1a   |               |   |                 |                                       | - 10011      | ation   |                 |                            |                       |                                      |
|  | NE            |   | <del>-</del>    |                                       |              |   |                 |                            |                       |                                      |
| C  |               |   |                 |                                       | lacksquare   |   |                 |                            |                       |                                      |
| _d   |               | <del></del>   |                 |                                       | -            |   |                 |                            |                       | <del> </del>                         |
| _e   |               | Capraciation allowed                                    | (=\Co           | st or other basis                     | Ļ,           |   |                 | (h) Corn                   | or (loog)             |                                      |
| (e) Gross sales price  | (")           | Depreciation allowed (or allowable)                     |                 | expense of sale                       |              |   |                 | (h) Gain (<br>(e) plus (f) |                       | 1)                                   |
| <u>a</u><br>b  |               |   |                 |                                       |              |   |                 |                            |                       |                                      |
| c  |               |   |                 |                                       |              |   |                 |                            |                       |                                      |
| d  |               |   |                 |                                       |              |   |                 |                            |                       |                                      |
| _e   | <u> </u>      |   |                 | 10/04/60                              |              |   |                 |                            |                       |                                      |
| Complete only for assets show  |               |   |                 |                                       |              |   | (l              | ) Gains (Col (             | h) gain i<br>ess than | ninus<br>-0-) or                     |
| (i) F.M.V as of 12/31/69   | ļ .           | (j) Adjusted basis<br>as of 12/31/69                    |                 | xcess of col (i)<br>r col (j), if any |              |   |                 | Losses (fro                |                       |                                      |
| _a   | <u> </u>      |   |                 |                                       |              |   |                 |                            |                       |                                      |
| _b   | ↓             |   | _               |                                       |              |   |                 |                            |                       |                                      |
| <u>c</u>   |               |   |                 |                                       |              |   |                 |                            |                       |                                      |
| e e  | <del> </del>  |   |                 |                                       |              |   |                 |                            |                       |                                      |
|  | J             | C If goin, also enter                                   | in Dort L line  | <del></del>                           | 7            |   |                 |                            |                       | ···································· |
| 2 Capital gain net income or (net c  | apıtal loss)  | If gain, also enter If (loss), enter -0-                | in Part I, line | ,<br>e 7                              | }            | 2   |                 |                            |                       |                                      |
| 3 Net short-term capital gain or (lo   | ss) as defu   | `   |                 |                                       |              |   |                 |                            |                       |                                      |
| If gain, also enter in Part I, line 8,   |               |   | - (0).          |                                       | JI           |   |                 |                            |                       |                                      |
| If (loss), enter -0- in Part I, line 8   |               | 4040/->   | <b>D</b>        | TTana an Nat                          |              | 3   |                 |                            |                       |                                      |
| <del></del>  |               | ection 4940(e) for                                      |                 |                                       |              |   | tent inc        | ome                        |                       | NT / 2                               |
| (For optional use by domestic privat   | e tourioau    | ons subject to the section 4                            | 940(a) tax or   | i net mvestinent in                   | ICOME        | ; )   |                 |                            |                       | N/A                                  |
| If section 4940(d)(2) applies, leave t   | this part bla | ank.  |                 |                                       |              |   |                 |                            |                       |                                      |
| Was the foundation liable for the sec  | ction 4942    | tax on the distributable am                             | ount of any v   | ear in the base per                   | rıod?        |   |                 |                            |                       | Yes No                               |
| If "Yes," the foundation does not qua  |               |   | • -             | -                                     |              |   |                 |                            |                       |                                      |
| 1 Enter the appropriate amount in  | each colu     | nn for each year, see the in                            | structions be   | fore making any e                     | ntries       |   |                 |                            |                       |                                      |
| (a) Base period years Calendar year (or tax year beginn  | ına ın)       | (b)<br>Adjusted qualifying dist                         | ributions       | Net value of no                       | (c)<br>nchar | (c) Distribution ratio haritable-use assets (col. (b) divided by col. |                 |                            | itión ratio           |                                      |
| 2014   | <del></del>   |   |                 |                                       |              |   |                 | 1                          |                       |                                      |
| 2013   |               |   |                 |                                       |              |   |                 |                            |                       |                                      |
| 2012   |               |   |                 |                                       |              |   |                 |                            |                       |                                      |
| 2011   |               |   |                 |                                       |              |   |                 |                            |                       |                                      |
| 2010   | 1             |   |                 |                                       |              |   |                 | +                          |                       | ·                                    |
| 2 Total of line 1, column (d)  |               |   |                 |                                       |              |   |                 | 2                          |                       |                                      |
| 3 Average distribution ratio for the   | 5-year bas    | se period - divide the total o                          | n line 2 by 5,  | or by the number                      | of ye        | ars   |                 |                            |                       | <del></del>                          |
| the foundation has been in existe  | ence if less  | than 5 years  |                 |                                       |              |   |                 | 3                          |                       |                                      |
| 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5   |               |   |                 |                                       |              |   |                 |                            |                       |                                      |
| 4 Enter the net value of noncharita-   | ble-use as:   | sets for 2015 from Part X, I                            | ine 5           |                                       |              |   |                 | 4                          |                       |                                      |
|  | ble-use as:   | sets for 2015 from Part X, I                            | ine 5           |                                       |              |   |                 |                            |                       |                                      |
| 5 Multiply line 4 by line 3  |               |   | ine 5           |                                       |              |   |                 | 5                          |                       |                                      |
| 5 Multiply line 4 by line 3  |               |   | ine 5           |                                       |              |   |                 |                            |                       |                                      |
| <ul> <li>4 Enter the net value of noncharital</li> <li>5 Multiply line 4 by line 3</li> <li>6 Enter 1% of net investment incor</li> <li>7 Add lines 5 and 6</li> </ul> |               |   | ne 5            |                                       |              |   |                 | 5                          |                       |                                      |
| <ul><li>Multiply line 4 by line 3</li><li>Enter 1% of net investment incor</li></ul>   | me (1% of     | Part I, line 27b)                                       | ine 5           |                                       |              |   |                 | 5                          |                       |                                      |

