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Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

		t of the Treasury				ecurity numbers			ade public. s.gov/form990pf.	2010
		venue Service	or tax year beginning			2015		ending		Open to Public Inspection
		f foundation	or tax year beginning	001	Ι,	2015	, anu i	enumy	A Employer identification	
			ILY FOUND						65-063153	4
		-	box number if mail is not o		address)	1		Room/suite	B Telephone number	0.2.4
			COVINCE, COUNTRY, and 2		octal oc	ndo.		1	609-274-6	
		VEGAS,			USIAI UL	oue			C If exemption application is	s pending, check here
G (Check	all that apply:	Initial retu	rn		Initial return of	a former public	charity	D 1. Foreign organizatio	ns, check here
			Final retur	n		Amended returi	1			·
			Address o			Name change			Foreign organizations r check here and attach	computation
H_(_	type of organiz				rivate foundation			E If private foundation s	
			i) nonexempt charitab			xable private fou			under section 507(b)(1)(A), check here
			assets at end of year	1 —			n Acc	rual	F If the foundation is in	7
") ⊘ ⊳		Part II, col. (c),	9,467,000		her (sp mn (d)		h hasis)		under section 507(b)(1)(B), check here
	irt l	Analysis of R	evenue and Expense	8) Revenue and		nvestment	(a) Adjusted net	(d) Disbursements
_1		The total of am necessarily equ	ounts in columns (b), (c), a al the amounts in column	ind (d) may not (a))		enses per books		come	(c) Adjusted net income	for charitable purposes (cash basis only)
 >	1	Contributions,	gifts, grants, etc., rec	eived		191,903	•		N/A	
ت	2		rf the foundation is not required	to attach Sch B		_				
7	3	Interest on saving cash investments	gs and temporary s			56,652		56,533.		STATEMENT 1
SCANNED DE	4	Dividends and	interest from securities	es		174,799	. 17	74,799.		STATEMENT 2
<u>iii</u>	5a	Gross rents								
		Net rental income	• •			246 200				
≪ a	ba L	Net gain or (loss) Gross sales price assets on line 6a	from sale of assets not or for all 1 1 1 7 1	1 line 10 0 , 407 .	•	<346,390	•>			
<i>₹</i> 05	7							0.		
Z Š	8	Net short-term	ncome (from Part IV, line 2 Leanital gain)						
	9	Income modifi	, •							
	102	Gross sales less	returns			 .				
	b	Less Cost of goo	ods spld							·
	C	Gross profit of	(loss) ECEIVE	DI						
	11	Other income		ان —		2,019		2,019.		STATEMENT 3
	12		es 1Millipiyaliga 20			78,983		<u>33,351.</u>		
	13	, ,	f officers, directors, trustee	es, etc		103,312	•	0.		103,312.
	14	Other employe	e salaries and wages- empinyee benefits							
es S	l	Legal fees		l'MT-4		5,359		0.		5,359.
ens	l .	Accounting fee		CMT 5		1,000		500.		500.
Expenses	ı	Other profession		rmt 6		86,190		2,143.		14,047.
8	17	Interest								
rati	18	Taxes	S	PMT 7		10,086	•	1,096.		8,990.
nist	19	Depreciation a	nd depletion							
Ë	20	Occupancy								
Α̈́Þ		-	ences, and meetings				-			
a	22	Printing and pi		BACTI O		11 070	1	0 041	<u>.</u>	121
ţi	23	Other expense		PMT 8		11,072	<u>• </u>	0,941.		131.
Operating and Administrative	24	-	g and administrative d lines 13 through 23			217,019		84,680.		132,339.
o	25	-	gifts, grants paid			$\frac{217,019}{353,500}$, , , , , , , , ,		353,500.
			s and disbursements		-	223,300	-			333,300.
_	Ĺ	Add lines 24 ai				570,519	8	4,680.		485,839.
	27	Subtract line 2						<u>-</u>		
	a	Excess of revenue	e over expenses and disb	ursements		< 491,53 6				
			t income (If negative, er				14	8,671.		
	C	Adjusted net in	ncome (if negative, enter	-0-)					N/A	[

