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Form 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. Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. JUL 1 2015 JUN 30. 2016

For	alen	ndar year 2015 or tax year beginning JUL	1, 2015	, and ending	<u>JUN 30, 2016</u>	
Nar	ne of	foundation			A Employer identification	number
J	OH	N R. & HOPE REESE FOUND	ATION		13-3371584	
Nun	iber a	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
P	0	BOX 703			(212) 632-	6515
City	or to	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
-		UST VALLEY, NY 11560				
G	heck	all that apply: Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		_	
		Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test, mputation
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tue was terminated
	_		Other taxable private found	ation	under section 507(b)(1)	
1 Fa		arket value of all assets at end of year J Accounti		Accrual	F If the foundation is in a	
		· · · · · · · · · · · · · · · · · · ·	her (specify)		under section 507(b)(1)	
•		131,125. (Part I, colu	mn (d) must be on cash	basis.)	, , ,	<i>, ,,</i> ,
		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	32,829.	Jan (1997)	N/A	प्रस्ति हैं
	2	Check In the foundation is not required to attach Sch. B		A The second of	112 19 10 A117 604	
	3	Interest on savings and temporary cash investments	2.	2.		Statement 2
	4	Dividends and interest from securities	2,672.	2,672.		Stätement 3
	5a	Gross rents				18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Net rental income or (loss)	1 31 134 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ر المالية الما	10000000000000000000000000000000000000	19 3 19 1 19 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1
		Net gain or (loss) from sale of assets not on line 10	<3,051.		रकार अध्यक्षित्रमानुस	Statement 1
ᇐ	Ь	Gross sales price for all assets on line 6a 13, 163.	(1) 1 (1) 1	品的 经工具成本	"学习"的特别是参数	要認定が大き
Revenue	7	Capital gain net income (from Part IV, line 2)	1 4 1 15 1 1 1 1	1,395.	建设设施的设施	Superior Service
æ	8	Net short-term capital gain	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A. 18		医减弱 经生工
	9	Income modifications	Marie Control			All march on Army is all all
	10a	Gross sales less returns			位于 整心 指導性性	1. ディ にの経代制
	b	Less Cost of goods sold	25 25 35 34 2 34	2145 8 17 - 18 14 15	21.17年度,高空运用	维的特别代心。
		Gross profit or (loss)		7 - 7 - 7		祖老人, , , , , ,
	11	Other income				题的对于所有"·
	12	Total, Add lines 1 through 11	32,452.	4,069.		a librarian line in the
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
SC	14	Other employee salaries and wages				
Ø.	15	Pension plans, employee benefits				
As Second		Legal fees				
₹		Accounting fees				
٦'n		Other professional fees		RECEIVED		
 ⊃§	17	Interest				
Operating and Administrative Expense	18	Taxes	x	007.7	35	
is i	19	Depreciation and depletion	99038	UL! 14 2016	Y I	\$15 4 14 1/50
2 E	20	Occupancy	-		X S	
Adi	21	Travel, conferences, and meetings		DODEN UT		
P P	22	Printing and publications				
ga	23	Other expenses Stmt 4	265.	70.		195.
ij	24	Total operating and administrative				
er:	- •	expenses. Add lines 13 through 23	265.	70.		195.
ŏ	25	· · ·	17,000.			17,000.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	17,265.	70.		17,195.
	27					1 (
		Excess of revenue over expenses and disbursements	15,187.	·		
		Net investment income (if negative, enter -0-)		3,999.	,	17.44.1
		Adjusted net income (if negative, enter -0-)			N/A	
52350 11-24		LHA For Paperwork Reduction Act Notice, see i	instructions.			Form 990-PF (2015)