|  |  | <u> </u>         |         |          | Page 4       |  |  |
|--|--|------------------|---------|----------|--------------|--|--|
|  | art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -   | see in           | stru    | ictio    | ns)          |  |  |
| 1a   | a 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)  |                  |         |          |              |  |  |
| b  | b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%   |                  |         |          | 0.           |  |  |
|  | of Part I, line 27b  | ٠                |         |          |              |  |  |
|  | 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-)  |                  |         |          | 0.           |  |  |
| 3  | Add lines 1 and 2  |                  |         |          | 0.           |  |  |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  |                  |         |          | 0.           |  |  |
| 5  | Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-   |                  |         |          | 0.           |  |  |
| 6  | Credits/Payments   |                  |         |          |              |  |  |
| а  | a 2015 estimated tax payments and 2014 overpayment credited to 2015  |                  |         |          |              |  |  |
| b  | b Exempt foreign organizations - tax withheld at source  |                  |         |          |              |  |  |
| C  | c Tax paid with application for extension of time to file (Form 8868)  |                  |         |          |              |  |  |
| d  | d Backup withholding erroneously withheld  |                  |         |          | _            |  |  |
| 7  | Total credits and payments Add lines 6a through 6d   |                  |         |          | 0.           |  |  |
| 8  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here 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   |                  |         |          | 0.           |  |  |
| 10   | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   |                  |         |          |              |  |  |
|  | Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11  |                  |         |          |              |  |  |
|  | art VII-A Statements Regarding Activities  |                  |         |          |              |  |  |
| 1a   | a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in   | L                |         | Yes      | No           |  |  |
|  | any political campaign?  | <u> </u>         | 1a      |          | X            |  |  |
| b  | b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?   | _                | 1b      |          | 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  |                  |         |          | Х            |  |  |
| c Did the foundation file Form 1120-POL for this year? |  |                  |         |          |              |  |  |
| d  | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  |                  |         |          |              |  |  |
|  | (1) On the foundation ▶ \$ 0 . (2) On foundation managers ▶ \$   |                  |         |          |              |  |  |
| е  | e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation  | 1                |         |          |              |  |  |
|  | managers ► \$O.  |                  |         |          |              |  |  |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS?  | <u> </u>         | 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 incorporation, or  |                  |         |          |              |  |  |
|  | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes   | L                | 3       |          | X            |  |  |
|  | a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  | / <b>&gt;</b>  - | 4a      |          | _ <u>X</u> _ |  |  |
|  | b If "Yes," has it filed a tax return on Form 990-T for this year?   | 'A  -            | 4b      |          | ₩-           |  |  |
| 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   |                  |         |          |              |  |  |
| Ь  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either   |                  |         |          |              |  |  |
|  | By language in the governing instrument, or      Restate to governing that a first with a government of that are more detailed with the state law.   |                  |         |          |              |  |  |
|  | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law   |                  | 6       | х        |              |  |  |
| remain in the governing instrument?                    |  |                  |         |          |              |  |  |
| ′  | 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       | X        |              |  |  |
| ٥.   | Formation and the formation of the forma |                  |         |          |              |  |  |
| 68   | a Enter the states to which the foundation reports or with which it is registered (see instructions)   | {                |         |          |              |  |  |
|  | NC   |                  |         |          |              |  |  |
| Đ  | 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)  | }                | 0 k     | х        |              |  |  |
| •  | of each state as required by General Instruction G? If "No," attach explanation  | <b> </b> -       | 8b      | <u> </u> |              |  |  |
| 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  | 1                | 0       |          | X            |  |  |
| 10   | year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV   | <br> -           | 9<br>10 |          | X            |  |  |
| 10   | 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  |                  |         |          |              |  |  |

