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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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 instructions is at <u>www.irs.gov/form990pf</u>.

Inspection

		ndar year 2015, or tax year beginning 07-0	1-2015	, a	nd ending 0		
	e of four GHT ACTI	ndation Ion Foundation				entification numb	er
					38-2477755		`
	ber and : 09 HILLS	street (or P O box number if mail is not delivered to street address) OF RED	Room/suite		B Telephone nur	nber (see instructior	15)
		state or province, country, and ZIP or foreign postal code IV 891288425	1		C If exemption	application is pendir	ng, check here
G C ł	neck all	that apply Initial return Initial return of a f	ormer public charity		D 1. Foreign or	ganizations, check h	nere •
		Final return A mended return	,			3 4 4 4	Г
		Address change Name change				ganizations meeting k here and attach co	
		pe of organization Section 501(c)(3) exempt private			E If private for	indation status was n 507(b)(1)(A), che	terminated
		4947(a)(1) nonexempt charitable trust Other taxable tvalue of all assets at end JAccounting method	Ge private foundation ✓ Cash		E If the found:	ation is in a 60-mont	th termination
of۱	year <i>(fr</i>	rom Part II, col (c), \$ 429,041 Sheedanding inclined [Other (specify) _ (Part I, column (d) must inclined)				n 507(b)(1)(B), che	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) Income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)					
	2	Check ► if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	1,032				
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
KIE	6a	Net gain or (loss) from sale of assets not on line 10					
Reverkie	ь	Gross sales price for all assets on line 6a					
ш.	7	Capital gain net income (from Part IV, line 2)					
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total.Add lines 1 through 11	1,032		0		
	13	Compensation of officers, directors, trustees, etc					
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)	06.1				
Expenses	b	Accounting fees (attach schedule)	9 547				
lve [17	Other professional fees (attach schedule)					
rat	18						
and Administrative	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
Αd	21	Travel, conferences, and meetings					
E G	22	Printing and publications					
<u>ο</u> :	23	Other expenses (attach schedule)					
Operating	24	Total operating and administrative expenses.					
er:		Add lines 13 through 23	547		0		0
Ö	25	Contributions, gifts, grants paid	5,500				0
	26	Total expenses and disbursements. Add lines 24 and					
	27	25 Subtract line 26 from line 12	6,047		0		0
		Excess of revenue over expenses and disbursements	-5,015				
	b	Net investment income (if negative, enter -0-)			0		
	_	Adjusted net income(if negative enter -0-)				(1

Dа	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		End o	
-			(a) Book Value	(b) Book		(c) Fair Market Value
	1	Cash—non-interest-bearing	2,036		833	833
	2	Savings and temporary cash investments	429,520		428,208	428,208
	3	Accounts receivable ▶	2.500			
	_	Less allowance for doubtful accounts ▶	2,500			
	4	Pledges receivable ►				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶				
ts	8	Inventories for sale or use				
4ssets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis -				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)				
	16	Total assets (to be completed by all filers—see the				
		Instructions Also, see page 1, Item I)	434,056		429,041	429,041
	17	Accounts payable and accrued expenses				
ď	18	Grants payable				
abilities	19	Deferred revenue				
ը	20	Loans from officers, directors, trustees, and other disqualified persons				
Lla	21	Mortgages and other notes payable (attach schedule)				
	22	O ther liabilities (describe ►)				
	23	Total liabilities(add lines 17 through 22)	0		0	
s		Foundations that follow SFAS 117, check here ▶				
ce		and complete lines 24 through 26 and lines 30 and 31.				
Balance	24	Unrestricted	434,056		429,041	
အ	25	Temporarily restricted				
Fund	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here				
٥		and complete lines 27 through 31.				
Assets	27	Capital stock, trust principal, or current funds				
55	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
Net	30	Total net assets or fund balances(see instructions)	434,056		429,041	
	31	Total liabilities and net assets/fund balances(see instructions)	434,056		429,041	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		Total net assets or fund balances at beginning of year—Part II, column ((a), line 30 (must agi	ree		
		with end-of-year figure reported on prior year's return) $\dots \dots$			1	434,056
2		Enter amount from Part I, line 27a			2	-5,015
3		Other increases not included in line 2 (itemize)		_	3	
4		Add lines 1, 2, and 3			4	429,041
5		Decreases not included in line 2 (itemize) ▶		_	5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)— Pa	art II, column (b), lın	e 30 .	6	429,041

