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DAA

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.

Form 990-PF (2015)

| Intern | al Reven | ue Service ► Informatio | n about Form 990-PF | and its separate | instructions | s is at www.ir | s.gov/form9 | 90pf. | Open to Fubli | c inspection |
|--|-----------|---|---------------------------|---------------------------------|--------------|---------------------|---|---|---------------------------------------|---|
| For | calend | lar year 2015 or tax year beginnin | g10/26/15 , | and ending 06 | /30/16 | | | | | |
| | me of fou | | | | | A Empl | oyer Identificatio | n number | | |
| | | T MEADOWS FOUNDAT: | ION, INC. | | | ŀ | | | | |
| | | JOHN S. LUEKEN | | | | | <u>-540950</u> | | | |
| | | street (or PO box number if mail is not delive | • | | Room/suite | B Telep | hone number (see | instruction | s) | |
| | | S. 5TH STREET STI | E. 3500 | | | _ | | | | |
| | | SVILLE | KY 40202-3 | 140 | | C If exe | mption application | is pending | , check here | ▶ [|
| | | all that apply X Initial return | | rn of a former publ | o obority | ─ │ 、 | | | | |
| • | JIIBUK 6 | Final return | Amended | • | ic chanty | | reign organization | | | |
| | | = | | | | L | reign organization % test, check her | | | . [|
| | | Address cha | | | | - ⊢ " | n test, a leak lief | and allace | n computation | |
| | | type of organization X Section 50 | | | | | ate foundation sta | | minated under | |
| | | n 4947(a)(1) nonexempt charitable t | | le private foundation | | | n 507(b)(1)(A), ch | eck nere | | |
| | | | Accounting method | X Cash | Accrual | | foundation is in a | | | |
| | - | ear (from Part II, col (c), | Other (specify) | | | under | section 507(b)(1) | (B), check r | here | - |
| | ne 16) | | Part I, column (d) must | be on cash basis | | | | | T : | |
| P | art I | Analysis of Revenue and Exper amounts in columns (b), (c), and (d) may not | | (a) Revenue and expenses per | (b) No | et investment | (c) Adjuste | | (d) Disbur for char | |
| | | the amounts in column (a) (see instructions) | | books | | income | income | • | purpo (cash bas | |
| - | 1 | Contributions, gifts, grants, etc , receive | d (attach schedule) | 656,0 | 30 | | 7 | ೧೯ | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ;***\ |
| | 2 | | required to attach Sch. B | | | | | aaragadesia | () | 4 |
| | 3 | Interest on savings and temporary | , | | 13 | 13 | 4 | | | 18 |
| | 4 | Dividends and interest from securi | | 4,7 | 05 | 4,705 | 0 | FE | 3 2 3 20 | |
| | 5a | Gross rents | Letest from securities | | | | | | 3 | ************************************** |
| a | Ь | Net rental income or (loss) | | ···· | | | 1 | <i>€</i> | (AETA) | ************************************** |
| Revenue | 6a | Net gain or (loss) from sale of assets not on line | 10 | -15,3 | 76 | | L | | | ranitra arrana |
| ē | Ь | Gross sales price for all assets on line 6a | 653,398 | | | | | | | |
| Š | 7 | Capital gain net income (from Part | | | | 0 | | *************************************** | | *************************************** |
| _ | 8 | Net short-term capital gain | , | | | | | 0 | | 1 |
| | 9 | Income modifications | | | | | | | | |
| | 10a | Gross sales less returns and allowances |] | | | | | | | |
| | Ь | Less Cost of goods sold | | | | | | | | *************************************** |
| | C | Gross profit or (loss) (attach sched | dule) | | | | | | | |
| | 11 | Other income (attach schedule) | | | | | | | | |
| | 12 | Total. Add lines 1 through 11 | | 645,3 | 72 | 4,718 | | 0 | | |
| | 13 | Compensation of officers, directors | s, trustees, etc | | 0 | | _ | | | |
| enses | 14 | Other employee salaries and wage | es | 25,0 | 00 | | | | | 25,000 |
| | 15 | Pension plans, employee benefits | ' | | | | | | | |
| × | 16a | Legal fees (attach schedule) SE | EE STMT 1 | 4,7 | 92 | | | | | 4,792 |
| ш | b | Accounting fees (attach schedule) | i L | L | | | | | | |
| Operating and Administrative Exp | C | Other professional fees (attach schedule | e) STMT 2 | 1,0 | 55 | 1,055 | | | | 1,055 |
| | 17 | Interest | | | | | | | | |
| zi. | 18 | Taxes (attach schedule) (see instruction | | | | | | | | |
| F | 19 | Depreciation (attach schedule) and dep | letion STMT 3 | 4 | 41 | | | | | |
| ֓֞֞֝֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓ | 20 | Occupancy | | | | | · | | | |
| 4 5 7 | 21 | Travel, conferences, and meetings | \$ | | | | | | | |
| ڃ | 22 | Printing and publications | | | | | | | | |
| ුව | 23 | Other expenses (att. sch) | STMT 4 | 7 | 02 | | | | | 702 |
| | 24 | Total operating and administrate | ive expenses. | | Ì | | | | | |
| 20 20 | | Add lines 13 through 23 | | 31,9 | 90 | 1,055 | ······································ | 0 | <u> </u> | 31,549 |
| چې | 25 | Contributions, gifts, grants paid | | | 0 | · | | | | 0 |
| <u>~</u> | 26 | Total expenses and disbursements. | . Add lines 24 and 25 | 31,9 | 90 | 1,055 | ····· | 0 | | 31,549 |
| • | 27 | Subtract line 26 from line 12 | | | | | | | | |
| | а | Excess of revenue over expenses a | | 613,3 | 82 | | | ······································ | | |
| | Ь | Net investment income (if negati | | | | 3,663 | , | | | |
| | 1 ~ | Adjusted net income (if negative | enter -0-) | 1 | - E | | | 0 | E | |