| Pa         | art VII-A   Statements Regarding Activities (continued)   |               |         | <del>-</del> |
|------------|---|---------------|---------|--------------|
|            |   | T             | Yes     | No           |
| 11         | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of  | 1             | ·       |              |
|            | section 512(b)(13)? If "Yes," attach schedule (see instructions)  | 11            |         | Х            |
| 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            | Х       |              |
|            | Website address ► N/A   |               |         |              |
| 14         | The books are in care of ▶ OFFICE Telephone no ▶ 208-5  | 77-2          | 230     |              |
|            | Located at ► SAME AS PAGE 1, CHARLOTTE, NC ZIP+4 ►28  | 3277          |         |              |
| 15         | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here   |               | <b></b> |              |
|            | and enter the amount of tax-exempt interest received or accrued during the year   | N             | /A      |              |
| 16         | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,  |               | Yes     | No           |
|            | 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 the  |               |         |              |
|            | foreign country >   |               |         |              |
| Pa         | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required   |               |         |              |
|            | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.   |               | Yes     | No           |
| 18         | 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?  |               | 1       |              |
|            | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)   |               |         |              |
|            | a disqualified person?  |               |         |              |
|            | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  |               |         |              |
|            | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No   |               | 1       |              |
|            | (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 )  |               |         |              |
| t          | of the 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)?  N/A  | 1b            |         |              |
|            | Organizations relying on a current notice regarding disaster assistance check here  |               |         |              |
| C          | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected   | 4.            |         | v            |
| •          | before the first day of the tax year beginning in 2015?   | 1c            |         | <u>X</u>     |
| 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)):  At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning |               | }       |              |
| •          | before 2015? Yes X No   |               |         |              |
|            | If "Yes," list the years ▶ , , ,  |               |         |              |
| ١          | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect  |               |         |              |
| •          | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach  |               | 1       |              |
|            | statement - see instructions.)  N/A   | 2b            |         |              |
| c          | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here  |               |         |              |
|            | •   |               |         |              |
| 3 <i>a</i> | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time   |               |         |              |
|            | during the year?  |               | j       |              |
| b          | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after  |               |         |              |
|            | May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose  |               |         |              |
|            | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,  |               |         |              |
|            | Form 4720, to determine if the foundation had excess business holdings in 2015)  N/A  | 3b            |         |              |
| 4a         | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a            |         | X            |
| 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            |         | Х            |
|            |   | rm <b>990</b> | LPF     | 20151        |