Part 1	List and describe	the kind	(s) of property sold (e g ,	real es	tate,		How acquired	. '	ate acquired	
(a) 2-story brick warehouse 1a b			or common stock, 200 sh	s MLC	Co)	(b)	D-Donation	1 (C) (n	no , day, yr)	(d) (mo , day, yr
1a										
b										
С										
d										
e										
(e) Gross sales price		Depreciation allow (f) (or allowable)	<i>v</i> ed			ther basis nse of sale			or (loss) (f) minus (g)
а										
b										
С										
d										
е										
Со	mplete only for assets	showing	gaın ın column (h) and owi	ned by	the foundation	on 1	12/31/69		Gains (Col	(h) gain minus
(i)	FM V as of 12/31/69		A djusted basis (j) as of 12/31/69	·			of col (ı) (j), ıf any	(I)	ol (k), but no	ot less than -0-) o (from col (h))
а										
b										
С										
d										
е										
2	Capital gain net inco	me or (n	et capital loss)		nn, also enter oss), enter -0-			. 2		
3	Net short-term capit	al gaın o	r (loss) as defined in sect	ions 12	222(5) and (6)	l				
	If gain, also enter in in Part I, line 8 .	Part I, lı	ne 8, column (c) (see inst	ruction	s) If(loss), er	nter ·	-0-) 3		
Part	V Qualification	Jnder	Section 4940(e) for	Redu	ced Tax on	Ne	t Investm	1 -	come	
	ional use by domestic on 4940(d)(2) applies,		oundations subject to the s part blank	section	1 4940(a) tax (on ne	et investmen	incom	e)	
			n 4942 tax on the distribu y under section 4940(e)				ın the base p	eriod?		┌ Yes ┌ No
1 Ent	ter the appropriate amo	unt in ea	ch column for each year,	see ins	tructions befo	re m	akıng any en	tries		
	(a) period years Calendar or tax year beginning in)	Adju	(b) sted qualifying distributions	Net	(c) value of nonchar	ıtable	-use assets	((d) Distributio (col (b) divided	n ratio
	2014									
	2013									
	2012									
	2011									
	2010	- (1)								
2	·						F	2		
3	the number of years	the found	the 5-year base period—of dation has been in existen	ce if le	ss than 5 year	s	' ' <u>'</u> [3		
4			ritable-use assets for 20				F	4		
5							-	5		(
6			ncome (1% of Part I, line	,			L	6		
7								7		(
8	, , , -		from Part XII, line 4				L	8		
	If line 8 is equal to o the Part VI instruction		than line 7, check the box	x ın Par	rt VI, line 1b, a	and o	omplete that	part us	ing a 1% ta	x rate See

Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	₹40(e),	or 4948—se	ee pag	e 18 of	the inst	ructio	ns)	
1a	1 1 3	· _)					
	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		J	1				0
	here ▶ ☐ and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·			• • '					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	itions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	ndations	s only Othe	ers	2				0
3	Add lines 1 and 2				3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Oth	ers	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, en	nter -0			5				0
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a							
b	Exempt foreign organizations—tax withheld at source	6 b							
С	Tax paid with application for extension of time to file (Form 8868)	6 c							
d	Backup withholding erroneously withheld	6 d			ļ ļ	ı			
7	Total credits and payments Add lines 6a through 6d				7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2				8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .				9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount	t overp		•	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded		11				
Par	t VII-A Statements Regarding Activities								
1 a	During the tax year, did the foundation attempt to influence any national, state							Yes	No
	, , ,						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p for definition)?						1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities								
	published or distributed by the foundation in connection with the activities	·	•						
С	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos	sed dur	ing the year	r					
	(1) On the foundation > \$ (2) On foundation managers	> \$ _							
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	tıcal ex	kpenditure t	ax ımı	oosed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been rep	orted t	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities								
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts gove	rning instru	ment,	articles	5			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confe			_			3		No
4a	Did the foundation have unrelated business gross income of $\$1,000$ or more d	uring th	ne year?.				4a		No
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 dur	ring the	e year?				5		No
	If "Yes," attach the statement required by General Instruction T								
6	Are the requirements of section 508(e) (relating to sections 4941 through 494) • By language in the governing instrument, or	45) sat	tisfied eithe	r			 	 	
	• By state legislation that effectively amends the governing instrument so the	at no m	nandatory d	irectio	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	o If "Yes	," complete	Part II	, col (c),			
	and Part XV						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF t	the Attor	nev					
_	General (or designate) of each state as required by General Instruction G? If '			•			8b		No
9	Is the foundation claiming status as a private operating foundation within the n				(1)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (se		-						
	If "Yes," complete Part XIV						9	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach	a s chedule	lıstıng	their n	ames			
	and address es						10		No