For	m 99	0-PF (2015) BENDON FAMILY FOUNDATION	65-0631534 Page 2				
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		nd of year		
<u>-</u>	<u></u>	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Va	lue	
	1	Cash - non-interest-bearing	6,480.	95,410		110.	
	2	Savings and temporary cash investments	2,000,168.	965,573	3. 965,5	<u> 573.</u>	
	3	Accounts receivable ►					
		Less: allowance for doubtful accounts					
	4	Pledges receivable ▶			Ì		
		Less: allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and toans receivable					
	ļ	Less: allowance for doubtful accounts					
Ŋ	8	Inventories for sale or use					
Assets		Prepaid expenses and deferred charges					
As	1	Investments - U.S. and state government obligations					
	Į	Investments - corporate stock STMT 11	4,532,416.	4,951,625	5, 5,121,4	159.	
	1	Investments - corporate bonds STMT 12	2,261,459.	2,281,543			
	1	Investments - land, buildings, and equipment basis	2/202/2001		<u> </u>		
	•	Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other STMT 13	1,234,175.	1,257,03	7. 987,8	332.	
	1	Land, buildings, and equipment: basis			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	'	Less accumulated depreciation					
	15	Other assets (describe ▶)					
	1	Total assets (to be completed by all filers - see the					
	"	Instructions. Also, see page 1, item I)	10,034,698.	9,551,188	9,467,0	100	
_	17	Accounts payable and accrued expenses	10,034,030.	<u> </u>	<u> </u>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
	1	Grants payable			_		
10	1	Deferred revenue			(
Liabilities	20				_		
<u>=</u>	1	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable					
ם		Other liabilities (describe					
	22	Other habilities (describe			 		
	23	Total liabilities (add lines 17 through 22)	0.	(o .		
_	20	Foundations that follow SFAS 117, check here			y •		
	Ì	and complete lines 24 through 26 and lines 30 and 31.					
es	24	Unrestricted					
anc	25	Temporarily restricted			_		
or Fund Balances	1	Permanently restricted					
ᅙ		Foundations that do not follow SFAS 117, check here			7		
Ē		and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds	10,034,698.	9,551,188	B .		
Assets	1	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		<u>5.</u>		
Ass	1	Retained earnings, accumulated income, endowment, or other funds	0.		<u>5</u> .		
Net	30	Total net assets or fund balances	10,034,698.	9,551,188			
~							
	31	Total liabilities and net assets/fund balances	10,034,698.	9,551,188	3.		
T _P	art	Analysis of Changes in Net Assets or Fund Ba					
=		······································			_ 		
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	0		10.001		
	•	st agree with end-of-year figure reported on prior year's return)			1 10,034,6		
_		amount from Part I, line 27a	a== a==		2 <491,5		
3		r increases not included in line 2 (itemize)	SEE STA.	rement 9	3 11,5		
		lines 1, 2, and 3	ann amar	DEMENTED 10	9,554,6		
		eases not included in line 2 (itemize)	SEE STAT	rement 10		186.	
<u>6</u> _	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	umi (b), ime 30		6 9,551,1 Form 990-PF		
	511 24-15	•			10/111 330°F F	(2010)	

Form **990-PF** (2015)

463,388.

485,839.

7

8

Add lines 5 and 6

See the Part VI instructions.

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.

8 Enter qualifying distributions from Part XII, line 4

3 Add lines 1 and 2 4 Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is enter the amount overpaid 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 ► 1, 520 • Refunded ► 11 2,113 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Cliff it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities 1c Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 . 1c Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 . 2 Has the foundation made any changes, not previously reported to the IRS; in its governing instrument, articles of incorporation, or bylaws, or other similar inst		990-PF (2015) BENDON FAMILY FOUNDATION + W Excise Tax Based on Investment Income (Section 4940(a), 49	MO(b) 4940(a) or 4	65-0)631534	ıctio	Page 4
Date of ruling or determination letter: (attach copy of letter if accessary-see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check here				13-10 -	366 1113111	101101	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here							
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-) 3 Add lines 1 and 2 4 0.0 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment line 6. If zero or land 1. If zero or lan	k f	Denostic foundations that most the section 4040(a) requirements in Part V, shock here.	ed enter 1%	1.		1 4	87.
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 fazable foundations only. Others enter -0-) 3 1, 487 Subtible A (moorne) bix (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Tax based on graginazions Lax withheld at source. 7 Total credits and payments. And Ol14 overpayment credited to 2015. 8 Exempt foreign organizations Lax withheld at source. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated fax. Check here ☐ if Form 2220 is attached. 9 Tax dee. If the total of lines 5 and 8 is more than line? ¿neter amount owed. 9 Tax dee. If the total of lines 5 and 8 is more than line? ¿neter amount owed. 10 Overpayment. If line? is more than the total of lines 5 and 8, enter the amount overpaid. 11 Enter the amount of line 10 to be: Credited at 2016 estimated tax. 12 Juring the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition?? 16 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. 17 Or the foundation № 5 Or 10, attach a detailed description of the activities of incorporation, or bytws, or other similar instruments? If 'ves, attach a conformed copy of the changes 18 Las the foundation have unrelated business gross concome of \$1,000 or more d			iu ciitei 176	- ' 		<u>+ / =</u>	<u>, .</u>
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5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-6 6 CredistiPayments 2 2015 estimated tax payments and 2014 overpayment credited to 2015			or -N-)			<u> </u>	0.
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8 Enter any penalty for underpayment of estimated tax. Check here				7 7		5.1	20.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be. Credited to 2016 estimated tax ▶ 1, 520 • Refunded ▶ 11 2, 113 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly) for political purposes (see instructions for the definition)? 1b Lix 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 1c Did the foundation in Form 1120-PDL for this year? 1c Did the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0. 10. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 Like the foundation engaged in any activities that have not previously been reported to the IRS? 3 Like the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? 3 Like the foundation have unrelated business gross income of \$1,000 or more during the year? 4 Like the foundation have unrelated business gross income of \$1,000 or more during the year? 4 Like the foundation have at least \$5,000 in assets at any time during the year? 5 Like the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 5 Like the requirement of the founda		——————————————————————————————————————				<u> </u>	
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FL	8- 0	Enter the states to which the foundation reports or with which it is registered (see instructions)]]
							ļ
with the anometric test to line is the regulation furnished a copy of Form 350-11 to the Automoty delicial (of designate)	-		eneral (or designate)]]
of each state as required by General Instruction G? If "No," attach explanation			onoral (or avolghate)		g h	×	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		·	2(1)(3) or 4942(1)(5) for cal	endar	- 00	+**	 -
				onuui	۵	[X
	-					\vdash	X
Form 990-PF (201	<u> 10 </u>	יים מון אין אין אין אין אין אין אין אין אין אי	en names and addresses			0-PF	

Form **990-PF** (2015)

4a

X

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

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

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

orm 990-PF (2015) BENDON FAMILY FOUNDATION			<u>65-06315</u>	34 Page 6			
Part VII-B. Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)				
5a During the year did the foundation pay or incur any amount to:							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No				
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire	ectly,					
any voter registration drive?		☐ Ye	s X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes	37		s X No				
(4) Provide a grant to an organization other than a charitable, etc., organization							
4945(d)(4)(A)? (see instructions)							
4945(d)(4)(A) / (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for							
the prevention of cruelty to children or animals?	, or oddodnonal purposes, or i		es X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the executions described i		15 LAL 140	}			
section 53.4945 or in a current notice regarding disaster assistance (see instri	•	in negulations	N/A	5b			
	•						
Organizations relying on a current notice regarding disaster assistance check in the accuracy and the current part of the							
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to							
expenditure responsibility for the grant?		I/A L Ye	es L No				
If "Yes," attach the statement required by Regulations section 53.494			}				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on						
a personal benefit contract?		Ye	es X No				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	6b X			
If "Yes" to 6b, file Form 8870							
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	es X No				
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b			
Part VIII Information About Officers, Directors, Trust	tees, Foundation Ma	magers, Highly	y				
Paid Employees, and Contractors							
1 List all officers, directors, trustees, foundation managers and their		1	(4)				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other			
(a) Name and address	to position	enter -0-)	compensation	allowances			
SUSAN K BENDON	VICE PRESIDEN	dr _					
7881 W. CHARLESTON #250							
LAS VEGAS, NV 89117	40.00	103,312.	0.	0.			
JAMES A BENDON	PRESIDENT						
7881 W. CHARLESTON #250	1						
LAS VEGAS, NV 89117	2.00	0.	0.	0.			
JOHN JAMES BENDON	DIRECTOR			 _			
7881 W. CHARLESTON #250			1				
LAS VEGAS, NV 89117	2.00	0.	l o.	0.			
	1						
	1		[
Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."	·				
	(b) Title, and average	T	(d) Contributions to employee benefit plans	(e) Expense account, other			
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances			
NONE	devoted to position	 	compensation	anowanooo			
NONE	1						
		 					
	1						
	 	 					
	1						
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	-						
The same of the sa	L	L	L				
Total number of other employees paid over \$50,000				0			
			Form	990-PF (2015)			

(a) Name and address of each person paid more than \$50,000 NONE Total number of others receiving over \$50,000 for professional services
NONE Total number of others receiving over \$50,000 for professional services Notal number of others receiving over \$50,000 for professional services Notal number of others receiving over \$50,000 for professional services Notal number of others receiving over \$50,000 for professional services Notal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities
NONE Total number of others receiving over \$50,000 for professional services Notal number of others receiving over \$50,000 for professional services Notal number of others receiving over \$50,000 for professional services Notal number of others receiving over \$50,000 for professional services Notal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses
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List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses

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Part IX-B Summary of Program-Related Investments
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount
N/A
All other program-related investments. See instructions.
3
Tabel Add Ingo 1 through 2

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

Distributable amount for 2015 from Part XI, line 7 2 Undestributed encome, if any, as of the end of 2015 a Enter amount for 2014 only b Total for prior years: 3 Excess distributions carryover, if any, to 2015: a From 2010 b From 2011 c From 2012 d From 2014 f From 2015 e From 2014 f Total of lines 38 through e 4 Qualifying distributions for 2015 from Part XII, line 4: P. S. 485, 839. a Applied to 2014, but not more than line 2a Applied to undestributed more for prior years (Election required - see instructions) e Treated as distributions out of corpus (Election required - see instructions) e Remaining amount distributed out of corpus (Election required - see instructions) e Remaining amount distributed out of corpus (Election required - see instructions) e Remaining amount distributed out of corpus (Election required - see instructions) e D.
Line 1
2 Undestbuild recorns, if any, as of the end of 2015 a Enter amount for 2014 only b Total for prior years: 3 Excess distributions carryover, if any, to 2015: a From 2010 b From 2011 c From 2012 d From 2013 e From 2014 f Total of thise 3a through e 4 Qualifying distributions for 2015 from Part XII, line 4: N S 485, 839 - a Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus (Election required - see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus for an amount appears in oclaims (file asams amount must be shown in column (e)) Excess distributions carryower applied to 2015 D Factors distributions carryower applied to 2015 D Factor the rotal of each column as indicated below: a Corpus Add inter 814 c, and 4e Substact line 5 D Prior years' undistributed income. Subtract line 6 throw line 20 c Falter 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 e Undistributed income for 2014, Subtract line 4 from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract line 4 from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract line 4 from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract line 4 from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract line 4 from line 2a. Taxable amount - see instructions
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Part XII, line 4: ► \$ 485,839. a Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Electron required - see instructions) c Treated as distributions out of corpus (Electron required - see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2015 6 an amount appears in column (d), the same amount must be shown in column (d). 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b 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 6b. Taxable amount - see instructions e Undistributed income for 2014, Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instructions lines 4d and 5 from line 1. This amount must
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4a from line 2a. Taxable amount - see instr. f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must
lines 4d and 5 from line 1. This amount must
be distributed in 2016 346,638.
7 Amounts treated as distributions out of
corpus to satisfy requirements imposed by
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 0 •
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 0.
10 Analysis of line 9:
a Excess from 2011
b Excess from 2012
c Excess from 2013
d Excess from 2014
e Excess from 2015

