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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

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

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

Fo	r cale	endar year 2015 or tax year beginning JUI	1, 2015	, and ending	JUN 30, 2016	
N	lame (of foundation			A Employer identification	number
	THE	E JOHN AND CHARLENE ROBE	ERTS FAMILY			
	FO	UNDATION, INC.			23-3101766	
_		and street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	
	C/C	D.J. WINKOWSKI, ESQ.,	30 VALLEY ST	r l	(610) 640-	5800
		town, state or province, country, and ZIP or foreign i			C If exemption application is p	
		LVERN, PA 19355	Joseph Joseph		i exemption approaches to p	onang, anoarmas p
_		ck all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
٠	01100	Final return	Amended return	ormor public charty	Transfer organization	,
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
	Char	ck type of organization: X Section 501(c)(3) e		-	1	
- "c	_	Section 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	E If private foundation sta under section 507(b)(1)	
			ing method: X Cash	Accrual	1	
			•	LJ Acciual	F If the foundation is in a	
	irom ►\$	Part II, col. (c), line 16)	ther (specify)	hacie l	under section 507(b)(1)	(b), check here
			T	Ī		(d) Disbursements
LF	art	The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		necessarily equal the amounts in column (a))	 			(cash basis only)
	1	. []	75,000.	ر بوده و به الله الله الله الله الله الله الله ا	N/A	The state of the s
	2	Check fithe foundation is not required to attach Sch. B. Interest on savings and temporary	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6-34, 4-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
	3	cash investments				- 1
	4	Dividends and interest from securities	6,874.	6,874.		STATEMENT 1
	5	a Gross rents .		10 mg/r, - o 10, - 91 Mg	_9	
] 1	Net rental income or (loss)	Manage Con-			
	ր 6	Net gain or (loss) from sale of assets not on line 10	6,105.			
Ş		b Gross sales price for all assets on line 6a 97,949.			Same of the state	ALL THE WAR WAS TO THE PARTY OF
	5 7	Capital gain net income (from Part IV, line 2)	元朝清·清·武安 (1757)	6,105.		The state of the s
۵	8	Net short-term capital gain				
	9	Income modifications		The state of the s		
	10:	Gross sales less returns and allowances				
	Ι.	D Less Cost of goods sold	134 3 3 3 3 4 4 5	1. 16 to 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
	1 6	Gross profit or (loss)			11	
	11	Other income			11 11 11 11 11 11	
	12	Total. Add lines 1 through 11	87,979.	12,979.	101	·学·三维教员、注:
	13	Compensation of officers, directors, trustees, etc	0.	0.	CI NUV 15 22	. 701 O.
	14	Other employee salaries and wages			I. EU	19 12:11
	15			1	Ma.	1.3
2D 8	?	a Legal fees STMT 2	2,442.	2,442		0.
ADD NOT THE STATE OF THE STATE	<u> </u>	Accounting fees			· W	7 /
	}	Other professional fees STMT 3	927.	927.		0.
	18	Taxes STMT 4	181.	0.		0.
	19	Depreciation and depletion				
Z	20	Occupancy				8.7.1
	21	Travel, conferences, and meetings				
-1 P	– .					
_ @		Printing and publications				
ي د	23	Other expenses				
SUUC A	24	Total operating and administrative	2 550	2 260		
ي دو	i. 	expenses. Add lines 13 through 23	3,550.	3,369.		0.
J	23	Contributions, gifts, grants paid	48,830.	ANTERIA THE TENERS OF FRANCE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	48,830.
	26	Total expenses and disbursements.		2 262		40.000
	ļ	Add lines 24 and 25	52,380.	3,369.	The state of the s	48,830.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	35,599.	1 1 1 1 1 1		
	b	Net investment income (if negative, enter -0-)	2 1 2	9,610.		
	l c	Adjusted net income (if negative, enter -0-)			N/A	In the state of th

LHA For Paperwork Reduction Act Notice, see instructions.