Pai	t VII-A Statements Regarding Activities (continued)			age .
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	T		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ►HENRY J BEDNARZ Telephone no ►(734)	.)604-	3760	
	Located at ▶1709 HILLS OF RED LAS VEGAS NV ZIP+4 ▶891288			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			_
15	and enter the amount of tax-exempt interest received or accrued during the year			
				1
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مد ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			
Dai	t 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.	Τ	Yes	No
1a	During the year did the foundation (either directly or indirectly)		103	110
	(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)	i	İ	i
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	i	İ	İ
		i	<u> </u>	İ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes Vo (5) Transfer any income or assets to a disqualified person (or make any of either available	i	! 	İ
	for the benefit or use of a disqualified person)? Yes No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	i	<u> </u>	İ
	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) Yes 🗸 No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	i	i	İ
	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			
	Г			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
а	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years ▶ 20, 20, 20	i	i İ	İ
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 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)	2b		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?	ļ	!	
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	No
+a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			140
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No
	For		-DE /	

5a								
	During the year did the foundatio	n pay or incur any amour	nt to					
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e legislation (section 49	45(e))?	☐ Yes	✓ No		
	(2) Influence the outcome of any	specific public election	(see section 4955), or to	o carry				
	on, directly or indirectly, any	voter registration drive?			·	✓ No		
	(3) Provide a grant to an individu	al for travel, study, or ot	her sımılar purposes?		Yes	✓ No		
	(4) Provide a grant to an organiza	ation other than a charita	able, etc., organization de	escribed				
	ın section 4945(d)(4)(A)? (s	ee instructions)			· T Yes	✓ No		
	(5) Provide for any purpose other	than religious, charitabl	e, scientific, literary, or					
	educational purposes, or for t	he prevention of cruelty	to children or animals?.		☐ Yes	✓ No		
b	If any answer is "Yes" to 5a(1)-	(5), did any of the transac	tions fail to qualify unde	r the exceptions	described in	1		1
	Regulations section 53 4945 or	n a current notice regard	ding disaster assistance	(see instruction	s)?		5b	
	Organizations relying on a currer	t notice regarding disast	ter assistance check her	e	▶			
							1 1	1
С	If the answer is "Yes" to question	• • •	•			_		
	tax because it maintained expend				· TYes	□ No		ļ
	If "Yes," attach the statement requ		• •					
6 a	Did the foundation, during the year	•		·	_	_		
_	a personal benefit contract?				Yes	. •	 	
b	Did the foundation, during the year	ar, pay premiums, directl	y or indirectly, on a pers	onal benefit cont	ract?	•	6b	No
_	If "Yes" to 6b, file Form 8870				. —			
	At any time during the tax year, v	·			1 .03		 	l I
	If yes, did the foundation receive	any proceeds or have ar	ny net income attributabl	e to the transact	tion?	•	7b	
b	If yes, did the foundation receive Information Abou	any proceeds or have ar		e to the transact	tion?	•		oyees,
b Par	If yes, did the foundation receive	any proceeds or have ar t Officers, Director	ny net income attributables, Trustees, Founda	e to the transact	tion?	•		oyees,
b Par	If yes, did the foundation receive Tinformation About and Contractors	any proceeds or have ar t Officers, Director	ny net income attributables, Trustees, Founda	e to the transact ation Manage see instructions (d)	ers, Highly	Paid	Empl	
b Par	If yes, did the foundation receive Tinformation About and Contractors	any proceeds or have and tofficers, Directors, foundation managers and Title, and average hours per week	ny net income attributables, Trustees, Foundated and their compensation (c) Compensation(If not paid, enter	e to the transact ation Manage (see instructions	ers, Highly). clons to	Paid	Empl	account,