| Part III Analysis of Ch | anges in Net Assets or Fund Balances | | |
|------------------------------------|--|---|---------|
| 1 Total net assets or fund balance | s at beginning of year - Part II, column (a), line 30 (must agree with | | |
| end-of-year figure reported on p | rior year's return) | 1 | 0 |
| 2 Enter amount from Part I, line 2 | 7a | 2 | 613,382 |
| 3 Other increases not included in | line 2 (itemize) ▶ | 3 | |
| 4 Add lines 1, 2, and 3 | | 4 | 613,382 |
| 5 Decreases not included in line 2 | (itemize) ▶ | 5 | |
| 6 Total net assets or fund balance | s at end of year (line 4 minus line 5) – Part II, column (b), line 30 | 6 | 613.382 |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

6

7

7 Add lines 5 and 6

Part VI instructions

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

| 177 | 990-PF (2015) GREAT MEADOWS FOUNDATIONS, INC. 47-5409501 | | | F | age 4 |
|----------|---|-------------|-----|------|------------|
| Pa | TY 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 | | | | <u>7</u> 3 |
| | 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-) | | | | 0 |
| 3 | Add lines 1 and 2 | | | | 73 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | | | 73 |
| 6 | Credits/Payments: | | | | |
| а | 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) 6c | | | | |
| d | Backup withholding erroneously withheld 6d 6d | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | | 73 |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | | |
| 11 | Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ Refunded ▶ 11 | | | | |
| Pa | rt VII-A Statements Regarding Activities | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | | Yes | No |
| | participate or intervene in any political campaign? | | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | | |
| | Instructions for the definition)? | | 1b | | _ X_ |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | |
| С | Did the foundation file Form 1120-POL for this year? | | 1c | | X |
| 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 ▶ \$ | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | |
| | on foundation managers > \$ | i | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | X |
| | If "Yes," attach a detailed description of the activities. | | | | |
| 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 | | 3 | | <u>X</u> |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 37/3 | 4a | | <u> </u> |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | N/A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | <u>x</u> _ |
| | If "Yes," attach the statement required by General Instruction T. | | - 1 | | |
| 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 to relation that offset with among the governing instrument on that no manufacture dispations that | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | -J | |
| - | conflict with the state law remain in the governing instrument? | , | 7 | 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 Enter the states to which the foundation reports or with which it is registered (see instructions) | ' | - | ^ | |
| 8a | KY | | - 1 | | |
| L | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | | |
| b | (or designate) of each state as required by General Instruction G? If "No," attach explanation | i | 8b | x | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | 00 | | |
| 3 | 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," | | | | |
| | complete Part XIV | | 9 | | x |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | | |
| | names and addresses | | 10 | x | |
| | 71 E PTD 1 TOT | 74 - | | A DE | |