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|---|-------------------|-----------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Manager Paid Employees, and Contractors (continued)   | s, Highly         |                 |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."   | <del></del>       |                 |
| (a) Name and address of each person paid more than \$50,000 (b)   | Type of service ( | c) Compensation |
| NONE  | -                 | <del></del>     |
|   |                   |                 |
|   |                   |                 |
|   |                   |                 |
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|   |                   |                 |
|   |                   |                 |
|   |                   |                 |
| Total number of others receiving over \$50,000 for professional services  | <b>&gt;</b>       | 0               |
| Part IX-A Summary of Direct Charitable Activities   |                   | <del></del>     |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information sucnumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | h as the Ex       | крепses         |
| 1 GRANTS TO CHARITABLE ORGANIZATIONS - NONE IN 2015   |                   |                 |
|   |                   |                 |
|   |                   | 0.              |
| 2   |                   |                 |
|   |                   |                 |
|   |                   |                 |
| 3   |                   |                 |
|   |                   |                 |
|   |                   |                 |
| 4   |                   |                 |
|   |                   |                 |
| Part IX-B Summary of Program-Related Investments  |                   |                 |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  | A                 | mount           |
| 1 N/A   |                   |                 |
| 1 27/11   |                   |                 |
|   |                   |                 |
| 2   |                   |                 |
|   |                   |                 |
|   |                   |                 |
| All other program-related investments See instructions  |                   |                 |
| 3   |                   |                 |
|   |                   |                 |
|   |                   | <del></del>     |
| Total. Add lines 1 through 3  | <u> </u>          | 0.              |
|   | Form !            | 990-PF (2015)   |

| Part X Minimum Investment Return (All of                         | domestic foundations must complete this part. Foreign foundations, see inst                              | tructions) |
|--|--|------------|
| 1 Fair market value of assets not used (or held for use) direct  | ly in carrying out charitable, etc., purposes  |            |
| Average monthly fair market value of securities                  | 1a   | 0.         |
| b Average of monthly cash balances                               | 1b   |            |
| c Fair market value of all other assets                          | 1c   |            |
| d Total (add lines 1a, b, and c)                                 | 1d   | 0.         |
| e Reduction claimed for blockage or other factors reported or    | 1 lines 1a and   |            |
| 1c (attach detailed explanation)                                 | 1e   0 .   |            |
| 2 Acquisition indebtedness applicable to line 1 assets           | 2  | 0.         |
| 3 Subtract line 2 from line 1d                                   | 3  | 0.         |
| 4 Cash deemed held for charitable activities Enter 1 1/2% of     | line 3 (for greater amount, see instructions)  |            |
| 5 Net value of noncharitable-use assets Subtract line 4 from     |  | 0.         |
| 6 Minimum investment return Enter 5% of line 5                   | 6  | 0.         |
|  | ns) (Section 4942(j)(3) and (j)(5) private operating foundations and certain do not complete this part.) |            |
| 1 Minimum investment return from Part X, line 6                  | 1  | 0.         |
| 2a Tax on investment income for 2015 from Part VI, line 5        | 2a   |            |
| b Income tax for 2015 (This does not include the tax from Pa     | art VI.) 2b  |            |
| c Add lines 2a and 2b  | 2c   | 0.         |
| 3 Distributable amount before adjustments Subtract line 2c f     | rom line 1   | 0.         |
| 4 Recoveries of amounts treated as qualifying distributions      | 4  | 0.         |
| 5 Add lines 3 and 4  | 5  | 0.         |
| 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  | 0.         |
| Part XII Qualifying Distributions (see instruc                   |  |            |
| 1 Amounts paid (including administrative expenses) to accom      | nplish charitable, etc., purposes:   |            |
| a Expenses, contributions, gifts, etc total from Part I, colum   |  | 0.         |
| b Program-related investments - total from Part IX-B             | [ 1b   | 0.         |
| 2 Amounts paid to acquire assets used (or held for use) direct   | tly in carrying out charitable, etc., purposes   |            |
| 3 Amounts set aside for specific charitable projects that satisf | y the.   |            |
| a Suitability test (prior IRS approval required)                 | 3a   |            |
| <b>b</b> Cash distribution test (attach the required schedule)   | 3b   |            |
| 4 Qualifying distributions Add lines 1a through 3b Enter he      | re and on Part V, line 8, and Part XIII, line 4  | 0.         |
| 5 Foundations that qualify under section 4940(e) for the redu    |  |            |
| income Enter 1% of Part I, line 27b                              | 5  | 0.         |
| 6 Adjusted qualifying distributions Subtract line 5 from line    | 4  | 0.         |
|  | (b), in subsequent years when calculating whether the foundation qualifies for the sect                  | tion       |