b Par	If yes, did the foundation receive Tinformation About and Contractors List all officers, directors, trustee	any proceeds or have and tofficers, Directors, foundation managers and Title, and average	ny net income attributables, Trustees, Foundated and their compensation (c) Compensation(If not paid, enter	e to the transact ation Manage see instructions (d)	tion? ers, Highly). clons to nefit plans	/ Paid	Empl	
Par 1	If yes, did the foundation receive Information About and Contractors List all officers, directors, trustee (a) Name and address	Title, and average hours per week (b) devoted to position	ny net income attributables, Trustees, Foundated and their compensation (c) Compensation(If not paid, enter	e to the transact ation Manage see instructions (d) Contribut employee be and deferred co	tion? ers, Highly).) clons to nefit plans ompensation	/ Paid	Empl	account,
Par 1 HENRY	If yes, did the foundation receive Information About and Contractors List all officers, directors, trustee (a) Name and address (J BEDNARZ HILLS OF RED	Title, and average hours per week (b) devoted to position	ny net income attributables, Trustees, Foundated and their compensation (c) Compensation(If not paid, enter -0-)	e to the transact ation Manage see instructions (d) Contribut employee be and deferred co	tion? ers, Highly).) clons to nefit plans ompensation	y Paid	Empl	account,
Par 1 HENRY 1 709 AS	If yes, did the foundation receive Information About and Contractors List all officers, directors, trustee (a) Name and address (J BEDNARZ HILLS OF RED VEGAS, NV 891288425	Title, and average hours per week (b) devoted to position PRESIDENT 1 00	ny net income attributables, Trustees, Foundate and their compensation (c) Compensation(If not paid, enter -0-)	e to the transact ation Manage (see instructions	ers, Highly).): clons to nefit plans ompensation	(e)	Empl e Expense other all	account,
Par 1 HENRY 1 709 AS	If yes, did the foundation receive Information About and Contractors List all officers, directors, trustee (a) Name and address (J BEDNARZ HILLS OF RED JEGAS, NV 891288425 Compensation of five highest-paid	Title, and average hours per week (b) devoted to position PRESIDENT 1 00 I employees (other than	y net income attributables, Trustees, Foundated and their compensation (If not paid, enter -0-)	e to the transact ation Manage see instructions (d) Contribut employee be and deferred co	ers, Highly).): clons to nefit plans ompensation	(e)	Empl e Expense other all	account,
Par 1 1 1ENR 1709 AS	If yes, did the foundation receive Information About and Contractors List all officers, directors, trustee (a) Name and address (J BEDNARZ HILLS OF RED VEGAS, NV 891288425	Title, and average hours per week (b) devoted to position PRESIDENT 1 00 I employees (other than Title, and average)	ny net income attributables, Trustees, Foundated and their compensation (If not paid, enter -0-)	see instructions and deferred co	tion? ers, Highly).) clons to nefit plans ompensation (s). If none, eributions to byee benefit	(e)	Emplo Expense other all	account, owances 0 account,
Par 1 1 1ENR 1709 AS	If yes, did the foundation receive Information About and Contractors List all officers, directors, trustee (a) Name and address (J BEDNARZ HILLS OF RED JEGAS, NV 891288425 Compensation of five highest-paid (a)	Title, and average hours per week (b) devoted to position PRESIDENT 1 00 I employees (other than Title, and average)	ry net income attributable s, Trustees, Founda and their compensation ((c) Compensation(If not paid, enter -0-) those included on line 1- rage ek (c) Compensation	see instructions Contributemployee be and deferred contributemployee be and deferred contributemployee instructions See instructions Contributemployee be and deferred contributemployee be and deferred contributemployee instructions and defer	ers, Highly).): clons to nefit plans ompensation (s). If none, e	(e)	Emplo Expense other all	account, owances
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1e

2b

(see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations

Page 8

430,299

430,299

6,454

423,845

21,192

5,500

5,500

5,500

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1d

2 3

4

5

1

2c

3 4

5

6

7

1a

1b

2

За

3b

4

5

check here **\rightarrow** and do not complete this part.)