| Form | 1990-PF (2015) GREAT MEADOWS FOUNDATIONS, INC. 47-5409501 | | | P | age 5 |
|------------|--|-----------|-------------|------|-----------------|
| _P | art VII-A Statements Regarding Activities (continued) | | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | 1 | Yes | No |
| | meaning of 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? 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 | |
| | Website address ► N/A | | | | |
| 14 | The books are in care of ▶ BALDWIN BROTHERS INC Telephone no. ▶ | 508-7 | 48- | 080 | 0 |
| | 204 SPRING STREET | | | | |
| | Located at ► MARION MA ZIP+4 ► | 02738 | -15 | 70 | |
| 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 | 15 | | | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority | | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | | 16 | L | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of | | | | |
| ****_* | the foreign country ▶ | | <u> </u> | | · |
| _ <u>P</u> | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | Yes | <u>No</u> |
| 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? | X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | | |
| | disqualified person? Yes | X No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | X No | | | |
| | (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)? | X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | | |
| | foundation agreed to make a grant to or to employ the official for a period after | E | | | |
| | termination of government service, if terminating within 90 days) | X 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 | /- | | | |
| | 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 | | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | 37/3 | | | |
| _ | were not corrected before the first day of the tax year beginning in 2015? | N/A | 1c | | |
| 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)). | | | | |
| а | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and | X No | | | |
| | 6e, Part XIII) for tax year(s) beginning before 2015? If "Yes," list the years ▶ 20 , 20 , 20 , 20 | X No | | | |
| h | If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | | |
| b | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | | |
| | all years listed, answer "No" and attach statement – see instructions.) | N/A | 2b | 1 | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | М/Д | 20 | | |
| C | ► 20 , 20 , 20 , 20 | | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | | |
| Ja | at any time during the year? | X No | | | |
| b | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or | 110 | | | |
| | disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the | | | | |
| | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of | | | | |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | | | |
| | foundation had excess business holdings in 2015) | N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | , | 4a | | x |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | | _ _ |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | | 4b | | x |
| | The first of the second | F | | 0-PF | |
| | | - | | | ,,0) |