4940(e) reduction of tax in those years

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|   | 1-1                                   | (b)  | (6)         |                                       |
|---|---------------------------------------|--|-------------|---------------------------------------|
|   | (a)<br>Corpus                         | (b)<br>Years prior to 2014                       | (c)<br>2014 | <b>(d)</b><br>2015                    |
| 1 Distributable amount for 2015 from Part XI,   | · · · · · · · · · · · · · · · · · · · |  |             |                                       |
| line 7  | * * ***                               |  |             | 0.                                    |
| 2 Undistributed income, if any, as of the end of 2015   | g ' <del>(</del> > )                  | ψ"   |             |                                       |
| a Enter amount for 2014 only  |                                       |  | 0.          | <del> </del>                          |
| <b>b</b> Total for prior years.   |                                       | 0.   |             |                                       |
| 3 Excess distributions carryover, if any, to 2015   |                                       |  |             |                                       |
| a From 2010   |                                       |  |             |                                       |
| <b>b</b> From 2011  | ·                                     |  |             |                                       |
| c From 2012   |                                       |  |             |                                       |
| dFrom 2013  |                                       |  |             |                                       |
| e From 2014   |                                       |  |             |                                       |
| f Total of lines 3a through e   | 0.                                    | ,  |             |                                       |
| 4 Qualifying distributions for 2015 from  |                                       |  |             |                                       |
| Part XII, line 4 ►\$ 0.   |                                       |  |             |                                       |
| a Applied to 2014, but not more than line 2a  |                                       |  | 0.          |                                       |
| <b>b</b> Applied to undistributed income of prior   |                                       |  | <del></del> |                                       |
| years (Election required - see instructions)  | >                                     | 0.   |             |                                       |
| c Treated as distributions out of corpus  |                                       |  |             | ·                                     |
| (Election required - see instructions)  | 0.                                    |  | *           |                                       |
| d Applied to 2015 distributable amount  | <u> </u>                              | 7  |             | 0.                                    |
| e Remaining amount distributed out of corpus  | 0.                                    |  |             | <del></del>                           |
| •   | 0                                     |  |             | 0.                                    |
| 5 Excess distributions carryover applied to 2015<br>(If an amount appears in column (d), the same amount<br>must be shown in column (a))                          | <u> </u>                              |  |             |                                       |
| 6 Enter the net total of each column as<br>indicated below  |                                       |  |             |                                       |
|   | 0.                                    |  |             |                                       |
| 8 Corpus Add lines 3f, 4c, and 4e Subtract line 5   |                                       |  |             |                                       |
| b Prior years' undistributed income. Subtract   |                                       | 0.   |             |                                       |
| line 4b from line 2b  |                                       | <del>                                     </del> |             |                                       |
| 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  | ļ                                     | 0.   |             |                                       |
| d Subtract line 6c from line 6b Taxable   |                                       | 0.   |             |                                       |
| amount - see instructions   |                                       | U •  |             | · · · · · · · · · · · · · · · · · · · |
| e Undistributed income for 2014 Subtract line   |                                       | . ,  | 0.          |                                       |
| 4a from line 2a Taxable amount - see instr.   | <u> </u>                              |  |             |                                       |
| f Undistributed income for 2015 Subtract  |                                       |  |             |                                       |
| lines 4d and 5 from line 1. This amount must  |                                       |  |             | 0.                                    |
| be distributed in 2016  |                                       |  |             |                                       |
| 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   | 0                                     | •  |             |                                       |
| 9 Excess distributions carryover to 2016  | 0                                     |  |             |                                       |
| Subtract lines 7 and 8 from line 6a   | 0                                     | •  |             |                                       |
| 10 Analysis of line 9   |                                       |  |             |                                       |
| a Excess from 2011  | 4                                     |  |             |                                       |
| b Excess from 2012  | 4                                     |  |             |                                       |
| c Excess from 2013  | 4                                     | ļ  |             |                                       |
| d Excess from 2014  | 4                                     |  |             |                                       |
| e Excess from 2015  | 1                                     | 1  |             |                                       |