Tax on investment income for 2015 from Part VI, line 5. Income tax for 2015 (This does not include the tax from Part VI). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Recoveries of amounts treated as qualifying distributions.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Distributable Amount

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Distributable amount before adjustments Subtract line 2c from line 1.

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 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

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

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

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Reduction claimed for blockage or other factors reported on lines 1a and

2

3

5

1

2a

3

4

5

6

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1

2

5

Part XII

Part XI

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
4	Distributable amount for 2015 from Bart VI, line 7	Corpus	rears prior to 2014	2014	2013
	Distributable amount for 2015 from Part XI, line 7				
	Undistributed income, if any, as of the end of 2015 Enter amount for 2014 only				
	· • • • • • • • • • • • • • • • • • • •				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2015 From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part				
•	XII, line 4 ▶ \$ 5,500				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2015 distributable amount				
e	Remaining amount distributed out of corpus	5,500			
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:	E E00			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	5,500			
	Prior years' undistributed income Subtract line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
f	Instructions				
•	lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				
7	A mounts 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)				
я	Excess distributions carryover from 2010 not				
٠	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	5,500			
10	Analysis of line 9				
а	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
е	Excess from 2015 5,500				
				l l	Form 990-PF (2015

	m 990-PF (2015)		turner and Daut V	TI A acception C	<u> </u>	Page 10
	Part XIV Private Operating Foundate	· · · · · · · · · · · · · · · · · · ·			')	
La	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,		•			
b	Check box to indicate whether the organization	ıs a private operatir	ng foundation desc	ribed in section 「	– 4942(J)(3) or	T 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
	income from Part I or the minimum investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	year listed	0		51	1,117	1,168
b	85% of line 2a			43	949	992
С	Qualifying distributions from Part XII,	5,500	2,600	550	9,100	17,750
	line 4 for each year listed	3,300	2,000	330		17,730
u	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities	F 500	2.600	FFO	0.100	17.750
	Subtract line 2d from line 2c	5,500	2,600	550	9,100	17,750
3	Complete 3a, b, or c for the alternative test relied upon					
а	"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	14,128	14,382	14,316	14,504	57,330
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					
Đ.	rt XV Supplementary Information (Complete this p	art only if the	organization	had \$5 000 or	more in
	assets at any time during the			or gamzation	45,000 or	
L	Information Regarding Foundation Managers:	•	•			
а	List any managers of the foundation who have c before the close of any tax year (but only if the				,	tion
b	List any managers of the foundation who own 10)% or more of the st	ock of a corporation	on (or an equally la	arge portion of the	
_	ownership of a partnership or other entity) of wh				go portator or the	
			_			
2	Information Regarding Contribution, Grant, Gif	t, Loan, Scholarship,	etc., Programs:			
	Check here $\triangleright \overline{\checkmark}$ if the foundation only makes of	ontributions to pres	elected charitable	organizations and	I does not accent	
	unsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and c	n makes gifts, grants				under
a	The name, address, and telephone number or e	mail address of the j	person to whom ap	plications should	be addressed	
	•					
h	The form in which applications should be subm	itted and information	and materials the	ev should include		
	form in which applications should be subill	.ccca and imormation	, and materials tile	., should include		
	A man and harmon and an allowan					
C	Any submission deadlines					
ير	Any restrictions or limitations on awards and	as by goographical	areas chamtable	Talde kunde of se-	titutions or other	
u	Any restrictions or limitations on awards, such	i a a by geographical	arcas, challedne i	icius, killus OLINS	aradons, or other	

factors

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Part XV Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment										
3 Grants and Contributions Paid		roved for F	uture Payment	<u>, </u>						
Recipient ————————————————————————————————————	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount						
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution							
a Paid during the year DOCTORS WITHOUT BORDERS 333 7TH AVE NEW YORK, NY 100015004	NONE		GENERAL FUNDING	500						
MAEWO TELECOMMUNICATIONS COMMITTEE GWATIAWOL COMUMNITY CENTER GWATIAWOL VILLAGE, MAEWO ISLAND NH	NONE		GENERAL FUNDING	5,000						
·				5.500						
Total	 			5,500						
Total		<u> </u>	▶ 3b	0						
				Form 990-PF (2015)						