| | n 990-PF (2015) GREAT MEADO | | | 409501 | | | P | age 6 |
|-----|---|--|--|-----------------------------|--|--|-------------|--------|
| | | ding Activities for Which For | rm 4720 May Be R | Required (cont | inued) | | | |
| 5a | During the year did the foundation pay | | | | - | | - 1 | |
| | (1) Carry on propaganda, or otherwise | e attempt to influence legislation (sect | ion 4945(e))? | <u> </u> | res 🗓 No | | | ĺ |
| | (2) Influence the outcome of any spec | ific public election (see section 4955) | , or to carry on, | | | | | ĺ |
| | directly or indirectly, any voter regi | stration drive? | | □ ' | res 🔀 No | | | İ |
| | (3) Provide a grant to an individual for | travel, study, or other similar purpose | es? | □, | res 🗓 No | | | ĺ |
| | (4) Provide a grant to an organization | other than a charitable, etc., organiza | ition described in | | _ | | | į |
| | section 4945(d)(4)(A)? (see instruc | ctions) | | ∐ , | res X No | | | |
| | (5) Provide for any purpose other than | i religious, charitable, scientific, literai | ry, or educational | _ | | | | į |
| | purposes, or for the prevention of | | | | res 🗓 No | | | |
| þ | If any answer is "Yes" to 5a(1)–(5), did | | | | | | | į |
| | Regulations section 53.4945 or in a cu | rrent notice regarding disaster assista | ance (see instructions)? | • | N/A | 5b | | |
| | Organizations relying on a current noti | ce regarding disaster assistance chec | ck here | | ▶ [_] | | | |
| C | If the answer is "Yes" to question 5a(4 |), does the foundation claim exemptic | on from the tax | | | | | į |
| | because it maintained expenditure res | ponsibility for the grant? | | N/A 🗌 , | res 💹 No | | | : |
| | If "Yes," attach the statement required | by Regulations section 53 4945-5(d) | | | | | | i |
| 6a | Did the foundation, during the year, re- | ceive any funds, directly or indirectly, | to pay premiums | _ | | | | i |
| | on a personal benefit contract? | | | , | res 🛚 X No | | | |
| b | Did the foundation, during the year, pa | y premiums, directly or indirectly, on | a personal benefit contr | ract? | | 6b | | X |
| | If "Yes" to 6b, file Form 8870 | | | | | | | |
| 7a | At any time during the tax year, was th | e foundation a party to a prohibited ta | ax shelter transaction? | □, | res 🗓 No | | | |
| | If "Yes," did the foundation receive any | | | | N/A | 7b | | |
| P | | Officers, Directors, Trustees, | , Foundation Man | agers, Highly | Paid Employ | ees, | | |
| | and Contractors | | | | | | | |
| 1_ | List all officers, directors, trustees, fo | undation managers and their comp | pensation (see instruc | tions). | | | | |
| | | | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit | (a) Eyn | ense ac | count |
| | (a) Name an | d address | hours per week devoted to position | (If not paid, enter -0-) | plans and deferred | | allowan | |
| | | | | , | compensation | | | |
| A | LFRED R. SHANDS, III | LOUISVILLE | PRESIDENT | | | | | |
| | 01 S FIFTH STREET | KY 40202 | 10.00 | 0 | <u> </u> | | | 0 |
| | ICHAEL BALDWIN | LOUISVILLE | VICE PRESIDE |) | | } | | |
| | 01 S FIFTH STREET | KY 40202_ | 0.00 | 0 | | ├── | | 0 |
| | OHN LUEKEN | LOUISVILLE | SECRETARY | | _ | ļ | | |
| _10 | 01 S FIFTH STREET | KY 40202 | 0.00 | 0 | 0 | ├ | | 0 |
| | | | | | | | | |
| | | 1 (-AlAl IIII | | <u> </u> | | <u> </u> | | |
| 2 | Compensation of five highest-paid ("NONE." | employees (other than those includ | led on line 1 – see ins | tructions). If non | e, enter | | | |
| | NONE. | | <u> </u> | | (1) Contabutanata | | | |
| | tabbles and address of each amplement | | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit | (e) Exp | ense acc | count, |
| | (a) Name and address of each employe | se paid more than \$50,000 | devoted to position | (c) Compensation | plans and deferred compensation | other | allowan | ces |
| | | | | | compensation | ├── | | |
| N | ONE | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | 1 | 1 | | | |
| | | | - | | | | | |
| | | | | | | | | |
| | al number of other employees paid over | \$50,000 | | 1 | <u> </u> | | | |
| Ota | ar number of other employees paid over | 9 50,000 | | | | om 990 | | 0 |
| | | | | | Fe | JETE MIK | 7-F F | (2015) |

| Form 990-PF (2015) GREAT MEADOWS FOUNDATIONS, INC. | 47-5409501 | Page 7 |
|--|--------------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundary and Contractors (continued) | oundation Managers, Highly Paid Er | nployees, |
| 3 Five highest-paid independent contractors for professional services (see i | nstructions). If none, 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 | | <u> </u> |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform | nation such as the number of | Ev |
| organizations and other beneficiaries served, conferences convened, research papers produced, etc | | Expenses |
| 1 N/A | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see in | nstructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and | d 2 | Amount |
| 1 N/A | | |
| | | |
| 2 | | |
| • | | |
| All other program-related investments. See instructions | | |
| 3 | | |
| | | |
| Potal Addition (About to 2) | | - |