523581 11-24-15

Form 990-PF (2015) BENDON Part XIV Private Operating F	FAMILY FOUN		II A guestion (I)	37/3	65-06	31534	Page 10
			 	<u>N/A</u>	<u></u>		
1 a if the foundation has received a ruling of			.]				
foundation, and the ruling is effective for		=	▶ L	T 40.404.74		40(.)(5)	
b Check box to indicate whether the found		Ing toundation described		4942(j)(3	s) or 49	42(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	Prior 3 year (c) 2013		(d) 2012	(e) Total	
income from Part I or the minimum	(a) 2015	(0) 20 14	(6) 2013	' '	0) 2012	(e) Iolai	
investment return from Part X for			1				`
each year listed			ļ				
b 85% of line 2a			ļ			_	
 Qualifying distributions from Part XII, 							
line 4 for each year listed							
d Amounts included in line 2c not							
used directly for active conduct of							
exempt activities			1.				
e Qualifying distributions made directly				1			
for active conduct of exempt activities.							
Subtract line 2d from line 2c							
3 Complete 3a, b, or c for the							
alternative test relied upon:							
a "Assets" alternative test - enter:(1) Value of all assets							
` '							
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)							
b "Endowment" alternative test - enter		 	+				
2/3 of minimum investment return							
shown in Part X, line 6 for each year			1				
listed				-			
c "Support" alternative test - enter:							
 Total support other than gross investment income (interest, 							
dividends, rents, payments on							
securities loans (section							
512(a)(5)), or royalties)						_	
(2) Support from general public							
and 5 or more exempt organizations as provided in							
section 4942(j)(3)(B)(III)							
(3) Largest amount of support from					_	_	
an exempt organization							
(4) Gross investment income							
Part XV Supplementary Info	rmation (Comple	ete this part only	if the found	ation had \$	5,000 or mo	re in assets	<u> </u>
at any time during t	he year-see inst	ructions.)					
1 Information Regarding Foundation	n Managers:						
a List any managers of the foundation wh	o have contributed more	than 2% of the total cor	ntributions received	d by the foundation	on before the clos	se of any tax	
year (but only if they have contributed n				•		·	
NONE							
b List any managers of the foundation wh	o own 10% or more of t	he stock of a corporation	(or an equally larg	ne portion of the o	ownership of a p	artnership or	
other entity) of which the foundation has			. (, , , , , , , , , , , , , , , , , , , 		.	
NONE							
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. P	Programe:				•
Check here ► X if the foundation o				t does not accent	uncolicited requi	eete for funde. If	
the foundation makes gifts, grants, etc.							
a The name, address, and telephone num	Del or e-mail address of	the person to whom app	nications should be	e addressed.			
. 7. (
b The form in which applications should b	e submitted and informa	ation and materials they s	snoula include;				
			•				
c Any submission deadlines;							
d Any restrictions or limitations on average	a quah aa bu aaaaraaba	nol orang, observable fields	lundo of matrix				
d Any restrictions or limitations on awards	s, such as by geographic	ai ai eas, chai liadhe fields	s, KINUS OI INSTITUTIO	ons, or other facto	л 5.		
						- 000 55	

NONE

▶ 3b Form **990-PF** (2015)

Total

Part XVI-A Analysis of Income-Producing Activities

Business code	(b) Amount	Exclusion code	(d) Amount	(e) Related or exempt function income
	Amount	SION		function income
[]				
		14	56,652.	
		14	174,799.	
		14	2,019.	
		18	<346,390.>	
<u> </u>				
<u> </u>				
		{		
				
	-	- -		
		- - -		
		n	<112 920 b	
		<u> </u>		
				<u> </u>
	o the Accor	o the Accomplishment of	14	14 174,799. 14 2,019. 18 <346,390.>

Part XVI-B	Relationship of	Activities to the	Accomplishment of	Exempt Purposes
------------	-----------------	-------------------	-------------------	------------------------

Line No	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2015)

