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Form **99**(Department of le/Freasury

EXTENDED TO FEBRUARY 15 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. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

For calendar year 2015 or tax year beginning JUL 1. 2015 , and ending JUN 30. 2016 Name of foundation A Employer identification number ANESTHESIA & CRITICAL CARE RESEARCH FOUNDATION 36-3474030 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 5753 TANAGER STREET 773-843-1318 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 46735 SCHERERVILLE IN G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 1,092,990. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (a) Revenue and (c) Adjusted net (d) Disbursements (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 62. 1 Contributions, gifts, grants, etc., received N/A 2 Check X If the foundation is not required to attach Sch. B 3 -100 Interest on savings and temporary cash investments 781 781 STATEMENT Dividends and interest from securities 26,226 26,226 STATEMENT 5a Gross rents 4 b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Ö b Less Cost of goods sold c Gross profit or (loss) 11 Other income 27,069 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 0. 0. 14 Other employee salaries and wages Pension plans, employee benefits Expenses 427. 16a Legal fees 3 213 STMT 214 b Accounting fees STMT 4 8,800. 4,400. 4,400. c Other professional fees STMT 5 150. 150 and Administrative 17 Interest 18 Taxes STMT 6 414 0 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 7 15 Operating 23 Other expenses 0. 24 Total operating and administrative 9,806. expenses. Add lines 13 through 23 4,763 4,614. 25 Contributions, gifts, grants paid 50,000 50,000 26 Total expenses and disbursements. 59,806 4,763 Add lines 24 and 25 54,614 27 Subtract line 26 from line 12: <32,737.b a Excess of revenue over expenses and disbursements 22,244 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

ANESTHESIA & CRITICAL CARE RESEARCH FOUNDATION

Fo	rm 99	00-PF (2015) RESEARCH FOUNDATION		3	6-34	74030	Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		nd of yea		
	ait	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value		c) Fair Market	
	1	Cash - non-interest-bearing	10,978.	1,38			<u>,384.</u>
	2	Savings and temporary cash investments	408,131.	358,76	2.	<u> </u>	,762.
	3	Accounts receivable -	,		1.		
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ▶		*			
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable					*
		Less: allowance for doubtful accounts ▶				•	** *
S	8	Inventories for sale or use					
Assets	9 Prepaid expenses and deferred charges						
ĕ		Investments - U.S. and state government obligations					
		Investments - corporate stock					
		Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis					
	` '	Less accumulated depreciation			İ		
	12	Investments - mortgage loans					
	13	Investments - other STMT 9	604,016.	729,82	5.	729	,825.
	14	Land, buildings, and equipment: basis		· · · · · · · · · · · · · · · · · · ·			
		Less accumulated depreciation		~	*	,	
	15	Other assets (describe ► REFUNDABLE PAYMENTS)	2,868.	3,01	9.	3	,019.
	16	Total assets (to be completed by all filers - see the		•			
		instructions. Also, see page 1, item I)	1,025,993.	1,092,99	0.	1,092	,990.
	17	Accounts payable and accrued expenses					
	18	Grants payable			<u> </u>		
Š	19	Deferred revenue				`,	188 1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
abi	21	Mortgages and other notes payable					
=	22	Other liabilities (describe)				8%	
					*.		
	23	Total liabilities (add lines 17 through 22)	0.		0.		
		Foundations that follow SFAS 117, check here			*	44	
		and complete lines 24 through 26 and lines 30 and 31.					
Çes	24	Unrestricted	1,025,993.	1,092,99	0.		*.
ă	25	Temporarily restricted			* . <		
Ва	26	Permanently restricted				•	
핕		Foundations that do not follow SFAS 117, check here					^
Ę		and complete lines 27 through 31.					
S	27	Capital stock, trust principal, or current funds				*	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds					
Š	30	Total net assets or fund balances	1,025,993.	1,092,99	0.		
_	31	Total liabilities and net assets/fund balances	1,025,993.	1,092,99	0.		
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances				
_		-			 -		
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	30			1 005	002
_	•	st agree with end-of-year figure reported on prior year's return)			1	1,025	
		r amount from Part I, line 27a	000 cm	merera o	2		<u>,737.</u> >
		r increases not included in line 2 (itemize)	SEE STA	TEMENT 8	3		734.
		lines 1, 2, and 3 eases not included in line 2 (itemize)			4	1,092	
		l net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h) line 30		6	1,092	990
<u>U</u>	ı Uld	inst assets of futio balances at end of year (little 4 millius little 3) - Part II, Co	iniuu (n)' iiiis on		0	Form 990-I	
							- (2010)