^	-	Balance Sheets Atlached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year	End o	of year
Pa	<u>π</u>	Balance Sneets column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	2,563.	1,134.	1,134.
		Accounts receivable			
-		Less: allowance for doubtful accounts			
	4	Pledges receivable			
	•	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
- 1	-	Receivables due from officers, directors, trustees, and other			
	U	disqualified persons			
İ	7			٠,	,
	7	Other notes and loans receivable	,	,	
	_	Less: allowance for doubtful accounts			
ਙ ∣		Inventories for sale or use			
SS		Prepaid expenses and deferred charges			
~ 1		Investments - U.S. and state government obligations	100 554	105.050	100 001
		Investments - corporate stock Stmt 6	120,754.	137,370.	129,991.
	C	Investments - corporate bonds			
1	1	Investments - land, buildings, and equipment, basis	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1-23. 9-12 3W	Trail - state
		Less accumulated depreciation			
1	2	Investments - mortgage loans			
1	3	Investments - other			
1	4	Land, buildings, and equipment; basis ▶		经一个的人的	हिन्दु भूतिहाल विकित्त हो।
		Less accumulated depreciation			
1	15	Other assets (describe ▶			
J		Total assets (to be completed by all filers - see the			-
'		instructions. Also, see page 1, item ()	123,317.	138,504.	131,125.
1	7	Accounts payable and accrued expenses			STATE OF THE STATE
- 1		Grants payable			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
١.	9	Deferred revenue			
. <u>.</u>	20				
<u>;</u> ₫		Loans from officers, directors, trustees, and other disqualified persons		· · · · · · · · · · · · · · · · · · ·	
멸 [2		Mortgages and other notes payable			
4		Other liabilities (describe)			
		T. A. I. P. B. Water (and d. base 47 Abrasiah 00)	0.	0.	
12	3_	Total liabilities (add lines 17 through 22)	U •		165 g - 15 m - 1
		Foundations that follow SFAS 117, check here			了一种的对方是这种的对方。 ·
9		and complete lines 24 through 26 and lines 30 and 31.			The office and it is
ဦ 2		Unrestricted			
듩 2	5	Temporarily restricted			
<u>2</u> 2	<u>'</u> 6	Permanently restricted			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ĕ		Foundations that do not follow SFAS 117, check here > X			
Ē		and complete lines 27 through 31.			
္က 2	7	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or Fund Balances	8	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
∛ 2	9	Retained earnings, accumulated income, endowment, or other funds	123,317.	138,504.	Statement 5
∌ 3	0	Total net assets or fund balances	123,317.	<u> 138,504</u> .	
_					
Э	1	Total liabilities and net assets/fund balances	123,317.	138,504	किर्देश के के के के किर्मान के कि
Pa			alances		
				— Т	T
		net assets or fund balances at beginning of year - Part II, column (a), line	JU		123,317.
		t agree with end-of-year figure reported on prior year's return)		1	
		amount from Part I, line 27a		2	15,187.
		increases not included in line 2 (itemize)		3	130 504
		ines 1, 2, and 3		4	138,504.
		eases not included in line 2 (itemize)	· · · ·	5	0.
s To	ntal.	not access or fund balances at end of year (line 4 minus line 5) - Part II or	olumn (h) line 30		138.504.