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| Part XV Supplem                | entary Information       | (continued)  |                                |                                  |        |
|--------------------------------|--------------------------|--|--------------------------------|----------------------------------|--------|
| 3 Grants and Contribu          | tions Paid During the Ye | ear or Approved for Future   | Payment                        |                                  |        |
| Name and address (             | vient                    | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|                                | · · · · · · · · ·        | or substantial contributor   | recipient                      |                                  |        |
| a Paid during the year         |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
| NONE                           |                          |  |                                |                                  |        |
|                                |                          |  | ŀ                              |                                  |        |
|                                |                          |  |                                |                                  |        |
| <del></del>                    | ·                        |  |                                |                                  |        |
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|                                |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                |                          |  | -                              |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
| Total                          |                          | -  |                                | <u>▶ 3a</u>                      | 0.     |
| <b>b</b> Approved for future p | payment                  |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
| NONE                           |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                | į                        |  |                                |                                  |        |
|                                | İ                        |  |                                |                                  |        |
|                                |                          |  |                                |                                  | •      |
|                                |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
|                                | 1                        |  |                                |                                  |        |
|                                | İ                        |  |                                |                                  |        |
|                                |                          |  |                                |                                  |        |
| Tabal                          |                          |  |                                | <u> </u>                         |        |
| Total                          | <del> </del>             |  |                                | <b>▶</b> 3b                      | 0.     |

| Part XVI-A | Analysis of Income-Producin    | a Activities |
|------------|--------------------------------|--------------|
| Fail AVI-A | Alialysis of illconfe-Froducin | g Activities |

| nter gross amounts unless otherwise indicated.              | Unrelated b                | usiness income        |  | by section 512, 513, or 514 | (e)                                   |
|---|----------------------------|-----------------------|--|-----------------------------|---------------------------------------|
| -   | (a)<br>Business            | ( <b>b)</b><br>Amount | Exclu-<br>sion                                   | (d)<br>Amount               | Related or exempt function income     |
| 1 Program service revenue                                   | code                       |                       | code   | Aillouit                    | Tunction income                       |
| a   |                            |                       |  |                             |                                       |
| b   |                            |                       | <u> </u>   |                             | ·                                     |
| C   |                            |                       |  |                             |                                       |
| d   |                            |                       |  |                             | · <del></del>                         |
| e   |                            |                       | <del>                                     </del> |                             |                                       |
| f   |                            |                       |  |                             |                                       |
| g Fees and contracts from government agencies               |                            |                       |  |                             |                                       |
| 2 Membership dues and assessments                           |                            |                       |  |                             |                                       |
| 3 Interest on savings and temporary cash                    | 1 1                        |                       |  |                             |                                       |
| investments   |                            |                       |  |                             |                                       |
| 4 Dividends and interest from securities                    |                            |                       |  |                             |                                       |
| 5 Net rental income or (loss) from real estate:             |                            |                       |  |                             |                                       |
| a Debt-financed property                                    |                            |                       |  |                             | <del></del>                           |
| <b>b</b> Not debt-financed property                         |                            |                       | 1  |                             |                                       |
| 6 Net rental income or (loss) from personal property        |                            |                       |  |                             |                                       |
| 7 Other investment income                                   |                            |                       |  |                             |                                       |
| 8 Gain or (loss) from sales of assets other than inventory  |                            |                       |  |                             |                                       |
| 9 Net income or (loss) from special events                  | ·                          |                       | 1 1  |                             | · · · · · · · · · · · · · · · · · · · |
| O Gross profit or (loss) from sales of inventory            |                            |                       |  |                             | ·                                     |
| 1 Other revenue   |                            |                       | 1  |                             | <del></del>                           |
| a   |                            |                       |  |                             |                                       |
| b   |                            |                       | 1  |                             |                                       |
| c   |                            |                       | 1 1  |                             |                                       |
| d   |                            |                       |  |                             |                                       |
| e   |                            |                       |  |                             |                                       |
| 2 Subtotal. Add columns (b), (d), and (e)                   |                            | 0                     | •  | 0.                          | 0                                     |
| 3 Total Add line 12, columns (b), (d), and (e)              |                            |                       |  | 13                          | 0                                     |
| See worksheet in line 13 instructions to verify calculation | ns )                       |                       |  |                             |                                       |
| Part XVI-B Relationship of Activiti                         | es to the Accom            | plishment of E        | xempt F  | Purposes                    |                                       |
| Line No Explain below how each activity for which           | i income is reported in ci |                       | A contribute                                     | d importantly to the accomp | lishment of                           |