Form 990-PF (2015) RESEARCH FOUNDATION

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		sses for Tax on Ir		t Income	7/13 11				
(a) List and desc 2-story brick w	cribe the kil arehouse,	nd(s) of property sold (e.g or common stock, 200 sh	., real estate, s. MLC Co.)	. <u>.</u>	J P-	low acquired - Purchase - Donation	(c) Date (mo., e	acquired day, yr.)	(d) Date sold (mo , day, yr.)
1a									
b NC	NE						-		· · · · · · · · · · · · · · · · · · ·
<u> </u>					₩-				
d e					 				
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale			(h) (e) plu	Gain or (loss) s (f) minus () (g)
a									
b			ļ						
C							-		
d									
Complete only for assets show	na aain in i	column (h) and owned by	the foundation	on 12/31/69			(I) Gains ((Col. (h) gain	minite
	 	j) Adjusted basis	1	cess of col. (1)			òl. (k), but	not less that	n -0-) or
(i) F.M.V. as of 12/31/69	\ 	as of 12/31/69		col. (j), if any	_		Losses	(from col. (h))
b	 				\dashv				
C					\dashv				
d									
е									
2 Capital gain net income or (net c	anıtal loss)	If gain, also enter If (loss), enter -0	r ın Part I, line	7 7	}	2			
3 Net short-term capital gain or (lo	. ,	•		•	7	_			
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	, column (c		iu (o).		}	2			
Part V Qualification U	Jnder S	ection 4940(e) for	Reduced	Tax on Net	Inve	estment Ir	come		
(For optional use by domestic privat	e foundation	ons subject to the section	4940(a) tax on	net investment ir	ncome.	.)			
!f acation 4040/d\/0\ acation leave t	h		, ,			•			
If section 4940(d)(2) applies, leave t	nis part di	апк.							
Was the foundation liable for the sec					rıod?				Yes X No
If "Yes," the foundation does not qua									
1 Enter the appropriate amount in (a)	each colui		nstructions de	tore making any e		r .	1		(d)
Base period years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) onchari	table-use asse	ts	Distrib	utión ratio ided by col. (c))
2014	<u>"''9 "'')</u>	···	4,401.			,052,75		(001: (b) div	.042176
2013			5,940.		1,	086,28	4.		.051497
2012			2,101.		1,	,078,73	9.		.057568
2011		10	5,485.		1,	,049,70	1.		.100491
2010								,	
									25172
2 Total of line 1, column (d)	E voor boo	o pariod duuda tha total	on line O by E	or by the number			2		.251732
3 Average distribution ratio for the the foundation has been in existe			on line z by 5,	or by the number	OI yea	115	3		.062933
		•							
4 Enter the net value of noncharital	ble-use ass	sets for 2015 from Part X,	line 5				4		925,817
5 Multiply line 4 by line 3							5		58,264
6 Enter 1% of net investment incor	me (1% of	Part I, line 27b)					6	 	222.
7 Add lines 5 and 6							7		58,486
8 Enter qualifying distributions from	m Part XII,	line 4					8		54,614
If line 8 is equal to or greater tha	n line 7, ch	eck the box in Part VI, line	th, and comp	lete that part usir	ng a 1%	6 tax rate.			

ANESTHESIA & CRITICAL CARE RESEARCH FOUNDATION 36-3474030 Page 4 Form 990-PF (2015) 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 \(\bigs \) and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% 445. 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). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 445. 3 Add lines 1 and 2 4 Ω. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 445 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a **b** Exempt foreign organizations - tax withheld at source 6b Šķ 445 6с c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 6d 445. Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Refunded > 11 Enter the amount of line 10 to be: Credited to 2016 estimated tax Part VII-A Statements Regarding Activities No Yes 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X 1a any political campaign? 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 X 1c c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. (1) On the foundation. > \$ 0 . (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation Si., managers. > \$ Х 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 3 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 4b b If "Yes," has it filed a tax return on Form 990-T for this year? 5 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 X remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 7 8a Enter the states to which the foundation reports or with which it is registered (see instructions)

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

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

Form **990-PF** (2015)

X

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Form 990-PF (2015) RESEARCH FOUNDATION