JOHN R. & HOPE REESE FOUNDATION

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Form 990-PF (2015) JOHI	N R. & HOPE REES	E FOUN	DATION			1	<u>3-331</u>	1584	Page 3
	and Losses for Tax on In		Income	10.11	 				
(a) List and descr 2-story brick wa	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P - Purchase D - Donation				Purchase	(c) Date (mo., d	acquired lay, yr.)	(d) Dat (mo., da	e sold ay, yr.)
						06/1	0/04	07/2	1/16
b 100 SHS WESTRO				<u> </u>	D		1/13	01/0	
c 600 SHS CYPRES		CORP			D	10/1	8/13	02/0	
_d									
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss s (f) minus		
a 4,213.	<u> </u>		4,08						<u> 132.</u>
b 4,510.			4,69						<188.
c 4,440.			2,98	19.	<u> </u>		_	1	<u>,451.</u>
d			·						
Complete only for accets showing	g gain in column (h) and owned by	the foundation	on 12/21/60	\dashv) C (C			
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1)			. (k), but i	Col. (h) gain not less thai (from col. (n -0-) or	
			(1),	\dashv			_		132.
b b				\dashv					<188.
<u> </u>	· · ·								,451.
d	· · · · · · · · · · · · · · · · · · ·								<i></i>
е									
Capital gain net income or (net cap	opital loss) { If gain, also enter if (loss), enter -0	in Part I, line	7	}	2			_ 1	,395.
3 Net short-term capital gain or (los	•			[_
If gain, also enter in Part I, line 8, o		(-).		1					
If (loss), enter -0- in Part I, line 8	1040()	<u> </u>	~		3		N/A	<u> </u>	
Part V. Qualification U						ome			
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	icome.)				
If section 4940(d)(2) applies, leave th	is part blank.								
Was the foundation liable for the secti	on AOA2 tay on the distributable am	ount of any ve	oar in the hace ner	rınd?				□ V _Φ ς	X No
If "Yes," the foundation does not quali			-						
1 Enter the appropriate amount in e				ntries.					
(a) Base period years	(b)			(c)	-		Dietrit	(d) oution ratio	
Calendar year (or tax year beginnin	ig in) Adjusted qualifying dis	tributions	Net value of no	nchari	table-use assets		(col. (b) div	rided by col.	(c))
2014		6,390.			113,528				<u> 20538</u>
2013		3,385.			99,696				<u>34868</u>
2012		8,680.			92,471				<u> 18293</u>
2011		7,835.			77,155				90377
2010		<u>1,935.</u>			75,429	•	r	. 4	<u> 23378</u>
C. Tatal of track and union (d)								1 0	071E1
2 Total of line 1, column (d)3 Average distribution ratio for the 5	waar haga pariad - disiida tha total c	on line 2 by 5	or by the number	of you	re	2		1.7	87454
the foundation has been in existen	·	JII IIIIE Z DY J,	or by the number	UI yea	13	3		3	97491
the foundation has been in existen	oc ii icaa tiidii o yedia		•			"			<i>7 1 4 7 1</i>
4 Enter the net value of noncharitable	e-use assets for 2015 from Part X, i	line 5				4		114	,908.
5 Multiply line 4 by line 3					-	5		45	<u>,675.</u>
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6			40.
7 Add lines 5 and 6						7		45	,715.
B Enter qualifying distributions from	Part XII, line 4					8			,195.
· · · · · · · · · · · · · · · · · · ·	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	tax rate.	<u> </u>			<u>,</u>
Coo wie r art vi man dellena.									

	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	<u>3 -</u> 18 -	33/1 See i	netr	ction	age 4
			366 1	- Isti u	CUO	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1				80.
	of Part I, line 27b		- 11			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	-	İ			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3				80.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	 _			<u>80.</u>
6	Credits/Payments:	• ,				
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 1,116.		- 13			
b	Exempt foreign organizations - tax withheld at source			•		
C	: Tax paid with application for extension of time to file (Form 8868)	ş	1 , , , ,	1	t.	
d	Backup withholding erroneously withheld 6d 5	2.4	رغو كالأنواد	~'T = .'	(4)	
7	Total credits and payments. Add lines 6a through 6d	7			1,1	16.
8	Enter any penalty 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	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1,0	36.
11		11				0.
	art 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 participate or intervene in				Yes	No
	any political campaign?			1a		X
ь	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		1 3 1		
	distributed by the foundation in connection with the activities.	_		Ji he	2023.	
c	Did the foundation file Form 1120-POL for this year?			1c	` ''	Х
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			21,12	17.5	
·	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$ 0.			· P. 1		`-
٥	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				100	
·	managers. > \$ 0.				, 	
9	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.			(195)	1 1	<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			美海		;
·	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
7a	of "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		7	5		Х
	If "Yes," attach the statement required by General Instruction T.		• •	200	43.0	, -
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				1	•
·	By language in the governing instrument, or			18. 1		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la 	w			,	-
		.17		6	′	X
-	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	Х	
7	bid the foundation have at least \$5,000 in assets at any time during the year? If Fes, Complete Fait II, Col. (c), and Fait XV			1 1/2	<u></u>	
٥.	Fater the adults to which the foundation reports or with which it is registered (see instructions)			17. 18	درجد د	
88	Enter the states to which the foundation reports or with which it is registered (see instructions)			N. 1		
	NY (4)			[]	, '	!
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)			ns '		
_	of each state as required by General Instruction G? If "No," attach explanation	ine.		86	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend	dГ		'.		v
	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 names and addresses		_ _	10	, D-	X
			FO	rm 99 0	/- PF	(2015)