| orm | 990-PF (2015) GREAT MEADOWS FOUNDATIONS, INC. 47-5409501 | | Page 8 |
|-----|---|-------------|-------------|
| Pa | ift X Minimum Investment Return (All domestic foundations must complete this part. Foreign | n founda | tions, |
| | see instructions) | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | T | |
| | purposes | } } | |
| а | Average monthly fair market value of securities | 1a | 627,426 |
| b | Average of monthly cash balances | 1b | 0 |
| С | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 627,426 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) |) | |
| 2 | Acquisition indebtedness applicable to line 1 assets |] 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 627,426 |
| 4 | Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see | | |
| | instructions) | 4 | 9,411 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 618,015 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 21,023 |
| Pa | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating | foundation | |
| | and certain foreign organizations check here ▶ and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 21,023 |
| 2a | Tax on investment income for 2015 from Part VI, line 5 | | |
| b | Income tax for 2015 (This does not include the tax from Part VI.) | 1 [| |
| | Add lines 2a and 2b | 2c | 73 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 20,950 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 20,950 |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, | | |
| • | line 1 | 7 | 20,950 |
| | | | |
| P | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| а | Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26 | 1a | 31,549 |
| b | Program-related investments – total from Part IX-B | 1b | |
| 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 | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| | 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 | 31,549 |
| 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 (see instructions) | 5 | 0 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 31,549 |
| • | Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the found | | |

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

| Form | 990-PF (2015) GREAT MEADOWS | FOUNDATIO | NS, INC. | 47-540950 | l. | Page ' |
|--------|---|-------------------|----------|----------------------------|--|----------|
| Pa | rt XIII Undistributed Income (| see instructions) | | | | |
| | | | (a) | (b) Years prior to 2014 | (c) | (d) |
| 1 | Distributable amount for 2015 from Part XI, | ŀ | Corpus | Tears prior to 2014 | 2014 | 2015 |
| 2 | line 7 Undistributed income, if any, as of the end | of 2015 | | | | 20,950 |
| _ | Enter amount for 2014 only | 01 2013 | | | | |
| | Total for prior years: 20 , 20 | 20 | | | | <u> </u> |
| 3 | Excess distributions carryover, if any, to 20 | | | | | |
| a | From 2010 | | | | | |
| b | From 2011 | | | | | |
| С | From 2012 | | | | | |
| d | From 2013 | | | | | |
| е | From 2014 | | | | | |
| f | Total of lines 3a through e | | | 1 | | |
| 4 | Qualifying distributions for 2015 from Part > | cii, | | | | |
| | line 4: ▶ \$ 31,549 | | | | | |
| а | Applied to 2014, but not more than line 2a | | | | | |
| b | Applied to undistributed income of prior year | ars | | | | |
| | (Election required – see instructions) | | | | ······································ | |
| С | Treated as distributions out of corpus (Elec | tion | | | | |
| | required - see instructions) | ļ | | | ······································ | |
| | Applied to 2015 distributable amount | | | | | 20,950 |
| е | Remaining amount distributed out of corpus | 5 | 10,599 | | ······ | |
| 5 | Excess distributions carryover applied to 20 | | | | | |
| | (If an amount appears in column (d), the sa | ıme | | | | |
| _ | amount must be shown in column (a).) | | | | | |
| 6 | Enter the net total of each column as | | | | | |
| _ | indicated below: | ino E | 10,599 | | | |
| | Corpus Add lines 3f, 4c, and 4e Subtract I | T | 10,599 | | ······ | |
| D | Prior years' undistributed income Subtract line 4b from line 2b | | | | | |
| _ | Enter the amount of prior years' undistribute | ed . | | | | |
| · | income for which a notice of deficiency has | | | ľ | | |
| | been issued, or on which the section 4942(| | | | • | |
| | tax has been previously assessed | ω, | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | ······································ | |
| | amount - see instructions | | | | | |
| е | Undistributed income for 2014 Subtract line | e | | | | |
| | 4a from line 2a. Taxable amount see | | | | | |
| | instructions | | | | | |
| f | Undistributed income for 2015 Subtract line | es | | | | |
| | 4d and 5 from line 1. This amount must be | | | | | |
| | distributed in 2016 | | | | | 0 |
| 7 | Amounts treated as distributions out of corp | | | | | |
| | to satisfy requirements imposed by section | 1 | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | • | | | | |
| | required—see instructions) | | | | | |
| 8 | Excess distributions carryover from 2010 n | | | | | |
| _ | applied on line 5 or line 7 (see instructions) | Ì | | | | |
| 9 | Excess distributions carryover to 2016. | | 10,599 | | ı | |
| 40 | Subtract lines 7 and 8 from line 6a | Ì | 10,599 | | | |
| 10 | Analysis of line 9. Excess from 2011 | ļ | | | i | |
| a b | Excess from 2011 | | | | | |
| C | Excess from 2012 | | | | | |
| d | Excess from 2014 | | | | , | |
| e | Excess from 2015 | 10,599 | | | | |