| Line No           | the foundation's exempt purposes (other than by providing funds for such purposes) |
|-------------------|--|
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| Pai        | T XVII      | information Re<br>Exempt Organ  | •                    | isters to       | and I         | ransactions a          | and Relations                                     | snips with Noi              | icharitable                                      | 3                   |             |
|------------|-------------|---|----------------------|-----------------|---------------|------------------------|---|-----------------------------|--|---------------------|-------------|
| 1          | Did the or  | ganization directly or indi   |                      | of the follows  | o with a      | inv other organization | on described in sec                               | tion 501/c) of              |  | Yes                 | No          |
|            |             | gamzation directly of indi-<br>(other than section 501(c              |                      |                 |               |                        |   | 11011 30 1(0) 01            | l  |                     |             |
|            |             | from the reporting found  |                      |                 |               | -                      | iizations.  |                             | i  |                     |             |
|            |             | , .   | alion to a noncharia | inie everibi oi | yanızanı      | DIT OI                 |   |                             | 1a(1)  |                     | х           |
|            | (1) Cash    |   |                      |                 |               |                        |   |                             | 1a(1)  |                     | X           |
|            | (2) Other   |   |                      |                 |               |                        |   |                             | 14(2)  |                     | <del></del> |
|            | Other tran  |   | ble average organize | tion            |               |                        |   |                             | 15(1)  |                     | х           |
|            |             | of assets to a noncharita   | , -                  |                 |               |                        |   |                             | 1b(1)  | <del> </del>        | X           |
|            |             | nases of assets from a no   |                      | organization    |               |                        |   |                             | 1b(2)  | <u> </u>            | X           |
|            | . ,         | al of facilities, equipment,  |                      |                 |               |                        |   |                             | 1b(3)  |                     | X           |
|            | • •         | bursement arrangements  | ,                    |                 |               |                        |   |                             | 1b(4)  |                     | X           |
|            | • •         | s or loan guarantees  |                      |                 |               |                        |   |                             | 1b(5)  |                     | X           |
|            |             | rmance of services or me  | <u>=</u> '           | =               |               |                        |   |                             | 16(6)  | <u> </u>            | X           |
|            | _           | f facilities, equipment, ma   | • '                  |                 |               |                        |   |                             | 1c   |                     |             |
|            |             | wer to any of the above is  |                      | -               |               |                        |   |                             |  | eis,                |             |
|            |             | s given by the reporting f  |                      |                 | ea iess       | man tair market vait   | de in any transactio                              | n or snanng arranger        | nem, snow m                                      |                     |             |
| (a)Lir     |             | i) the value of the goods, (b) Amount involved                        |                      | f noncharitable | a avamn       | t organization         | (d) December                                      | n of transfers, transaction | no and abarina as                                |                     |             |
| 14)["      | 10 110      | (b) Amount involved   | (c) Name o           | N/A             | e exemp       | Corganization          | (0) Description                                   | n or transfers, transaction | ns, and sharing ai                               | angeme              |             |
|            |             |   | <del> </del>         | N/A             |               |                        | <del></del>                                       |                             | <del></del>                                      |                     |             |
|            |             |   | <del></del>          |                 |               |                        |   | <del></del>                 |  |                     |             |
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|            |             | <del></del>   | <del> </del>         |                 |               |                        | <del></del>                                       |                             |  |                     |             |
|            |             |   | <del> </del>         |                 |               | <del></del>            | <del></del>                                       |                             |  |                     |             |
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|            |             | <del></del>   | <del> </del>         |                 |               | <del></del>            | <del></del>                                       | <del></del>                 | <del></del>                                      |                     |             |
|            |             |   | <del> </del>         |                 |               |                        | <del>  `                                   </del> |                             |  |                     |             |
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|            |             |   | <del> </del>         |                 |               | <del></del>            | <del></del>                                       |                             |  |                     |             |
|            |             |   | <b></b>              |                 |               |                        |   |                             |  |                     |             |
|            |             |   | <del> </del>         |                 |               |                        |   |                             |  |                     |             |
|            |             | ndation directly or indirec<br>501(c) of the Code (othe               | •                    |                 |               |                        | izations described                                |                             | Yes  | X                   | <br>] No    |
|            |             | omplete the following sch   |                      |                 |               |                        |   |                             |  |                     |             |
|            |             | (a) Name of org   | janization           |                 | <b>(b)</b> Ty | pe of organization     |   | (c) Description of re       | lationship                                       |                     |             |
| -          | <del></del> | N/A   |                      |                 |               |                        |   |                             |  |                     |             |
|            |             |   |                      | •               |               |                        |   |                             |  |                     |             |
|            |             |   |                      |                 |               |                        | 1   |                             |  |                     |             |
|            |             |   |                      |                 |               |                        |   |                             |  |                     |             |
|            |             | ·   |                      |                 |               |                        |   |                             |  |                     |             |
| Sig<br>Hei | n and be    | penalties of perjury, I declare<br>slief, it is tue, correct, and cor |                      |                 |               |                        |   | r has any knowledge         | May the IRS of return with the shown below X Yes | e prepar<br>see ins | er          |
|            | Sigr        | ature of officer or trustee   |                      |                 |               | Date                   | Title   |                             | <u> </u>   |                     |             |
|            |             | Print/Type preparer's na  | ame                  | Preparer's s    | ignature      |                        | Date  |                             | PTIN   |                     |             |
|            |             |   |                      |                 |               |                        |   | self- employed              |  |                     |             |
| Pai        | -           | DAVID L. J  | OHNSON               | DAVID           | L. (          | JOHNSON                | 11/15/16  |                             | P00188   |                     |             |
|            | parer       | Firm's name ▶ DIX   | ON HUGHES            | GOODM           | IAN I         | LLP                    |   | Firm's EIN ► 5              | 6-07479  | 81                  |             |
| Use        | Only        |   |                      |                 |               |                        |   |                             |  |                     |             |
|            |             | Firm's address ▶ 14   |                      |                 |               |                        | 0   |                             |  |                     |             |
|            |             | TY  | SONS, VA             | 22102-          | 305           | <u> </u>               |   | Phone no. 70                | <u>3-970-0</u>                                   |                     |             |
|            |             |   |                      |                 |               | Form <b>99</b> (       | )-PF  | (2015)                      |  |                     |             |