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2015.)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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X

3ь

4a

Yes X No

N/A

during the year?

orm 990-PF (2015) JOHN R. & HOPE REESE FOU	NUATION	lo muiro d'	13-33/15	84 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be F	requirea (contin	ued)	
5à During the year did the foundation pay or incur any amount to:		<u> </u>		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indire			
any voter registration drive?	0		es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		[1]	'
4945(d)(4)(A)? (see instructions)		•	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		. []	
the prevention of cruelty to children or animals?	d 46		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit		III Regulations	NT / 3	-
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check to		unnd	- L- , ·	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?		I/A L Ye	es 🔛 No	
If "Yes," attach the statement required by Regulations section 53 494.	' '		ł	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	[es X No	4.6
a personal benefit contract?	arconal hanofit contract?	. L Y6		- 1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	rei zoniai nenenii contract.		 -	6b X
If "Yes" to 6b, file Form 8870	helter transaction?	[es 🗶 No	. w II
7a At any time during the tax year, was the foundation a party to a prohibited tax s	<u>-</u>	Y6	. –	7b
b if "Yes," did the foundation receive any proceeds or have any net income attribe Part VIII Information About Officers, Directors, Trust		nagers Highly		10
Paid Employees, and Contractors	cco, i cuitation Ma	magers, riigili	7	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
JOHN R. REESE	PRES / SEC-TR			
PO BOX 703				
LOCUST VALLEY, NY 11560	0.00	0.	0.	0.
IOPE REESE	VP			
PO BOX 703		,		
OCUST VALLEY, NY 11560	0.00	0.	0.	0.
		<u> </u>		
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	4.25
(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	(e) Expense account, other
	devoted to position		compensation	allowances
NONE				
		(1	
	<u> </u>		<u></u> -	
	L	<u> </u>		
otal number of other employees paid over \$50,000			_ _	0

Part VIII Information About Officers, Directors, Trustees, Foundarion		3371584 Page 7
Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter	or "NOME "	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	(b) Type of service	(C) Compensation
NONE		
<u> </u>		
<u></u>		
-		
		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	stical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc.	Expenses
1 N/A		
2		
3		
3		
4		
Dort IV:B C.		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year or	n lines 1 and 2	Amount
	i illes i allu Z.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.	ļ	
3		
Total. Add lines 1 through 3		0.

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	115,652.
ь	Average of monthly cash balances	1b	1,006.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	116,658.
е	Reduction claimed for blockage or other factors reported on 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	116,658.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,750.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	114,908.
6_	Minimum investment return Enter 5% of line 5	6	5,745.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	5,745.
2a	Tax on investment income for 2015 from Part VI, line 5		
ь	Income tax for 2015. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	80.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,665.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	5,665.
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	5,665.
P	art,XII Qualifying Distributions (see instructions)	-	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	-,1 148	4- 40-
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	17,195.
þ	Program-related investments - total from Part IX-B	15	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	49 1.	
8	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	17,195.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	17,195.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for	the section

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI, line 7			-	5,665.
2 Undistributed income, if any, as of the end of 2015		•		
a Enter amount for 2014 only			0.	
b Total for prior years:			,	
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 28,644.	•	,) ,*
b From 2011 34,657.		· · · · · · · · · · · · · · · · · · ·		Park to the first terms of the f
c From 2012 34,657.			, , , , , , , , , , , , , , , , , , ,	•
d From 2013 29,048.	•	;		,
e From 2014 31,242.			1 1 1 1	
f Total of lines 3a through e	158,248.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: \triangleright \$ 17, 195.			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	JA NO TO A
a Applied to 2014, but not more than line 2a	* * * * * * * * * * * * * * * * * * * *		<u>U.</u>	
b Applied to undistributed income of prior			() () () () () () () () () ()	
years (Election required - see instructions)	<u> </u>	<u> </u>	The section of the section of the	Party by the state of the state
c Treated as distributions out of corpus				भिन्निक भागी । जन्म
(Election required - see instructions)	0.	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 10 15 15 15 15 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	5,665.
d Applied to 2015 distributable amount	11 520	42, 647	The state of the s	5,665.
e Remaining amount distributed out of corpus	11,530.	The second secon	44. of 18 18 18 18 18 18 18 18 18 18 18 18 18	0.
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(30 20) 20 6 60 6 60 1 2 50 (30 100 00) 6 60 6 60 1 2 60 1 2 60	1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1
must be shown in column (a))				17.3
6 Enter the net total of each column as indicated below:				The same of the sa
	169.778			
Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income. Subtract	100,770.	1,7,5,,7	中心人物 经现代	A THE STATE OF THE
line 4b from line 2b		0.		
c Enter the amount of prior years'			1、1000年,1000年,1000年	The state of the s
undistributed income for which a notice of				in the second second
deficiency has been issued, or on which	The state of the s			Adding the form of the first of
the section 4942(a) tax has been previously assessed		0.	The second secon	Soften Comment
d Subtract line 6c from line 6b. Taxable	11 17 12			選点 とっかっ
amount - see instructions	3	0.	等,於於於國際、等以其	A STATE OF THE STA
e Undistributed income for 2014. Subtract line	John 1 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	100 3 100 3		
4a from line 2a. Taxable amount - see instr.	4.4	The second second	0.	· 1/2
f Undistributed income for 2015. Subtract	3"	D. 机氯酚 2%	中國民黨等等的原語	
lines 4d and 5 from line 1. This amount must			the state of the s	,
be distributed in 2016		* * * * * * * * * * * * * * * * * * * *	The same of the same	0.
7 Amounts treated as distributions out of				事業的資金
corpus to satisfy requirements imposed by			ا المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المر المراجع المراجع	Province at 1811
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010		1		' '
not applied on line 5 or line 7	28,644.	• • • • • • • • • • • • • • • • • • • •		
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	141,134.	· · · · · · · · · · · · · · · · · · ·		1 .
10 Analysis of line 9:	,			}::
a Excess from 2011 34,657.				P
b Excess from 2012 34,657.				1
c Excess from 2013 29,048.	• '			
d Excess from 2014 31, 242.				1, . 4.
e Excess from 2015 11,530.	<u>'</u>	<u> </u>	l	200 05

	& HOPE REE				371584 Page 10
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			▶ └		
b Check box to indicate whether the found	dation is a private operati	ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,				·	
line 4 for each year listed					
·					
d Amounts included in line 2c not	}]			
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c				-	
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter				-	-
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed			 		
c "Support" alternative test - enter:		:			
(1) Total support other than gross investment income (interest,		:			
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in				1	
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	_	than 2% of the total cor	tributions received by th	e foundation before the clo	ose of any tax
year (but only if they have contributed n					
JOHN R. REESE					
b List any managers of the foundation wh	a own 109/ or more of th	e atack of a paragration	/or an equally large part	on of the ownership of a	nortgerehin er
other entity) of which the foundation has			(or are equally large por	ion of the ownership of a p	partifership of
	, a 1070 or greater interes				
None					
2 Information Regarding Contributi					
Check here 🕨 📖 if the foundation o					
the foundation makes gifts, grants, etc.					d d
a The name, address, and telephone num	ber or e-mail address of t	he person to whom app	lications should be addre	essed:	
JOHN R. REESE, 212-6	32-6515				
PO BOX 703, LOCUST V	ALLEY, NY 1	1560			
b The form in which applications should b	e submitted and informati	tion and materials they s	hould include:		
LETTER FORM, DESCRIP				IVITIES	
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on awards					
TO ORGANIZATIONS ORG	ANIZED EXCL	USIVELY FO	R PURPOSES	PURSUANT TO	SEC. 501(C)

523601 11-24-15

Form **990-PF** (2015)

Form 990-PF (2015) JOHN R. & HOPE REESE FOUNDATION 13-3371584 Page 11

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CAUMSETT FOUNDATION		Public	UNRESTICTED	
200 HARBOR ROAD				
COLD SPRING HARBOR, NY 11724				1,000
GREEN-WOOD HISTORIC FUND		Public	UNRESTRICTED	
500 25TH STREET BROOKLYN NY 11232				2,000
500 St. 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
HOLY CROSS MONASTERY		Public	UNRESTRICTED	
РО ВОХ 99				
WEST PARK, NY 12493		<u> </u>		500
INTERNATIONAL TENNIS HALL OF FAME		Public	UNRESTRICTED	
194 BELLEVUE AVENUE				2,000
NEWPORT, RI 02840				2,000
MISS		Public	UNRESTRICTED	
4434 SE CLECKLEY WAY		Tabile	DIRESTRICTED	
STUART FL 34997		<u> </u>		500
Total See Co b Approved for future payment	ontinuation shee	et(s)	▶ 3a	17,000
,,				
None				
				
Total		<u></u>	> 3b	

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	Unrelated business income		ded by section 512, 513, or 514	(e)	
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
-			1			
	-	-	+-	· · · · · · · · · · · · · · · · · · ·		
 	i I		+			
<u> </u>		· · · · · · · · · · · · · · · · · · ·	+ +			
d	-	<u></u>				
e	-			·		
f	_					
g Fees and contracts from government agencies	<u> </u>					
2 Membership dues and assessments						
3 Interest on savings and temporary cash] }			
investments			14	2.		
4 Dividends and interest from securities	-		14	2,672.		
5 Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·	 			
	- -	<u> </u>				
a Debt-financed property			- 			
b Not debt-financed property	<u> </u>					
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other]]]			
than inventory			18	<3,051.	>	
9 Net income or (loss) from special events			1 - 1			
10 Gross profit or (loss) from sales of inventory			1 1			
11 Other revenue:		-	$+$ $ \downarrow$		<u> </u>	
a			-{{			
b					<u> </u>	
C	-					
d						
e						
12 Subtotal. Add columns (b), (d), and (e)	, '	0	· 124.3	<377.	> 0. <377.	
13 Total. Add line 12, columns (b), (d), and (e)				13	<377.	
(See worksheet in line 13 instructions to verify calculations.)				· -		
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which income the foundation's exempt purposes (other than	come is reported in	column (e) of Part XVI-		· · · · · · · · · · · · · · · · · · ·	nplishment of	
					Form 990-PF (2015)	

ın s	ection	501(c) of the Code (other than section	n 501(c)(3)) or in section 527?	•		Yes X No
_ b_lf"\	es," co	omplete the following schedule.				
		(a) Name of organization	(b) Type of organi	zation	(c) Description of re	lationship
		N/A				
Sign Here	and be	folio, it is true, correct, and complete Declarated folion IR Remarks	mined this return, including accompanying schedulin of preparer (other than taxpayer) is based on		Nes 1 Dent	May the IRS discuss this return with the preparer shown below (see instr)? Yes No
Paid	Sigi	ature of officer or trustee Print/Type preparer's name	Preparer's signature	Date		PTIN
Prepa Use C		Firm's name ▶	——————————————————————————————————————	I	Fırm's EIN ▶	·· ·
		Firm's address ▶		<u> </u>	Dhana na	

Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Employer identification number Name of the organization JOHN R. & HOPE REESE FOUNDATION 13-3371584 Organization type (check one). Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