| Pa | rt XIV Private Operating Fou | indations (see in: | <u>structions and Par</u> | <u>t VII-A, question 9</u> |) | | |
|----------|--|--|---------------------------|----------------------------|---------------------|--------------|--|
| 1a | If the foundation has received a ruling or | determination letter th | at it is a private opera | ting | | | |
| | foundation, and the ruling is effective for 2015, enter the date of the ruling | | | | | | |
| ь | - | undation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) | | | | | |
| 2a | 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 | | | | <u>``</u> | | |
| | each year listed | | | | | | |
| L | 85% of line 2a | | | | | | |
| p | • • | | | | | | |
| С | Qualifying distributions from Part XII, | | | | i | | |
| | line 4 for each year listed | | <u> </u> | | | | |
| d | Amounts included in line 2c not used directly | | | | | | |
| | for active conduct of exempt activities | | | | | | |
| е | Qualifying distributions made directly | | | | | | |
| | for active conduct of exempt activities | | | | | | |
| | Subtract line 2d from line 2c | | | | · | | |
| 3 | Complete 3a, b, or c for the | | | | | | |
| | alternative test relied upon | | | | | | |
| 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 | | | | | | |
| | | | | ļ | | | |
| | Part X, line 6 for each year listed | | | | | | |
| С | "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) | | ļ | <u> </u> | | | |
| | (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 | | | | | | |
| Pa | ert XV Supplementary Inforn | nation (Complete | this part only if | the foundation ha | ad \$5,000 or more | in assets at | |
| | any time during the ye | | - | | • • | | |
| 1 | Information Regarding Foundation Ma | | | | | | |
| a | List any managers of the foundation who | ·- | e than 2% of the total | contributions received | by the foundation | | |
| - | before the close of any tax year (but only | | | | | | |
| | ALFRED R SHANDS, III | | od moro tilan 40,000) | (000 000 | ·· / | \$656,030 | |
| | List any managers of the foundation who | | the stock of a comorat | ion (or an equally large | portion of the | | |
| b | ownership of a partnership or other entity | | | | portion of the | | |
| | N/A |) or willon the loundar | ion nas a 10 % or grea | iter interest. | | | |
| | | Secret Ciff Learn Cal | | | | | |
| 2 | Information Regarding Contribution, C | | _ | | | | |
| | Check here ► X if the foundation only | | | _ | · | | |
| | unsolicited requests for funds. If the foun | | ants, etc (see instruct | tions) to individuals or o | organizations under | | |
| | other conditions, complete items 2a, b, c | | | | | | |
| а | The name, address, and telephone numb | er or e-mail address | of the person to whom | applications should be | addressed. | | |
| | N/A | | | | | | |
| | | | | - | | | |
| _ b | The form in which applications should be | submitted and inform | nation and materials th | ey should include. | | | |
| | N/A | | | | | | |
| | Any submission deadlines. | | | | | | |
| • | N/A | | | | | | |
| | Any restrictions or limitations on awards, | such as by geograph | ical areas, charitable f | ields, kinds of institutio | ns. or other | | |
| 4 | factors: | by googiapii | a. cas, e. a. marinable l | | · -, | | |
| | N/A | | | | | | |
| | 47/43 | | | | | | |

| Part Av Supplementary information (CC | initiaca/ | | | |
|---|--|----------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the | Year or Approved for F | uture Payment | | |
| Recipient | if recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | 1 | |
| a Paid during the year | | | | |
| N/A | | | | |
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| b Approved for future paymentN/A | | | | |
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| Total | <u> </u> | | > _3b | |
| Total | | | | |