Part VII-A Statements Regarding Activities (continued)

re	It VII-A Gratements 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	, ,		37
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11_		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	12		Х
10	If "Yes," attach statement (see instructions) Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
13	Website address N/A		Λ	
14	The books are in care of ► ANNE-MARIE PRINCE Telephone no. ► 773-84	13-1	483	
17	Located at ▶ 5753 TANAGER STREET, SCHERERVILLE, IN ZIP+4 ▶46	•		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pε	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
				7.4
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		ž,	, X
	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.)	, %,	, ,	
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	**		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			., . ,
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	\$	· "	W.
	before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	×.		
	defined in section 4942(j)(3) or 4942(j)(5)):	1.75		* * *
a	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			Î
	before 2015?			
	If "Yes," list the years	ž	()	,
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	1		پ _ر
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	١,		
	statement - see instructions.) N/A	2b	¥	-
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			7.4
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
36	during the year? Wes X No			
,	of "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,			1
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		Х
	r.	OO/	100	/004E

ANESTHESIA & CRITICAL CA	X.E.				
rm 990-PF (2015) RESEARCH FOUNDATION	4700 M - D - F		<u>36-34740</u>	<u>30</u>	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be F	sequirea (continu	ued)		
5a During the year did the foundation pay or incur any amount to:		<u> </u>	(TT)		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No		
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire				
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	es 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section				
4945(d)(4)(A)? (see instructions)		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instruc	etions)?		N/A !	5b	
Organizations relying on a current notice regarding disaster assistance check he	re				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned			
expenditure responsibility for the grant?		/A 🗌 Ye	s No		
If "Yes," attach the statement required by Regulations section 53.4945				-	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p					
a personal benefit contract?	ay promising on	☐ Ye	s X No	1''	,
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pi	ersonal henefit contract?			6b	X
If "Yes" to 6b, file Form 8870	noonar bonom commuce		 		
7a At any time during the tax year, was the foundation a party to a prohibited tax sl	nelter transaction?	□ v _e	s X No		•
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	+
Part VIII Information About Officers, Directors, Truste		nagers Highly		, D	
Paid Employees, and Contractors	es, roundation wa	nagers, inging	,		
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 compensation	(e) E	xpense nt, other
(a) Name and address	hours per week devoted to position	(If not paid,	and deferred	acconi	nt, other
		enter-(1-1	compensation	allow	rances
	to position	`enter-0-)	compensation	allow	ances
	to position	enter-u-)	compensation	allow	ances_
ре спапемент 10	to position			allow	
EE STATEMENT 10	to position	0 .	compensation O .	allow	O .
EE STATEMENT 10	to position			allow	
EE STATEMENT 10	to position			allow	
EE STATEMENT 10	to position			allow	
EE STATEMENT 10	to position			allow	
EE STATEMENT 10	to position			allow	
EE STATEMENT 10	to position			allow	
EE STATEMENT 10	to position			allow	
EE STATEMENT 10	to position			allow	
		0.		allow	
EE STATEMENT 10 Compensation of five highest-paid employees (other than those inc	uded on line 1). If none,	0.	O •		0.
	uded on line 1). If none, (b) Title, and average hours per week	0.	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	uded on line 1). If none,	O .	(d) Contributions to employee benefit plans	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc	uded on line 1). If none, (b) Title, and average hours per week	O .	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	uded on line 1). If none, (b) Title, and average hours per week	O .	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	uded on line 1). If none, (b) Title, and average hours per week	O .	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	uded on line 1). If none, (b) Title, and average hours per week	O .	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	uded on line 1). If none, (b) Title, and average hours per week	O .	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	uded on line 1). If none, (b) Title, and average hours per week	O .	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	uded on line 1). If none, (b) Title, and average hours per week	O .	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.
Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000	uded on line 1). If none, (b) Title, and average hours per week	O .	(d) Contributions to employee benefit plans and deferred	(e) E: accour	O.

0

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

ANESTHESIA & CRITICAL CARE

orm 990-PF (2015) R.	ESEARCH FOUNDATION		3474030 Page 7
Paid Emp	on About Officers, Directors, Trustees, Found ployees, and Contractors (continued)		
	endent contractors for professional services. If none, ent	er "NONE."	
(a) Name a	and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
T A L a supplier of above account	200 000 for authorized annual		▶ 0
Part IX-A Summary	ng over \$50,000 for professional services of Direct Charitable Activities		
List the foundation's four larges number of organizations and of	Expenses		
ı N/A			
?			
			