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THE JOHN AND CHARLENE ROBERTS FAMILY FOUNDATION. 23-3101766 Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value -3. Cash - non-interest-bearing 7,556. 6.522. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts ▶ 4 Pledges receivable ▶ Less: allowance for doubtful accounts Grants receivable 6 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 decreciation 12 Investments - mortgage loans STMT 5 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) 278,262. 313,861 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted **▶** 🗓 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 278,262 313,861 29 Retained earnings, accumulated income, endowment, or other funds 278,262 30 Total net assets or fund balances 278,262 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) 278,262. Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 313,861

523511

313,861 Form 990-PF (2015)

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Page 3

	Part IV Capital Gains ar	nd Losses for Tax on In	vestmen	t Income						
		e the kınd(s) of property sold (e.g. house; or common stock, 200 shs			(b) F	low acc - Purch - Dona	quired ase tion		acquired day, yr.)	(d) Date sold (mo., day, yr.)
18										
_1		STATEMENTS			↓					
	·				 					
_	<u> </u>				 					
_	(e) Gross sales price	(f) Depreciation allowed		st or other basis	L				Sain or (loss)	
_		(or allowable)	plus e	expense of sale				(e) più	s (f) minus (9)
					-					
										
_					\dashv			-	.	
_	05 040			91,84	4			-		6,105.
_	Complete only for assets showing of	gain in column (h) and owned by t	he foundation				(1	Gains (0	Col. (h) gain	
_		(j) Adjusted basis		cess of col. (1)				(k), but	not less than	1 -0-) or
	(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any				Losses	(from col. (n))
_a	1									
b)									
_0					.					
d										6 105
_e					-					6,105.
2	Capital gain net income or (net capital	If gain, also enter			}	2				6,105.
	, , ,	, ((),			· 기누					0,103.
3	Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, col		d (6):		٦ [
	If (loss), enter -0- in Part I, line 8				 	3			N/A	
F	Part V Qualification Und	der Section 4940(e) for	Reduced	Tax on Net	Inve	estm	ent Inc	ome		
(Fo	or optional use by domestic private fo	undations subject to the section 4	940(a) tax on	net investment in	come	.)				
If c	section 4940(d)(2) applies, leave this	nart hlank								
	as the foundation liable for the section				lod?	-				Yes X No
1	Yes," the foundation does not qualify Enter the appropriate amount in each				ntrine					
÷	(a)		Sti uctions be	iore making any e		•			·	(d)
	Base period years Calendar year (or tax year beginning i	(b) Adjusted qualifying dist	ributions	Net value of no	(c) nchari	itable-u	se assets		Distrib	ùtion ratio ided by col. (c))
_	2014		8,069.			331	1,416		(0011 (1) 011	.265736
	2013		4,299.				286			.239453
_	2012		2,206.				781			.261824
	2011		1,879.				1,980			.117211
	2010		7,000.				3,709			.093520
2	Total of line 1, column (d)							. 2		.977744
3	Average distribution ratio for the 5-ye	ear base period - divide the total o	n line 2 by 5,	or by the number	of yea	ars				
	the foundation has been in existence	if less than 5 years			-			3_		.195549
4	Enter the net value of noncharitable-u	use assets for 2015 from Part X, li	ne 5					4	ļ	<u>325,907.</u>
_								_	1	62 524
5	Multiply line 4 by line 3							5		63,731.
^	Enter 10/ of not investment record (10/ of Double time 07h)								0.6
ь	Enter 1% of net investment income (1% of Part I, line 270)						6	 	96.
7	Add lines 5 and 6							7		63,827.
'	riuu iiiicə v aitu v .		•						 	03,041.
8	Enter qualifying distributions from Pa	irt XII, line 4						8		48,830.
	If line 8 is equal to or greater than line	e 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	6 tax ra	te.			
	See the Part VI instructions.	<u> </u>		· · · · · · · · · · · · · · · · · · ·						