Par	t XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	hips With Noncha	ritable	•	<u> </u>
1	Did the or			of the following	ng with any other organizati	on described in sect	ion 501(c) of	T	Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organiza-							-		
		from the reporting founda	• • •		- · · · · · · · · · · · · · · · · · · ·					
	(1) Cash			•	-			1a(1)		X
(2) Other assets								1a(2)		_X_
b (Other tran	sactions:								
	(1) Sales	of assets to a noncharital	ble exempt organizat			1b(1)		X		
(2) Purchases of assets from a noncharitable exempt organization								1b(2)		_ <u>X</u> _
(3) Rental of facilities, equipment, or other assets								1b(3)		X
((4) Reimi	bursement arrangements						1b(4)		_X
1	(5) Loan:	s or loan guarantees						1b(5)		_ <u>X</u> _
((6) Perfo	rmance of services or me	mbership or fundrais	sing solicitatio	ons			1b(6)		_X_
		f facilities, equipment, ma					•	1c	L	X
	or service	s given by the reporting fo	oundation. If the four	ndation receiv	ed less than fair market vali		market value of the goods, on or sharing arrangement, s		sets,	
		the value of the goods,								
(a) Lir	ie no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	n of transfers, transactions, and	sharing ar	rangeme	nts
				N/A						
						 -				
										
						 				
						 				
										
						 				
						- 				
										
										
	-+		<u></u>							
	-+					<u> </u>				
			the efficient describer and							
		=	•		or more tax-exempt organ	izations described	Г	¬ _V	v	No
		501(c) of the Code (other		(3)) or in sec	tion 52/ *		L	Yes	LA	סמ ב
D	ir Yes, co	omplete the following school			(b) Type of organization		(a) Description of relations			
N/A										
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge										
Sign and belief, it is the discuss this return with the preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see instr.)?								er tr)?		
Signature of officer or trustee Date Title							Tes		J No	
	1 3.3.	Print/Type preparer's na		Preparer's s		Date	Check If PTIN			
) I was seen a s							self- employed			
Pai	d	BARBARA MC	NET.	ם מגם פגם	A MCNETT	11/10/16	· • I	1279	937	
	parer				A MCNEIL	11/10/16	Firm's EIN ► 51-0			
	Only	Firm's name ► WIL	MINGTON T	KUST C	COMPANY		FIRM S EIN > 51-0	upbu	43	
Jac	. Jiny	Firm's address > mp	TIOM MAY O	EDITO	IC DES COSO		 			
		Firm's address TR				0 0001	/200	C E 1	10	40
1100 N MARKET STREET, DE 19890-0001 Phone no. (302) 651-194							44			

Form **990-PF** (2015)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

B	ENDON FAMILY FOUNDATION	65-0631534						
Organization type (check	one).							
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note. Only a section 501(c	is covered by the General Rule or a Special Rule .	ule See instructions						
General Rule								
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II See instructions for determining a contributo							
Special Rules								
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppor and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a for, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II	a, or 16b, and that received from						
year, total contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III							
year, contribution is checked, enter purpose Do not c	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its F et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	·						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

BENDON FAMILY FOUNDATION

65-0631534

Part I	Contributors (see instructions) Use duplicate copies of Part I r	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BENDON CLUT 1100 N. MARKET ST. DE3-C070 WILMINGTON, DE 19890-0001	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Occash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
523452 10-2	6-15	Schedule B (Form	990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

BENDON FAMILY FOUNDATION

65-0631534

(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given	(c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions)	(d) Date received (d) Date received (d) Date received
Description of noncash property given (b) Description of noncash property given (b)	(c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions)	(d) Date received
Description of noncash property given (b) Description of noncash property given (b)	(c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions)	(d) Date received
Description of noncash property given (b) Description of noncash property given (b)	FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions)	(d) Date received
Description of noncash property given (b)	(c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate)	Date received
Description of noncash property given (b)	FMV (or estimate) (see instructions) \$ (c) FMV (or estimate)	Date received
	(c) FMV (or estimate)	
	FMV (or estimate)	
		(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Description of noncash property given	(b) Pescription of noncash property given (b) (c) FMV (or estimate) (see instructions) (c) FMV (or estimate)

Name of org	ganization			Employer identification number	
· 				CE 0C21E24	
BENDOI Part III	N FAMILY FOUNDATION Exclusively religious, charitable, etc., contribute year from any one contributor. Complete of completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional	Dlumns (a) through (e) and the follow , chantable, etc., contributions of \$1,000 or	wing line entry. For granuzation		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
Part I	(b) Purpose or gift	(c) Use or gift	(d) Desc	ription of now gift is neid	
		(e) Transfer of giff	t		
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
Part I					
}		(e) Transfer of gift	t		
<u>-</u>	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
		(e) Transfer of gift			
	Transferee's name, address, an			nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
	Transferacio nome address -	(e) Transfer of gift			
	Transferee's name, address, an	<u>u </u>	nelationship of tra	nsferor to transferee	