'—————————————————————————————————————			
ļ			
D-+IV D a	-,		
	of Program-Related Investments am-related investments made by the foundation during the tax year o	un lines 1 and 2	Amount
N/A	anti-related investments made by the foundation during the tax year o	of mies I and 2.	Alliount
N/A			
			
2			
All other program-related inves	stments. See instructions.		
· —————			

0.

Total. Add lines 1 through 3

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

36-3474030 RESEARCH FOUNDATION Page 8 Form 990-PF (2015) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 932,991. a Average monthly fair market value of securities 1a 6,925. 1b Average of monthly cash balances 1c c Fair market value of all other assets 939,916. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1e 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 939,916. Subtract line 2 from line 1d 3 14,099. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 925,817. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 46,291. Minimum investment return Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 46,291. Minimum investment return from Part X, line 6 445 Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) 445. Add lines 2a and 2b 2с 45,846. 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 0. 45,846. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 0. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 45 846. Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 54,614. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3Ь Cash distribution test (attach the required schedule) 54,614 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4

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)

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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,	Odipus	1 cars prior to 2014	2014	2013
line 7	, , ,			45,846.
2 Undistributed income, if any, as of the end of 2015			***************************************	43,040.
a Enter amount for 2014 only	•		0.	4
b Total for prior years:			<u> </u>	
,	, ⁽¹⁾	0.		ر
3 Excess distributions carryover, if any, to 2015:	/	3	, ,	*
a From 2010			; ×	,
b From 2011 54,459.]' (, *	
c From 2012 9,486.			`	
d From 2013 2,016.		} * .*·		
e From 2014				
f Total of lines 3a through e	65,961.			Transfer in
4 Qualifying distributions for 2015 from				
Part XII, line 4: \triangleright \$ 54,614.				,
a Applied to 2014, but not more than line 2a	*	, (X	0.	
b Applied to undistributed income of prior	,		* * *	
years (Election required - see instructions)		0.	* .	
c Treated as distributions out of corpus		**	Š.	
(Election required - see instructions)	0.		*	
d Applied to 2015 distributable amount	Ž,		* 2 12	45,846.
e Remaining amount distributed out of corpus	8,768.		1 () 1	
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.		*	0.
must be shown in column (a))	7 49	** **		
6 Enter the net total of each column as indicated below:	ļ.,.		4 4	Į į
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	74,729.		**	
b Prior years' undistributed income. Subtract	**		·	` \$28 ;
line 4b from line 2b		0.	ŧ .	
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		3 ** 4		^ (
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				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.	74 700			
Subtract lines 7 and 8 from line 6a	74,729.			
IO Analysis of line 9:				
a Excess from 2011 54,459. b Excess from 2012 9,486.				
	1			
d Excess from 2014 e Excess from 2015 8,768	1			
e Excess from 2015 8,768.		<u> </u>	<u> </u>	5 000 DE (0045)

ANESTHESIA & CRITICAL CARE

	H FOUNDATIC				74030 Page 10
Part XIV Private Operating Fo	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that	t it is a private operating			
foundation, and the ruling is effective for	2015, enter the date of	the ruling	▶		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or 49)42(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 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from			-		
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Infor	mation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during the				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1 Information Regarding Foundation	Managers:	<u> </u>			-
List any managers of the foundation who year (but only if they have contributed m	have contributed more	than 2% of the total con ection 507(d)(2).)	tributions received by the	foundation before the clos	se of any tax
NONE					
b List any managers of the foundation who	own 10% or more of th	e stock of a corporation	(or an equally large portion	on of the ownership of a pa	artnership or
other entity) of which the foundation has	a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribution Check here ▶ ☐ If the foundation or	nly makes contributions t	o preselected charitable	organizations and does n	ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc. (<u>d.</u>
a The name, address, and telephone numb	738341483		_	sed:	
5721 S. MARYLAND AVE					
b The form in which applications should be LETTER	submitted and informat	ion and materials they s	hould include:		
c Any submission deadlines				,	
d Any restrictions or limitations on awards,	, such as by geographica	l areas, charitable fields	, kinds of institutions, or c	other factors:	

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid dunng the year CHILDREN'S HOSPITAL OF PHILADELPHIA GENETIC INFLUENCES ON VITAMIN D PRODUCTION RESEARCH INSTITUTE PO BOX 8500 50,000. PHILADELPHIA PA 19178 **▶**_3a 50,000. b Approved for future payment NONE Total