THE JOHN AND CHARLENE ROBERTS FAMILY 23-3101766 Form 990-PF (2015) FOUNDATION, INC Part VI | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 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% of Part I, line 27b 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-) Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 **b** Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached R 192. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 10 Enter the amount of line 10 to be: Credited to 2016 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV X

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8**b**

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

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)

year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

FOUNDATION, INC.

orr	n 990-PF (2015) FOUNDATION, INC. 23-3103	<u> 1766</u>		Page 5
P	art VII-A Statements Regarding Activities (continued)			
	,		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1 1		
• •	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		- T
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A			
14	The books are in care of ▶ DAVID J. WINKOWSKI, ESQUIRE Telephone no. ▶ (484)	323	<u>-13</u>	<u>47</u>
	Located at ▶30 VALLEY STREAM PARKWAY, MALVERN, PA ZIP+4 ▶19	355		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16			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	14.15		352 3
	foreign country	74.5		10 mm 1
P	art.VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 5	A. ' y v " <u>u</u> '	/ A -XI
			Voc	No
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	200	Yes	No
1a	During the year did the foundation (either directly or indirectly):			1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	23a		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			F-247
	a disqualified person? Yes X No	12 mg 1 mg	* \$\frac{1}{2} \frac{1}{2} \fr	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	100		~ F,5.4.
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	- 12	178). 1884	3.4
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1
	for the benefit or use of a disqualified person)?	3 -38 1 x 3	##	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	2		DE TH
	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.)	1.5		
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fall to qualify under the exceptions described in Regulations	7 4 4 14 14 14 14 14 14 14 14 14 14 14 14	Sec. 18	-0,
-	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	× ";" -	
	Organizations relying on a current notice regarding disaster assistance check here	1,8 (2.1)	7~ <u>.j.</u> -	·
_				
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		:LET	37
_	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	1 2	`#\\ `#\\\	5-7 T. 212
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	12 ² 1		
	before 2015?		18	334
	If "Yes," list the years \blacktriangleright			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	- 53:		14
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2ь		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		ŠIŽ.	1 × 3 ·
_	>	. Ū.,		
22	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1	100	2 - 16
υa	during the year?	1 1	YE	
L		5 22 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
D	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	7, 1		#\'`` #' 355
	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,	التنتية ا	19	12 3 C
	Form 4720, to determine if the foundation had excess business holdings in 2015.)	3b		
	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			التنفذ
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
	Fo	rm 990	-PF(2015)

Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Paid Employees, and Contractors (continued)	Foundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If no	one, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		. ▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include rele	evant statistical information such as the	- Francisco
number of organizations and other beneficiaries served, conferences convened, research p	apers produced, etc.	Expenses
1 <u>N/A</u>		
2		
		-
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the ta	ax year on lines 1 and 2.	Amount
1N/A		
2		
2	-	
All other program-related investments. See instructions. 3		

<u>o.</u>

Total. Add lines 1 through 3

FOUNDATION, INC.

<u>. </u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e 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	321,881.
b	Average of monthly cash balances	1b	8,989.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	330,870.
е	Reduction claimed for blockage or other factors reported on lines 1a and	<u> </u>	
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	330,870.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,963.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	325,907.
6	Minimum investment return. Enter 5% of line 5	6	16,295.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	16,295.
	Tax on investment income for 2015 from Part VI, line 5	Fig.	
b	Income tax for 2015. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	192.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16,103.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	16,103.
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	16,103.
P	Qualifying Distributions (see instructions)	1	20/2000
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	Marina (M	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	<u> 1a</u>	48,830.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	Sign. The room of the sign of	
а	Suitability test (prior IRS approval required)	3a	
b	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	48,830.
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	48,830.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for th	e section

Form **990-PF** (2015)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,			-	-
line 7	-			16,103.
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 12,868.				
b From 2011 18,522.				
c From 2012 59,005.				
dFrom 2013 59,187.				
e From 2014 71,860.				
f Total of lines 3a through e	221 442			
4 Qualifying distributions for 2015 from	221, 442.			
Part XII, line 4: ►\$ 48,830.				
a Applied to 2014, but not more than line 2a			شب همده مستا طمانات معادد المادية الما مادية المادية	
b Applied to undistributed income of prior	CALLERY AND	<u>, , , , , , , , , , , , , , , , , , , </u>		
years (Election required - see instructions)		n		
c Treated as distributions out of corpus	**************************************	** 1.7° () 1.7% (
(Election required - see instructions)	0.		A CONTRACTOR OF THE	
d Applied to 2015 distributable amount				16,103.
e Remaining amount distributed out of corpus	32,727.	will do him the service of the service of		10,103.
_	32,727.		The second of th	U
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	254,169.			
b Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			0.
7 Amounts treated as distributions out of	İ			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.		Salar S	
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	12,868.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	241,301.			
0 Analysis of line 9:				
a Excess from 2011 18,522.				
b Excess from 2012 59,005.				
c Excess from 2013 59,187.				
d Excess from 2014 71,860.				
e Excess from 2015 32,727.				

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

Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

SEE STATEMENT

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here \(\sum \big| \sum \) If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:
- b The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form **990-PF** (2015)

Form 990-PF (2015) FOUNDATION, INC.

Part XV Supplementary Information (continued)

Part XV Supplementary Information		_		
3 Grants and Contributions Paid During the		Payment		
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
	or substantial contributor	recipient		
a Paid during the year				
PROJECT HOME	N/A	501 (C)(3)	GRANT TO ANOTHER	
1515 FAIRMOUNT AVENUE		ORGANIZATION	501(C)(3) ORGANIZATION	
PHILADELPHIA, PA 19130				50
BOYS & GIRLS CLUB OF MARTIN COUNTY	N/A	501 (C)(3)	ANNUAL CAMPAIGN	
11500 SE LARES AVENUE		ORGANIZATION		
HOBE SOUND, FL 33455				1,000
CARON FOUNDATION	N/A	501 (C)(3)	GRANT TO ANOTHER	
244 EAST 58TH STREET		ORGANIZATION	501(C)(3) ORGANIZATION	40.00
NEW YORK, NY 10022				10,000
J. WOOD PLATT SCHOLARSHIP TRUST	N/A	501 (C)(3)	GRANT TO ANOTHER	
1974 SPROUL ROAD		ORGANIZATION	501(C)(3) ORGANIZATION	2 42
BROOMALL, PA 19008				2,430
FAITH IN THE FUTURE	N/A	501 (C)(3)	GRANT TO ANOTHER	
550 AMERICAN AVENUE, SUITE 300		ORGANIZATION	501(C)(3) ORGANIZATION	5,000
KING OF PRUSSIA, PA 19406 Total SEE CC	NTINUATION SHE	Eጥ(S)	. ▶ 3a	48 830
b Approved for future payment	2X1 11X0711 1 01X			40,030
NONE				
NONE				
Total		· · · · · · · · · · · · · · · · · · ·	▶ 3b	n 990-PF (201
			Forr	n 990-PF

Analysis	of Incor	na-Produc	ina Activitio	_

Enter gross amounts unless otherwise indicated.	Unrelated	usiness income		led by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	0000		1		
b			1 1		
c			1 1		
d			1 1		
e	l i				
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			<u> </u>		
4 Dividends and interest from securities			14	6,874.	o nasidia, politich - Mahammatolikok diseasid bibera, med
Net rental income or (loss) from real estate:				是是沒有事業	
a Debt-financed property					
b Not debt-financed property				·	
6 Net rental income or (loss) from personal					
property		···			
7 Other investment income					1
8 Gain or (loss) from sales of assets other			1 1 0	C 10F	
than inventory			18	6,105.	
9 Net income or (loss) from special events			+		
Officer specific Grant G			1 1		
1 Other revenue:					
a	·		1		
b	!	· · · · · · · · · · · · · · · · · · ·	 		
C	i I	· · · ·			
d					
2 Subtotal. Add columns (b), (d), and (e)	28 25 23 25 25 2	0	* * * * * * * * * * * * * * * * * * *	12,979.	0
B Total. Add line 12, columns (b), (d), and (e)					4.4 4.4
Relationship of Activities	to the Accom	nolishment of E	xemot	Purposes	
· · · · · · · · · · · · · · · · · · ·					nplishment of
ine No. Explain below how each activity for which inc					
ine No. Explain below how each activity for which inc the foundation's exempt purposes (other than	by providing funds	101 30011 parposso).			
	n by providing funds	Tot Such purpoccoj.			
	n by providing funds		-		
	n by providing funds	Tot Substitution of the Control of t	-		
	n by providing funds	Tot Scott Pulpeccoj.			
	n by providing funds	Total Scott Pulpocoops			
	n by providing funds	Tot score purposcopi			
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	n by providing funds				

523621 11-24-15

Page 13

Form 9	90-PF (2015) FOUND	ATION, II	NC.					23-	-31017	66	Pag	je 13
Part	XVII				and Transa	ctions a	nd Rel	ations	hips With No	oncharita	able	_	
	•	Exempt Organ											
1 D	id the o	rganization directly or indi	rectly engage in any	of the following	ng with any other	r organizatio	n describ	ed in sec	tion 501(c) of		<u> </u>	'es	No
th	e Code	(other than section 501(c))(3) organizations) (or in section 52	27, relating to po	ilitical organi	izations?					- 1	
a Tr	ansfers	from the reporting found	ation to a noncharit	able exempt or	ganization of:							- 1	
) Cash									1	a(1)	_	X
•	•	r assets			•					1	a(2)		X
-	-	nsactions;	•			•			·				
		s of assets to a noncharita	hle exempt organiza	ation						11	b(1)		X
		hases of assets from a no				•					b(2)		X
•	•	al of facilities, equipment,		or garrization		•	•		•	• •	b(3)		X
•	•	ai or iacilities, equipment, ibursement arrangements		• •	•				• •		b(4)	_	X
•	•	•			•	•				· -	b(5)	_	X
	•	s or loan guarantees				•			•	<u> </u>		-	X
•	•	ormance of services or me						-			b(6)	\dashv	X
	-	of facilities, equipment, ma									1c		
		wer to any of the above is										s,	
		es given by the reporting fo				market value	e in any tr	ansactioi	n or snaring arrang	jement, snov	/ In		
	_ r ·	d) the value of the goods,					- 1						
(a) Line	no	(b) Amount involved	(c) Name o		e exempt organiz	zation	(d)	Description	n of transfers, transact	tions, and share	ng arrar	gemen	ts
				N/A									
							_						
			_				<u> </u>						
							<u> </u>						
							<u> </u>					_	
							<u> </u>						
							<u> </u>		· 				
-		-											
2a is	the four	ndation directly or indirect	ly affiliated with, or	related to, one	or more tax-exe	mpt organiz	zations de	scribed					
		501(c) of the Code (other	•	•							Yes	X	No
		omplete the following sche		,(o,, o cco.					• •				
	100, 0	(a) Name of orga			(b) Type of or	anization			(c) Description of	relationship			
		N/A			(4)	,			Y. <u>f</u>	· · · · · · · · · · · · · · · · · · ·			
		14/11									-		
			**										
													
	Under	penalties of perjury, I declare t	hat I have examined the	s return, includin	a accompanying so	thedules and s	statements.	and to the	best of my knowledg	e			
Sign		lief, it is true, correct, and com								return w	ith the p	reparer	
Here		Pharley	K Kal		1 //-	4-16	A	ク	1-	shown b	elow (se	einstr)?
	Curr	(Martine,	1. 140	ers.		/ /6		resu	aon	[X]	Yes	ш	No
	Sign	ature of officer or trustee		10	Date		Title		Chack I I if	PTIN			
		Print/Type preparer's nai	iiie	Repareris	gnatyre		Date	i	Check if	FIN			
D-:-I				12/1/2			11-9	-16	self- employed			۰-	
Paid		DAVID J. W.		sey M			•		1	P012			
Prepa		Firm's name > STR	ADLEY, RÕ	NON, S	TEVENS	& YOUI	NG. I	LΡ	Firm's EIN ► 2	23-113	038	1	
Use (עומע												
		Firm's address ► 30			PARKWAY								
		MA	LVERN, PA	19355					Phone no. (6		<u>40-</u>		
										Form	990-	PF (2	2015)

THE JOHN AND CHAFFOUNDATION, INC.	TEME AUDENIG IA		23-310	UATION FOR 1766		OF
Part IV Capital Gains and Loss	ses for Tax on Investment Income					
(a) List and (2-story brid	describe the kind(s) of property sole ck warehouse; or common stock, 26	d, e.g., real estate, 00 shs. MLC Co.		P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.
1a CAPITAL GAINS I	DIVIDENDS					
<u>b</u>					 	
d d						
е		-				
f					<u> </u>	
g h		-u				
i						
j						
<u>k</u>					<u> </u>	
<u> </u>					1	
n						
0						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense		(e)	ı) Gaın or (loss) plus (f) minus (g)	
5,622.	(or unorrapio)	pido expenso	71 5010		pro (1) 1111100 (g)	5,622
)						<u> </u>
						
; :						
		· · · · · · · · · · · · · · · · · · ·				
	-					
·	gain in column (h) and owned by t	ne foundation on 12/3	1/69	(I) Lo	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of over col. (j), i	ol. (ı) any	Gains (excess	of col. (h) gain over not less than "-0-")	
						5,622
		 	· ·			
					-	
	· · · · · · · · · · · · · · · · · · ·					
						
Capital gain net income or (net capit	11 (1055), 01101		_	2		6,105
Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co	as defined in sections 1222(5) and lumn (c).	(6):				
If (loss), enter "-0-" in Part I, line 8	- ··· \ -/-			3	N/A	

23-3101766

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to contribution Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient CELEBRITIES FORE KIDS INC N/A 501 (C)(3) GRANT TO ANOTHER 501(C)(3) ORGANIZATION P.O. BOX 186 ORGANIZATION 2,500. STUART, FL 34995 HOPE RURAL SCHOOL N/A 501 (C)(3) GRANT TO ANOTHER 501(C)(3) ORGANIZATION ORGANIZATION 15929 SW 150TH STREET 1,000. INDIANTOWN FL 34956 LOVE AND HOPE IN ACTION N/A 501 (C)(3) CAMPAIGN FOR CAMILLA ORGANIZATION HALL 1760 SE SALERNO ROAD 1,000. STUART FL 34997 501 (C)(3) GRANT TO ANOTHER MARY'S SHELTER OF THE TREASURE COAST N/A 501(C)(3) ORGANIZATION 1033 E. 14TH STREET ORGANIZATION STUART, FL 34996 2,400, ROSEMONT SCHOOL OF THE HOLY CHILD 501 (C)(3) GRANT TO ANOTHER N/A 1344 MONTGOMERY AVENUE ORGANIZATION 501(C)(3) ORGANIZATION 1,000. ROSEMONT PA 19010 GRANT TO ANOTHER SAMARITAN CENTER FOR YOUNG BOYS AND N/A 501 (C)(3) **FAMILIES** DRGANIZATION 501(C)(3) ORGANIZATION 1490 SE COVE ROAD 1,000. STUART, FL 34997 ST. ANDREW'S CATHOLIC CHURCH N/A 501 (C)(3) GRANT TO ANOTHER 501(C)(3) ORGANIZATION 2100 SE COVE ROAD DRGANIZATION 2,500. STUART, FL 34997 ST. JAMES ALUMNI SCHOLARSHIP FUND N/A 501 (C)(3) GRANT TO ANOTHER 501(C)(3) ORGANIZATION ORGANIZATION 1499 EAST 9TH STREET 3,000. CRUM LYNNE, PA 19022 TREASURE COAST HOSPICE N/A 501 (C)(3) GRANT TO ANOTHER DRGANIZATION 501(C)(3) ORGANIZATION 9065 SE BRIDGE STREET 500. HOBE SOUND, FL 33455 501 (C)(3) GRANT TO ANOTHER UNITED WAY OF MARTIN COUNTY N/A ORGANIZATION 501(C)(3) ORGANIZATION 10 SE CENTRAL PARKWAY #101 15,000. STUART, FL 34994 29,900. Total from continuation sheets

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

Schedule of Contributors

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

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www.irs.gov/form990 .

OMB No 1545-0047

2015

Name of the organization

THE JOHN AND CHARLENE ROBERTS FAMILY FOUNDATION, INC.

Employer identification number

23-3101766

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 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, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, 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

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)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE JOHN AND CHARLENE ROBERTS FAMILY
FOUNDATION, INC.

Employer identification number

23-3101766

Part I	art I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	CHARLENE ROBERTS 1933 SE TALBOT PLACE STUART, FL 34997	\$ 37,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2	JOHN J. ROBERTS 1933 SE TALBOT PLACE STUART, FL 34997	\$37,500.	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Oncash 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)				

Name of organization

Employer identification number

THE JOHN AND CHARLENE ROBERTS FAMILY FOUNDATION, INC.

23-3101766

from Part I Description of noncash property given	 	I if additional space is needed	oncash Property (see instructions) Use duplicate copies of Pa	Parţ II
(a) No. from Description of noncash property given S	(d) Date receiv	FMV (or estimate)		No. from
No. pescription of noncash property given (a) No. pescription of noncash property given (b) pate recommendation of the pescription of noncash property given (a) No. pescription of noncash property given (b) pate recommendation of the pescription of noncash property given (a) No. pescription of noncash property given (b) pate recommendation of the pescription of noncash property given (c) pate recommendation of the pescription of noncash property given (a) No. pescription of noncash property given (b) pate recommendation of the pescription of noncash property given (c) pate recommendation of the pescription of noncash property given (c) pate recommendation of the pescription of noncash property given (c) pate recommendation of the pescription of noncash property given (c) pate recommendation of the pescription of noncash property given (c) pate recommendation of the pescription of noncash property given (d) No. pescription of noncash property given (d) pate recommendation of the pescription of noncash property given (d) pate recommendation of the pescription of noncash property given (d) pate recommendation of the pescription of noncash property given (d) pate recommendation of the pescription of noncash property given (d) pate recommendation of the pescription of noncash property given (d) pate recommendation of the pescription of noncash property given (d) pate recommendation of the pescription of noncash property given		 		
(a) No. The part I Description of noncash property given See instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) No. The part I Description of noncash property given See instructions) (a) No. The part I Description of noncash property given See instructions) (a) No. The part I Description of noncash property given See instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) No. The part I See instructions) (a) No. The part I See instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) No. The part I See instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (see instructions)	(d) Date receiv	FMV (or estimate)		No. from
No. (a) No. (b) (c) FMV (or estimate) (see instructions) (a) No. (b) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) No. (e) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (g) FMV (or estimate) (see instructions)				
(a) No. (b) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) No. (e) FMV (or estimate) (see instructions) (a) See instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) No. (e) FMV (or estimate) (see instructions) (d) No. (e) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions)	(d) Date receiv	FMV (or estimate)		No. from
No. from Description of noncash property given \$	 	 		
(a) No. No. Trom Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) No. (d) No. (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Description of noncash property given (see instructions)	(d) Date recei	FMV (or estimate)		No. from
No. (b) FMV (or estimate) (see instructions) Date respectively. (c) FMV (or estimate) (see instructions) FMV (or estimate) (see instructions) Date respectively. (c) FMV (or estimate) (see instructions) Date respectively.	 			
(a) No. (b) FMV (or estimate) Control (c) FMV (or estimate) Control (see instructions) (see instructions)	(d) Date recei	FMV (or estimate)		No. from
No. (b) FMV (or estimate) Date ro	_			-
	(d) Date recei	FMV (or estimate)		No. rom
		_ _		

Name of organization

Employer identification number

THE JO	OHN AND CHARLENE ROBERT	'S FAMILY	23-3101766
Part III	Exclusively religious, charitable, etc., conthe year from any one contributor. Complete completing Part III, enter the total of exclusively religion. Use duplicate copies of Part III if addition	columns (a) through (e) and the following li us, charitable, etc., contributions of \$1,000 or less fo	tion 501(c)(7), (8), or (10) that total more than \$1,000 for ne entry. For organizations
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
:	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

FORM 990-PF	DIVIDENDS	AND INTERES	T FROM SECUR	ITIES ST	'ATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
VANGUARD EXPLORER FUND VANGUARD	1,209.	1,152.	57.	57.	
INTERMEDIATE TERM INVESTMENT GRADE VANGUARD INTERNATIONAL	2,464.	252.	2,212.	2,212.	
GROWTH FUND	586.	0.	586.	586.	
VANGUARD PRIME MONEY MARKET	18.	0.	. 18.	18.	
VANGUARD PRIMECAP FUND VANGUARD SHORT	1,875.	1,500.	375.	375.	
TERM INVESTMENT GRADE FUND	458.	1.	457.	457.	
VANGUARD STRATEGIC EQUITY FUND VANGUARD TOTAL	1,432.	1,223.	209.	209.	
BOND MARKET INDEX FUND VANGUARD TOTAL	1,645.	40.	1,605.	1,605.	
STOCK MARKET INDEX FUND VANGUARD WINDSOR	701.	0.	701.	701.	
II FUND	2,108.	1,454.	654.	654.	
TO PART I, LINE 4 =	12,496.	5,622.	6,874.	6,874.	
FORM 990-PF		LEGAL F	EES	Si	PATEMENT 2
DESCRIPTION			(B) ET INVEST- ENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES		2,442.	2,442.		0.
TO FM 990-PF, PG 1,	 LN 16A	2,442.	2,442.		0.

FORM 990-PF	OTHER PROFESSIONAL FEES				STATEMENT		
DESCRIPTION	(A) EXPENSE PER BOO		(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
INVESTMENT ADVISORY FEES	9	927.		927.			0.
TO FORM 990-PF, PG 1, LN 16C	9	927.		927.			0.
FORM 990-PF		TAX	ES			STATEMENT	4
DESCRIPTION	(A) EXPENSE PER BOO		(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
2014 TAX ON NET INVESTMENT INCOME	1	81.		0.			0.
TO FORM 990-PF, PG 1, LN 18	1	.81.		0.			0.
FORM 990-PF	OTHER	INV	ESTMENTS			STATEMENT	5
DESCRIPTION			LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T
VANGUARD TOTAL STOCK MARKET INDEX FUND VANGUARD WINDSOR II FUND VANGUARD STRATEGIC EQUITY FUND VANGUARD EXPLORER FUND		(COST COST COST		42,789. 21,031. 7,788. 9,818.	47,8 28,8 13,1 12,4	08. 93.
VANGUARD INTERMEDIATE TERM INVESTMENT GRADE FUND VANGUARD SHORT TERM INVESTME GRADE FUND VANGUARD PRIMECAP FUND	NT	(COST COST		60,308. 33,299. 18,467.	60,9 33,9 32,5	35.
VANGUARD TOTAL BOND MARKET IN FUND VANGUARD INTERNATIONAL GROWTH		(COST		61,790. 52,052.	64,3 57,0	53.
TOTAL TO FORM 990-PF, PART I	I, LINE 1	.3			307,342.	351,2	60.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	6
NAME OF CONTRIBUTOR	ADDRESS		
JOHN J. ROBERTS	1933 SE TALBOT PLACE STUART, FL 34997		
CHARLENE ROBERTS	1933 SE TALBOT PLACE STUART, FL 34997		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	7

NAME OF MANAGER

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CHARLENE K. ROBERTS JOHN J. ROBERTS