| Ent | er gross amounts unless otherwise indicated. | Unrelate | d business income | Exclude | by section 512, 513, or 514 | (e) |
|-------------------|---|----------------------|--|--|-----------------------------|--|
| | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions) |
| 1 | Program service revenue | | | | | (000 11.00.100.100.10) |
| | a | | | - | | |
| | b | <u> </u> | - · · · · · · · · · · · · · · · · · · · | | | |
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| | f | | | | | |
| | g Fees and contracts from government agencies | | | | | |
| 2 | Membership dues and assessments | | | | | |
| | Interest on savings and temporary cash investments | | | 14 | 13 | |
| | Dividends and interest from securities | | | 14 | 4,705 | |
| 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 | | | 14 | -15,376 | |
| 9 | Net income or (loss) from special events | | | <u> </u> | | · |
| | Gross profit or (loss) from sales of inventory | | | | | |
| 11 | Other revenue: a | | | | | |
| | b | | | ļ | | |
| | c | | | | | |
| | d | | | | | |
| | e | | · | ļ . | | |
| | Outstand And and and the feet of the feet | | | 11 | -10,658 | 0 |
| | Subtotal Add columns (b), (d), and (e) | <u></u> | | <u>' L</u> | | |
| 13 | Total. Add line 12, columns (b), (d), and (e) | | | <u>' </u> | 13 | |
| 1 3 (Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) | a a maliah m | | | 13 | |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the A | | ent of Exempt P | urpose | 13 S | |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities No. Explain below how each activity for which income | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities No. Explain below how each activity for which income | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
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| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| 13 Se | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |
| Se F | Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Activities to the Activity for which income accomplishment of the foundation's exempt purpose. ■ | is reported in c | ent of Exempt P | urpose | 13s | -10,658 |

| 2a Is the foundation directly or indirectly affilial described in section 501(c) of the Code (of | t organizations Yes X No | |
|---|--|--|
| b If "Yes," complete the following schedule. | | |
| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
| N/A | | |
| · · · · · · · · · · · · · · · · · · · | | |
| | | |
| | | |
| | | |
| Linder panelties of pagure, I declare that I have a | examined this return uncluding accompaning schodules and | d statements, and to the best of my knowledge and belief it is top |

correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return

| Sign | |
|------|--|
| Here | |

gnature of officer or trustee

with the preparer shown below (see instructions)? X Yes

| S | ECRETARY |
|------|----------|
| ,tla | |

Check if self-employed

Paid Preparer

Use Only

E. DANIEL CLIFT, CPA

WILLIAM S. WETTERER & Firm's name

(Print/Type preparer's name

Firm's address ▶

CO., 3042 BRECKENRIDGE LN LOUISVILLE, KY 40220-2102

Firm's EIN ▶ Phone no

P01253769 61-1036216 502-491-5550

Form 990-PF (2015)

1410505 Great Meadows Foundations, Inc. 47-5409501

FYE: 6/30/2016

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees

| Charitable Purpose | \$ 4,792 | \$ 4,792 |
|-----------------------|------------|----------|
| Adjusted Net | w | o |
| Net Investment | w | v. |
| Total | \$ 4,792 | \$ 4,792 |
| Description | LEGAL FEES | TOTAL |

| Charitable Purpose | \$ 1,055 | \$ 1,055 |
|-----------------------|--------------|----------|
| Adjusted Net | w | \$ |
| Net restment | 1,055 | 1,055 |
| <u>l</u> | ۍ م | υ. I |
| Total | 1,055 | 1,055 |
| | δ | ₩. |
| Description | ADVISORY FEE | TOTAL |

Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees

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| | Adjusted Net Income | | 10 | 0 |
|-------------|------------------------------|----------|------------|-------|
| | Net Investment Income | | \$ | \$ |
| | Current Year Depreciation | ! | 441 | 441 |
| | Life | | Ω. | VF |
| | Method | | 200DB | |
| Description | Prior Year Depreciation | | 33 | \$ |
| | Cost Basis | | . 2,204 | 2,204 |
| | Date Acquired | COMPUTER | 3/22/16 \$ | TOTAL |

| | • | Charitable Purpose | 446 256 \$ 702 | | Net FMV | w w | | | 4-5 |
|---|---|-----------------------|---|---|---------------------------------|--|--|--|-----|
| | sesuee | Adjusted Net | | ind Equipment | End Accumulated Depreciation | \$ 441 | | | |
| tements | Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses | Net Investment | 0 | Statement 5 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment | End Cost / Basis | \$ 2,204 | | | |
| Federal Statements | 4 - Form 990-PF, Part | Total | 446 256 702 | n 990-PF, Part II, Line | Beginning Net Book | w w | | | |
| s Foundations, Inc. | Statement | | v | Statement 5 - Form | tion | ENT TION | | | |
| 1410505 Great Meadows Foundations, Inc. 47-5409501 FYE: 6/30/2016 | | Description | EXPENSES TELEPHONE WEBSITE HOSTING TOTAL | | Description | FURNITURE AND EQUIPMENT ACCUMULATED DEPRECIATION TOTAL | | | |