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Part XVI-A ` Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		led by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Couc		Code		
a					
b			 		
c					
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments		· · · · · · · · · · · · · · · · · · ·			
3 Interest on savings and temporary cash					
investments			14	781.	
4 Dividends and interest from securities			14	781. 26,226.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					·
8 Gain or (loss) from sales of assets other				· ····································	
than inventory					
9 Net income or (loss) from special events				·····	
0 Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
C		· · ·			
d					
e					
2 Subtotal. Add columns (b), (d), and (e)	, <u>(4</u> 6).	0.	200	27,007.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	cempt	Purposes	
Line No. Explain below how each activity for which incor the foundation's exempt purposes (other than to			contribi	uted importantly to the accom	plishment of
the foundation's exempt purposes (other than t	by providing id	nido for oddir parpoddoj.			
					· ·
		•			
					
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ANESTHESIA & CRITICAL CARE

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Pa	ırt XVII			sfers To a	and Transactions	s and	l Relations	hips With Noncha	ritabl	е	
1	Did the or			of the following	ng with any other organiz	ration d	lescribed in secti	on 501(c) of	T^-	Yes	Nο
•		•						011 30 1(0) 01		3 .	
а						gumzun				\ \x	
					5				1a(1)	1 *	Х
											X
b									12,27	"	
	(1) Sales	of assets to a noncharital	ble exempt organiza	tion					1b(1)		X
									_	1	X
	(3) Renta	al of facilities, equipment,	or other assets							 	Х
	(4) Reim	bursement arrangements								1	Х
	(5) Loan	s or loan guarantees							1b(5)		Х
	(6) Perfo	ormance of services or me	mbership or fundrai	sıng solıcıtatıc	ons				1b(6)		Х
									1c		Х
d										sets,	
						value in	any transaction	or sharing arrangement, s	how in		
/al.											
(a)∟	ine no	(b) Amount involved	(c) Name of		e exempt organization		(d) Description	of transfers, transactions, and	sharing ai	Tangeme	nts
				N/A							
											