JOHN R. & HOPE REESE FOUNDATION

13-3371584

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN R REESE PO BOX 703 LOCUST VALLEY, NY 11560	\$5,179.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JOHN R REESE PO BOX 703 LOCUST VALLEY, NY 11560	\$ <u>13,327.</u>	Person Payroli Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JOHN R REESE PO BOX 703 LOCUST VALLEY, NY 11560	\$14,323.	Person Payroll Noncash X (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)

Employer identification number

JOHN R. & HOPE REESE FOUNDATION

13-3371584

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	200 SHS ARRIS GROUP INC (ARRIS INTERNATIONAL PLC)					
		\$ 5,179.	09/01/15			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
2	100 SHS AVAGO TECHNONOGIES LTD (BROADCOM LTD)					
		\$ 13,327.	12/03/15			
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
3	500 SHS SPARTANNASH CO					
		s14,323.	04/01/16			
(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			
523453 10-26	-15	Schedule B (Form S	190, 990-EZ, or 990-PF) (2015)			

Schedule B	(Form 99	0 990-FZ	or 990-PF	(2015)
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Page 4

	ì						
JOHN R. & HOPE REESE FOUNDATION	13-3371584						
Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(i) the year from any one contributor. Complete columns (a) through (e) and the following line entry for	7), (8), or (10) that total more than \$1,000 for						
completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter	this info once) > \$						
Use duplicate copies of Part III if additional space is needed. (a) No.							
	(d) Description of how gift is held						
(e) Transfer of gift							
Transferee's name, address, and ZIP + 4 Relationsh	ip of transferor to transferee						
	·						
(a) No. from (b) Purpose of gift (c) Use of gift	(d) Description of how gift is held						
Part I							
(a) Transfer of city							
(e) Transfer of gift							
Transferee's name, address, and ZIP + 4 Relationsh	ip of transferor to transferee						
(a) No. from (b) Purpose of gift (c) Use of gift	(d) Description of how gift is held						
Part I							
(a) Transfer of with	·· ·						
(e) Transfer of gift							
Transferee's name, address, and ZIP + 4 Relationsh	ip of transferor to transferee						
							
(a) No. from (b) Purpose of gift (c) Use of gift	(d) Description of how gift is held						
Part I							
(e) Transfer of gift	(e) Transfer of gift						
Transferee's name, address, and ZIP + 4 Relationsh							
	ip of transferor to transferee						
	ip of transferor to transferee						
	ip of transferor to transferee						

Part XV Supplementary Information		· · · · · · · · · · · · · · · · · · ·		1
3 · Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		<u> </u>
NORTH SHORE LAND ALLIANCE		Public	UNRESTRICTED	
151 POST ROAD			1	
WESTBURY, NY 11568				1,000
ST JOHN'S CHURCH		Public	UNRESTRICTED	
1670 NY 25A				5,000
COLD_SPRING HARBOR, NY 11724				5,000
JUPITER MEDICAL CENTER		Public	UNRESTRICTED	
1210 S OLD DIXIE HIGHWAY				
JUPITER FL 33458				500
SUMMER SEARCH		Public	UNRESTRICTED	
PO BOX 39000 DEPT 34425				
SAN FRANCISCO, CA 94139	<u> </u>	 	- 	500
EAST HARLEM SCHOOL		Public	UNRESTRICTED	
309 EAST 103RD STREET				
NEW YORK, NY 10029		<u> </u>		2,000
UNIVERSITY OF PENNSYLVANIA		Public	UNRESTRICTED	
801 SPRUCE STREET				1 000
PHILADELPHIA, PA 19107				1,000
PACKER COLLEGIATE INSTITUTE		Public	UNRESTRICTED	
170 JORALEMON STREET		T ubit	DARESTRICIES	
BROOKLYN, NY 11201		<u> </u>		500
SAMARITAN CENTER YOUNG BOYS AND		Public	UNRESTRICTED	
FAMILIES				
1490 SE COVE ROAD				
STUART, FL 34997			- 	500
Total from continuation sheets				11,000