FORM 990-PF INTERE	ST ON SAVII	NGS AND TE	IPORARY	CASH I	NVESTMENTS	STATEMENT	1
SOURCE		REVI	A) ENUE BOOKS		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME	€
INTEREST	!	56,652.	· ·	56,533.			
TOTAL TO PART I, LI		56,652.		56,533.			
FORM 990-PF	DIVIDEND	S AND INTER	REST FR	OM SECU	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	R	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
DIVIDENDS	128,288	•	0.	128,288	. 128,28	8.	
DIVIDENDS - PARTNERSHIP	46,511	•	0.	46,511	. 46,51	1.	
TO PART I, LINE 4	174,799	•	0.	174,799	174,79	9.	
FORM 990-PF		OTHER :	INCOME			STATEMENT	3
DESCRIPTION			(A) REVEN PER BO	WE .	(B) NET INVEST- MENT INCOME		
OTHER INCOME FROM P	ARTNER			2,019.	2,019	•	
TOTAL TO FORM 990-P	PF, PART I,	LINE 11		2,019.	2,019	•	
FORM 990-PF		LEGA	L FEES			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
LEGAL FEES REGISTRANT AGENT FE	EES	4,982 377		0.		4,98	82. 77.
TO FM 990-PF, PG 1,	LN 16A	5,359	•	0.		5,3	59.

FORM 990-PF	ACCOUNTI	NG FEES	S'	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREP FEE	1,000.	500.		500.
TO FORM 990-PF, PG 1, LN 16B	1,000.	500.		500.
FORM 990-PF (OTHER PROFES	SIONAL FEES	S'	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADM FEE CUSTODIAN FEES INVESTMENT MANAGEMENT FEES	363. 27,368. 58,459.	13,684.		363. 13,684. 0.
TO FORM 990-PF, PG 1, LN 16C	86,190.	72,143.		14,047.
FORM 990-PF	TAX	ES	S'	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES FOREIGN TAXES FLORIDA ANNUAL REPORT	8,929. 1,096. 61.	1,096.		8,929. 0. 61.
TO FORM 990-PF, PG 1, LN 18	10,086.	1,096.		8,990.

FORM 990-PF	STATEMENT	8			
DESCRIPTION	(C) ADJUSTEI NET INCOM				
OTHER EXPENSES PARTNERSHIP DEDUCTIONS	131. 10,941.	13	1.		
TO FORM 990-PF, PG 1, LN 23		13	1.		
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND BA	ALANCES	STATEMENT	9
DESCRIPTION				AMOUNT	
PARTNERSHIP DISTRIBUTIONS MISC INCOME RECEIVED INTO ACC DIVIDEND POSTED AFTER 06/30/2 NONDISTRIBUTED DIVIDED TAX COST ADJUSTMENT		5		4,60	2. 6. 2.
TOTAL TO FORM 990-PF, PART I	II, LINE 3			11,51	2.
FORM 990-PF OTHER DECREASE	S IN NET AS	SETS OR FUND 1	BALANCES	STATEMENT	10
DESCRIPTION				AMOUNT	
DIVIDEND POSTED AFTER 06/30/2	3,48	6.			
TOTAL TO FORM 990-PF, PART II	II, LINE 5			3,48	6.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	11
DESCRIPTION		ВО	OK VALUE	FAIR MARKET VALUE	
EQUITY		-	1,951,625.	5,121,45	9.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		1,951,625.	5,121,45	9.

FORM 990-PF	CORPORATE BONDS		STATEMENT 12
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
FIXED INCOME		2,281,543.	2,296,726.
TOTAL TO FORM 990-PF, PART	II, LINE 10C	2,281,543.	2,296,726.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 13
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER ASSETS	COST	1,257,037.	987,832.
TOTAL TO FORM 990-PF, PART	II, LINE 13	1,257,037.	987,832.