											
			·			-					
						-					
						-+					
		-						·			
		~~~						-			
								· · · · · · · · · · · · · · · · · · ·			
		1									
	ın section	501(c) of the Code (other	than section 501(c)			anızatıo	ons described		Yes	X	] No
v	., 100, 00				(b) Type of organization	on l	1	c) Description of relations	מור		
		<u>,                                 </u>			(47 ))			-,	··r		-
							——————————————————————————————————————	<del></del>			
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		<u> </u>						. · · · · · · · · · · · · · · · · · · ·			
		1	/								
Się He	re	/	hat inavelexamined this	s return, includin	1 16 1	and state formation	DIRECT		rn with th <u>wn</u> below	e prepare (see inst	er
(2) Other assets by Other transctoncs:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rembursement arrangements  (5) Loans or foat quarantees  (6) Performance of services or membership or fundrasing solicitations  (6) Rental of oat quarantees  (7) In the asset of an oath quarantees  (8) Performance of services or membership organization  (9) If the answer to any of the above is "Yes," complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services given by the reporting foundation, if the foundation creaved less than fair market value in any transaction or sharing arrangement, show in column (9) Amount involved  (9) Amount involved  (1) Name of noncharitable exempt organization  (1) Description of transactions, and alwaring arrangement, show in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (1) If Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  (a) Name of organization  N/A  (b) Type of organization  (c) Description of relationship  N/A  (a) Name of organization organization (b) Type of organization  N/A  (b) Type of organization  (c) Description of relationship  N/A  (a) Name of organization organization organization (c) Description of relationship  N/A  (b) Type of organization  N/A  (c) Description of relationship  N/A  (d) Description of relationship  N/A  (e) Propagar's complete the following schedule.  (a) Name of organization organization organization  N/A  (b) Type of organization  (c) Description of relationship  N/A  (d) Description of relationship  N/A  (e) Propagar's complete the following schedule.  (a) Name of organization  N/A  (b) Type of organization  (c) Description of relationship  N/A  (d) Description of relationship  N/A  (e) Propagar's complete the following schedule.  (e) Name of o											
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Pa	id		NULLUM,	ax	Juzuka_	1/2	2-29-16		1116	166	
Pre	eparer		SLER, ORL	EAN, S	ILVER & CO.						
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						•		Phone no. (847)	500	_ 114	ሰሰ
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FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	IVESTMENTS	STATEMENT	
SOURCE		(A REVE PER B	NUE		(B) (C) VESTMENT ADJUSTED COME NET INCOME		
SAVINGS AND CD			781.	<u> </u>	781.		
TOTAL TO PART I, LI	NE 3		781.		781.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	OM SECUR	ITIES	STATEMENT :	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
INVESTMENTS	26,226	•	0.	26,226.	26,22	26.	
TO PART I, LINE 4	26,226	•	0.	26,226.	26,22	86.	
FORM 990-PF		LEGAL	FEES			STATEMENT	
DESCRIPTION		(A) EXPENSES PER BOOKS	( I NET IN MENT I		(C) ADJUSTED NET INCOM		
LEGAL	_	427.	· <del></del>	213.		214	
TO FM 990-PF, PG 1,	LN 16A	427.	· <del>· · · · · · · · · · · · · · · · · · </del>	213.		214	
FORM 990-PF		ACCOUNTI	NG FEES	<u> </u>		STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(F NET IN MENT I		(C) ADJUSTED NET INCOM		
AUDIT AND TAX RETUR PREPARATION MONTHLY ACCOUNTING	n —	2,800. 6,000.		1,400. 3,000.		1,400 3,000	
TO FORM 990-PF, PG	1, LN 16B	8,800.		4,400.		4,400	
	=				-		

FORM 990-PF C	THER PROFES	SIONAL FEES	·i	STATEMENT 5
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITABLE
INVESTMENT FEES	150.	150.		0.
TO FORM 990-PF, PG 1, LN 16C =	150.	150.		0.
FORM 990-PF	TAX	ES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	CHARITABLE
EXCISE	414.	0.		0.
TO FORM 990-PF, PG 1, LN 18 =	414.	0.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 7
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITABLE
FEES	15.	0.		0.
TO FORM 990-PF, PG 1, LN 23	15.	0.		0.
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND BA	ALANCES	STATEMENT 8
DESCRIPTION				AMOUNT
CHANGE IN UNREALIZED GAIN ON	INVESTMENTS			99,734.
TOTAL TO FORM 990-PF, PART II	I, LINE 3			99,734.

FORM 990-PF OTH	ER INVESTMENTS		STATI	EMENT	9
DESCRIPTION	VALUATION METHOD	BOOK VALUE		MARKET ALUE	
PUBLICALLY TRADED SECURITIES	COST	729,82	25.	729,82	
TOTAL TO FORM 990-PF, PART II, LIN	E 13	729,82	25.	729,82	15.
FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, I		STATI	EMENT	10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENS	
MICKEY SHAPIRO 31550 NORTHWESTERM HIGHWAY, SUITE 200 FARMINGTON HILLS, MI 48018	PRESIDENT AND	DIRECTOR 0.	0.		0.
DR. MICHAEL F. ROIZEN 18600 SOUTH PARK BOULEVARD SHAKER HEIGHTS, OH 44122	VICE PRESIDENT	r AND DIRECTO	0.		0.
DR. JONATHAN MOSS 5841 S. MARYLAND AVE., MC 4028 CHICAGO, IL 60637	TREASURER AND 0.50	DIRECTOR 0.	0.		0.
SIDNEY R. UNOBSKEY 270 GREEN STREET SAN FRANCISCO, CA 94123	DIRECTOR 0.20	0.	0.		0.
ARTHUR KELLY 20 S. CLARK STREET CHICAGO, IL 60603	DIRECTOR 0.20	0.	0.		0.
JOHN CAMPODONICO 650 CALIFORNIA STREET, SUITE 2530 SAN FRANCISCO, CA 94104	DIRECTOR 0.20	0.	0.		0.
CARL PECK, M.D. 3900 RESERVOIR ROAD NW WASHINGTON, DC 20007	DIRECTOR 0.20	0.	0.		0.

ANESTHESIA & CRITICAL CARE RESEAR	L CARE RESEARCH FOUN		36-3474030	
ALAN J. SHEPHERD 2501 M. STREET, #714 WASHINGTON, DC 20037	DIRECTOR 0.20	0.	0.	0.
GERAL SHIENER, M.D. 251 MERRILL BIRMINGHAM, MI 48009	DIRECTOR 0.20	0.	0.	0.
ARTHUR LESS 39400 WOODWARD AVE., SUITE 200 BLOOMFIELD HILLS, MI 48304	DIRECTOR 0.20	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.