nter gros	s amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	n 512, 513, or 514	(e) Related or exemp
1 Prograr	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a						
f						
2 Membe	and contracts from government agencies ership dues and assessments st on savings and temporary cash					
ınvest	ments	900099				1,03
	nds and interest from securities					
	-financed property					
b Not d	lebt-financed property					
proper	ntal income or (loss) from personal ty					
8 Gain o	Investment Income					
	ome or (loss) from special events profit or (loss) from sales of inventory					
1 Other	revenue a					
•						
d						
d e L2 Subtot .3 Total.A	al Add columns (b), (d), and (e)				13	
d e .2 Subtot 3 Total.A (See v	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify	calculations)				<u> </u>
d e .2 Subtot 3 Total.A (See v	al Add columns (b), (d), and (e)	calculations) o the Accomp ich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A c	es ontributed import	1,032 antly to
de 2 Subtot 3 Total.A (See v Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify I-B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation?	calculations) o the Accomp ich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A c	es ontributed import	1,032 antly to
de 2 Subtot 3 Total.A (See v Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify I-B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation?	calculations) o the Accomp ich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A c	es ontributed import	1,032 antly to
de 2 Subtot 3 Total.A (See v Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify I-B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation?	calculations) o the Accomp ich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A c	es ontributed import	1,032 antly to
de 2 Subtot 3 Total.A (See v Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify I-B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation?	calculations) o the Accomp ich income is rep	olishment of E	Exempt Purpos (e) of Part XVI-A c	es ontributed import	1,032 antly to
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	XVI	Information Re	aardin	n Transfers 1	To and Trans	actions and	Relationships With			ge 1.
		Noncharitable				actions and	.totationompo tritii			
		rganızatıon dırectly or ıı 01(c) of the Code (othe							Yes	No
org	anızat	ions?								
a Tra	nsfers	from the reporting four	ndation to	a noncharitable	exempt organiz	ation of				
(1)	Cash							1a(1)		No
(2)	Othe	erassets						1a(2)		No
b Oth	ner tra	nsactions								
								1b(1)		No
		hases of assets from a						1b(2)		No
								1b(3)		No
		bursement arrangemen						1b(4)		No
		s or loan guarantees.						1b(5)		No
								1b(6)		No
	_		-	•				1 c		No
of t	he god iny tra	ods, other assets, or se	rvices giv angement	en by the reporti	ing foundation I (d) the value o	f the foundation if the goods, othe	ould always show the fair m received less than fair mar r assets, or services receiv of transfers, transactions, and s	ket value ⁄ed		nts
							<u> </u>			
des	cribed No	indation directly or indit in section 501(c) of the complete the following s (a) Name of organization	ne Code (d schedule	other than sectio	•	in section 527?.	(c) Description of rela	·	es	
							mpanying schedules and st preparer (other than taxpay			
Sign Here		rmation of which prepar	er has an	y knowledge	2016-11-07	****	May retu	the IRS di	scuss th	าเร
		Signature of officer or t	rustee		Date	Tıtle	belo	the prepar w instr)?	_	
		Print/Type preparer's DAVID L DUFFY CF		Preparer's Sıgr	nature	Date 2016-11-08	Check if self- PTIN	003677		
Paid Prep Use	arer	Firm's name ► DAVID DUFFY CPA P	LLC			I	Firm's EIN ▶ 38-27718	17		
Only		Firm's address ► 26622 Woodward Avenue Suite 250 Royal Oak, MI 48067 Phone no (248) 542-8340						340		

cine distinize princ Be not incesses	AS Thea Bata		22/11/20 12/2012/2012/20
TY 2015 Accounting Fees Scho	edule		
Name:	LIGHT ACTION FO	DUNDATION	
ETNI.	20 2477755		

DLN: 93491313000116

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Office supplies

EIN: 38-24///55				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting fees	350	0	0	0

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