Form 99	00-PF G	ain or (Loss) f	rom Sale	of A	ssets		Statement 1
Descrip	(a) otion of Property				anner quired	Date Acquir	ed Date Sold
50 SHS	ISHARES BARCLAY	1-3 YEAR TREAS		Pur	chased	06/10/	04 07/21/16
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c. G	(f) ain or Loss
	4,213.	4,081.		0.		0.	132.
Descrip	(a) otion of Property				lanner quired	Date Acquir	ed Date Solo
100 SHS	WESTROCK CO	_		Do	nated	11/01/	13 01/04/16
	(b) Gross	(c) Value at	(d) Expense	of	(e)		(f)
	Sales Price	Time of Acq.	Sale		Depre	c. G	ain or Loss
	4,510.	6,975.		0.		0.	<2,465.
Descrip	(a) otion of Property				anner quired	Date Acquir	ed Date Sold
600 SHS	CYPRESS SEMICON	DUCTOR CORP		Do	nated	10/18/	02/02/16
	(b) Gross	(c) Value at	(d) Expense	of	(e)		(f)
	Sales Price	Time of Acq.	Sale		Depre	c. G	ain or Loss
	4,440.	5,158.		0.		0.	<718.
Capital	Gains Dividends	from Part IV					0.
		art I, line 6a					<3,051.

Form 990-PF	Interest	on	Savings	and T	emporary	Cash	Investments	Statement	2
Source					(a) venue Books	Net	(b) Investment Income	(c) Adjusted Net Income	
MONEY MARKET			_		2.		2.		
Total to Part I, line 3		2.		2.			_		

Form 990-PF	Dividends	and Interest	from Secur	ties Statement 3		
Source	Gross Amount	Capital Gains Dividends	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	
BROADCOM LTD CYPRESS	143.	0.	143.	143.		
SEMICONDUCTOR	198.	0.	198.	198.		
EXXON MOBIL CORP INTERNATIONAL BUSINESS MACHINE	1,029.	0.	1,029.			
CORP	371.	0.	371.	371.		
ISHARES TRUST	26.	0.	26.	26.		
JOHNSON & JOHNSON	305.	0.	305.	305.		
ROCK TENN CO	525.	0.	525.	525.		
SPARTANNASH CO	75.	0.	75.	75.		
To Part I, line 4	2,672.	0.	2,672.	2,672.		

Form 990-PF	Other Expenses			tatement 4
Description	(a)	(b)	(c)	(d)
	Expenses	Net Invest-	Adjusted	Charitable
	Per Books	ment Income	Net Income	Purposes
NEW YORK STATE FILING FEE	50.	0.		50.
NOTICE OF AVAILABILITY	145.	0.		145.
BROKERAGE FEES	70.	70.		0.
To Form 990-PF, Pg 1, ln 23	265.	70.		195.

Form 990-PF Other Fu	inds	Statement 5
Description	(A) Beginning of Year	(B) End of Year
Endowment Fund	123,317.	138,504.
Total to Form 990-PF, Part II, line 29	123,317.	138,504.

Form 990-PF Corporate Stock	ς	Statement	6
Description	Book Value	Fair Market Value	t
IShares Trust	4,081.	4,20	66.
JOHNSON & JOHNSON	6,470.	12,13	30.
EXXON MOBIL CORP	31,703.	32,8	09.
INTERNATIONAL BUSINESS MACHINES CORP	13,876.	10,6	25.
ARRIS GROUP	25,709.	18,8	64.
WESTROCK CO	18,801.	11,60	61.
IRIDIUM COMMUNICATIONS	6,956.	7,1	04.
BROADCOM LTD	13,327.	15,5	40.
INGEVITY CORP	2,124.	1,70	02.
SPARTANNASH CO	14,323.	15,29	90.
Total to Form 990-PF, Part II, line 10b	137,370.	129,99	91.