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

➤ Attach to Form 990, 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

Employer identification number

2015

STEFAN & TANYA GLEASON FOUNDATION, INC. 81-0935860 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990 EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 Light 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-FF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA 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

Employer identification number

81-0935860

| SIBIA       | N & TANTA GERASON POONDATION, INC.                                |                            | 0993000  |
|-------------|---|----------------------------|--|
| Part I      | Contributors (see instructions) Use duplicate copies of Part I if | additional space is needed |  |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d) Type of contribution   |
| 1           | STEFAN AND TANYA GLEASON  PO BOX 49246  CHARLOTTE, NC 28277       | \$\$                       | Person X Payroll   |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c) Total contributions    | (d) Type of contribution   |
|             |   |                            | Person Payroll Noncash (Complete Part II for noncash contributions)                                |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution  |
|             |   | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions)                                |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d) Type of contribution   |
|             |   | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions)                                |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d) Type of contribution   |
|             |   | \$                         | Person Payroll Moncash Complete Part II for noncash contributions )                                |
| (a)<br>No   | (b)<br>Name, address, and ZIP + 4                                 | (c) Total contributions    | (d)<br>Type of contribution  |
| 523452 10-2 |   | \$Schedule B /Form         | Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2015) |

Employer identification number

## STEFAN & TANYA GLEASON FOUNDATION, INC.

81-0935860

| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|------------------------------|--|--|----------------------|
|                              |  | \$   |                      |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                              |  | \$   |                      |
| (a)<br>No.<br>from<br>Part I | (b) Description of noncash property given  | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                              |  | \$   |                      |
| (a) No. from Part I          | (b)  Description of noncash property given | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                              |  | \$   |                      |
| (a)<br>No.<br>from<br>Part I | (b) Description of noncash property given  | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                              |  | \$   |                      |
| (a)<br>No.<br>from<br>Part I | (b) Description of noncash property given  | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                              |  |  |                      |

| (e) Transfer of gift                    |  |  |  |  |
|---|--|--|--|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |

(a) No. from Part I

(d) Description of how gift is held

(c) Use of gift

(b) Purpose of gift

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 1

NAME OF MANAGER

STEFAN GLEASON TANYA GLEASON