1410505 Great Meadows Foundations, Inc.
47-5409501 Federal Statements

47-54095Q1

FYE: 6/30/2016

| Statement 6 - | Form 990-PF, | Part II, Line 22 | - Other Liabilities |
|---------------|----------------------------------|------------------|---------------------|
| | | | |

| Description | Beginning of Year | End of Year |
|------------------------|----------------------|--------------------|
| UNREALIZED GAIN (LOSS) | \$ | \$ 10,407 |
| TOTAL | \$0 | \$ 10,407 |

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

| | Name of Manager | Amount |
|------------------|-----------------|---------------|
| ALFRED R SHANDS, | III | \$ 656,030 |
| TOTAL | | \$ 656,030 |

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

or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

GREAT MEADOWS FOUNDATIONS, INC.

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, 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

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

2015

| C/O JOHN S. I | UEKEN | | 47-5409501 |
|---|--|--|-----------------------------|
| Organization type (check o | ıe)· | | |
| Filers of: | Section: | | |
| Form 990 or 990-EZ | 501(c)() (enter number) or | rganization | |
| | 4947(a)(1) nonexempt charitable t | trust not treated as a private foundation | · |
| | 527 political organization | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | on | |
| | 4947(a)(1) nonexempt charitable t | trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | nc | |
| · - | covered by the General Rule or a Specia 7), (8), or (10) organization can check box | al Rule. kes for both the General Rule and a Special F | Rule. See |
| General Rule | | | |
| | r property) from any one contributor. Com | eceived, during the year, contributions totaling plete Parts I and II See instructions for deter | _ |
| Special Rules | | | |
| regulations under se 13, 16a, or 16b, and | ctions 509(a)(1) and 170(b)(1)(A)(vı), that that received from any one contributor, du | 990 or 990-EZ that met the 33 ¹ / ₃ % support t checked Schedule A (Form 990 or 990-EZ), uring the year, total contributions of the great 1h, or (ii) Form 990-EZ, line 1 Complete Pa | Part II, line ter of (1) |
| contributor, during th | e year, total contributions of more than \$1 | filing Form 990 or 990-EZ that received from 1,000 exclusively for religious, charitable, scie ty to children or animals. Complete Parts I, II | entific, |
| contributor, during the contributions totaled during the year for a | e year, contributions exclusively for religion more than \$1,000. If this box is checked, in exclusively religious, charitable, etc., pur is to this organization because it received | filing Form 990 or 990-EZ that received from ous, charitable, etc , purposes, but no such enter here the total contributions that were reprose Do not complete any of the parts unle nonexclusively religious, charitable, etc , con | eceived ess the |
| 990-EZ, or 990-PF), but it m | ust answer "No" on Part IV, line 2, of its F | or the Special Rules does not file Schedule form 990, or check the box on line H of its Foquirements of Schedule B (Form 990, 990-EZ | orm 990-EZ or on its |

Name of organization

GREAT MEADOWS FOUNDATIONS, INC. Employer identification number 47-5409501

| Part 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 | ALFRED R. SHANDS, III 101 S FIFTH STRET SUITE 3500 LOUISVILLE KY 40202 | \$ 656,030 | 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 Payroli 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) | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) | | | |

PAGE 1 OF 1

Page 3

Name of organization

GREAT MEADOWS FOUNDATIONS, INC.

Employer identification number 47 - 5409501

| Part II | Noncash Property (see instructions). Use duplicate | copies | s of Part II if additional space | ce is needed. ————————————————————————————————— |
|---------------------------|--|----------------|--|--|
| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | 6300 SHS, ENTERPRISE PRODS PTR | | | |
| | | \$ | 141,750 | 01/13/16 |
| (a) No. from Part I | (b) Description of noncash property given | · - | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | 7857 SHS, MAGELLAN MIDSTREAM PT | | | |
| | | \$ | 514,280 | 01/13/16 |
| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | | |
| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | | |
| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | | |
| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | | |