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### Form 990-PF

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

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For cal	endar year 2015, or tax year beginning	12/01 ,2015	, and ending 6/3	0 , 2016	
Б.	¢		A	Employer identification nur	nber
Robe	rson Family Foundation		<del> </del>	81-0712446 Telephone number (see inst	
	Island Trail in, SC 29036		В	630-730-3838	ructions)
Chap	111, 36 25030				
			C	If exemption application is	pending, check here
<b>G</b> Che	eck all that apply: $X$ Initial return	Initial return of a forr	ner public charity	1 Foreign organizations, chec	sk here ► □
	Final return	Amended return	-		السا
	Address change	Name change		2 Foreign organizations meet here and attach computation	
H Che		501(c)(3) exempt private t		nore and attach computation	"·
	Section 4947(a)(1) nonexempt charitab		private foundation E	If private foundation status	
		Accounting method X C	ash Accrual	under section 507(b)(1)(A)	, check here.
(IIOI ► S	m Part II, column (c), line 16)	Other (specify)	F	If the foundation is in a 60	
	1,012,002.	rt I, column (d) must be or	n cash basis )	under section 507(b)(1)(B)	, cneck nere.
Part I	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	columns (b), (c), and (d) may not nece	expenses per books	ıncome	income	for charitable purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see instructions))  1 Contributions, gifts, grants, etc, received (attach schedule)	1,520,000.	· · · · · · · · · · · · · · · · · · ·		-
	2 Ck If the foundation is not required to attach Sc				
	Interest on savings and temporary cash investments	. 271.	271.	271.	
	4 Dividends and interest from securities . 5 a Gross rents	11,518.	11,518.	11,518.	
	<b>b</b> Net rental income			<u> </u>	
- R	or (loss) 6 a Net gain or (loss) from sale of assets not on line 10	67.			
EV	<b>b</b> Gross sales price for all	<del></del>			
Ž	assets on line 6a  7 Gepital-gain-net income (from Part IV, line 2)	<b>' •  </b>	67.		
- N	8 Net shafter capta bart ED		<u></u>	67.	
U E	9 Income modifications				
E	10 a gross sales less curve and Epolar legums an				
	abowances EP 1 2 2016 O				· · · · · · · · · · · · · · · · · · ·
	goods sold DC				
	c Gross profit or (toss) (attach schedule)				
	See Statement	1 47,453.			
	12 Total. Add lines 1 through 11	1,579,309.	11,856.	11,856.	
	13 Compensation of officers, directors, trustees, et-				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits.	2			
es A	16a Legal fees (attach schedule) See St	2 5,765.	5,765.	5,765.	5,765.
ĭ≅-,	b Accounting fees (attach sch)				
7 N	c Other prof fees (attach sch).				
OPERA	17 Interest 18 Taxes (attach schedule)(see instrs) See Stm	3 25.	25.	25.	25.
⇒Ř k	19 Depreciation (attach	23.	23.	25.	23.
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	schedule) and depletion				
AT I VE	20 Occupancy				
G E	21 Travel, conferences, and meetings.		:		<u></u>
N X	22 Printing and publications . 23 Other expenses (attach schedule)				
	See Statement	4 2,967.	2,967.	2,967.	2,967.
EXPERSES ES	24 Total operating and administrative				
S E	expenses. Add lines 13 through 23	8,757.	8,757.	8,757.	8,757.
D.	25 Contributions, gifts, grants paid Part XV	58,000.			58,000.
	26 Total expenses and disbursements. Add lines 24 and 25.	66,757.	8,757.	8,757.	66,757.
	27 Subtract line 26 from line 12:	00,737.	0,131.	0,131.	00,737.
	a Excess of revenue over expenses				
	and disbursements	1,512,552.			
	<b>b</b> Net investment income (if negative, enter -0-)		3,099.	2 000	
	C Adjusted net income (if negative, enter -0-)			3,099.	l

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Part II Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)		Beginning of year		year		
Part	11		(a) Book Value	(b) Book Value	e l	(c) Fair Market Value
	1	Cash – non-interest-bearing				
	2	Savings and temporary cash investments				
	3	Accounts receivable . •				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable				
		Less. allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach sch).				
Ą		Less: allowance for doubtful accounts				
A S S E T	8	Inventories for sale or use			$\neg \uparrow$	
Ě	9	Prepaid expenses and deferred charges	· · · · · ·	***************************************	$\neg$	· · · · · · · · · · · · · · · · · · ·
Ţ	_	Investments – U.S. and state government			一十	
		obligations (attach schedule)				
	t	Investments — corporate stock (attach schedule) Statement 5		1,512,5	52.	1,512,552.
	C	: Investments — corporate bonds (attach schedule)				
	11	Investments — land, buildings, and equipment: basis ►				
		Less accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment basis ►				
		Less accumulated depreciation (attach schedule)				
-		Other assets (describe ► )				
-	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	0	1 510 5	E 2	1 512 552
<del>-,-</del>			0.	1,512,5	<del>52.</del>	1,512,552.
Ī	17	Accounts payable and accrued expenses			$\dashv$	
A B	18	• •			-	
B	19	Deferred revenue		···		
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons	<del></del>			}
÷	21	Mortgages and other notes payable (attach schedule)		<del></del>	$\dashv$	
<u>i</u>	22	Other liabilities (describe			-	
E S	23	Total liabilities (add lines 17 through 22)  Foundations that follow SEAS 117 check here	0.		0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted		1,512,5	.52	-
N F E U T N	24			1,312,3	52.	
	25	Temporarily restricted Permanently restricted				
A D	26					
A B S A L T		Foundations that do not follow SFAS 117, check here.  And complete lines 27 through 31.				
TA	27	Capital stock, trust principal, or current funds				1
SN	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
O E	29	Retained earnings, accumulated income, endowment, or other funds				
ŔŚ	30	Total net assets or fund balances (see instructions)	0.	1,512,5	52.	1
	31	Total liabilities and net assets/fund balances (see instructions)	0.	1,512,5	52	
Dar	  -   11	Analysis of Changes in Net Assets or Fund Balance		1,912,9	<u> </u>	
				uroo wath	Π	
	end-	I net assets or fund balances at beginning of year — Part II, colu- of-year figure reported on prior year's return)	umn (a), iine 30 (must ac	gree with	1	0.
_		er amount from Part I, line 27a		}	3	1,512,552.
		Increases not included in line 2 (Itemize)			4	1 510 550
_		lines 1, 2, and 3	•		5	1,512,552.
5		eases not included in line 2 (itemize)	Dort II solvers (b) II		6	1 510 550
6	Tota	Il net assets or fund balances at end of year (line 4 minus line 5	) — Mart II, column (b), II	ile su .	<b>└°</b> ⊥	<u>1,512,552.</u>

2-story brick warehouse: or common stock 200 shares MI C Company)			(b) How acc P — Purch D — Dona	nase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a Various-fractional sales of securities			P		1/01/16	4/25/16
b	<u> </u>					
<u> </u>						
d						
e (1) 0	(0.5)	(-) O t t t -			(1) 0	(1)
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba			(h) Gain or (e) plus (f) m	ninus (g)
a67.						67.
b					<del></del>	
<u>c</u>						
d	-					
e Complete only for accets show	I I I I I I I I I I I I I I I I I I I	by the foundation on 12/21	/60			
(i) F M V	(i) Adjusted basis	(k) Excess of col (i)		а	(I) Gains (Col ain minus col (k), l	
as of 12/31/69	as of 12/31/69	over col. (j), if any			an -0-) <b>or</b> Losses (f	
a	··-··					67.
b	-				•	
c	**					
d		·- <u></u>				
е						
2 Capital gain net income or (ne		enter in Part I, line 7 ter -0- in Part I, line 7	-	2		67.
3 Net short-term capital gain or	(loss) as defined in sections 1222(5	) and (6)				
- If agin, also enter in Part I line	e 8, column (c) (see instructions).	f (loss) enter -0.			[	
in Part I, line 8	e B, column (c) (see mandenons). I	1 (1033), criter 101	-	3		67.
(For optional use by domestic private for				me		
Was the foundation liable for the sec If 'Yes,' the foundation does not qua 1 Enter the appropriate amount in		complete this part.		d? ——	Yes	☐ No
_ (a)	(b)	(c)			(d)	<del> </del>
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as	sets	(col	Distribution (b) divided by	
2014						
2013						
2012						
2011						
2010						
2 Total of line 1, column (d)				2		
3 Average distribution ratio for the number of years the foundation	he 5-year base period — divide the n has been in existence if less thar	total on line 2 by 5, or by 5 years	the	3		
4 Enter the net value of nonchar	ritable-use assets for 2015 from Par	rt X, line 5		4		
5 Multiply line 4 by line 3				5		
	some (10) of Doubling 27h)	·		6	<del>                                     </del>	
6 Enter 1% of net investment in	come (1% of Part I, line 2/0)				<del> </del>	
7 Add lines 5 and 6				7		<del></del>
8 Enter qualifying distributions for				8		
If line 8 is equal to or greater that Part VI instructions	an line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1%	tax r		000 75 (0015)
BAA	TEEA0303	L 10/13/15			Forr	n <b>990-PF</b> (2015)

	SO-PF (2015) Roberson Family Foundation		<u>-0/12446</u>			age 4
Part	<del></del>		ee instructior	15)		
		N/A' on line 1.				
	Date of ruling or determination letter (attach copy of letter if necessar	ry – see instrs)				
	Domestic foundations that meet the section 4940(e) requirements in Part V,		. 1			62.
	check here. ► and enter 1% of Part I, line 27b.					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, I	ine 12, col. (b)		-		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		1 - 1			_
	oundations only Others enter -0-) .		2			0.
	Add lines 1 and 2		3			62.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation		4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, ent	er -0-	5			62.
	Credits/Payments	ا ما	1 1			
	2015 estimated tax pmts and 2014 overpayment credited to 2015	6a 6b				İ
	Exempt foreign organizations — tax withheld at source  [av poid with application for extension of time to file (Form 9959)	6 c				
	Fax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld	6 d				
		<u> </u>	<del></del>			
	Total credits and payments. Add lines 6a through 6d	220 is attached	8			0.
		zzo is attached	<b>8</b> 9			62.
	Fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		10	——		62.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	Refunded	11			
	The the amount of line 10 to be: Credited to 2016 estimated tax  VII-A   Statements Regarding Activities	Kelulided	111			
				$\overline{}$	Yes	No
	During the tax year, did the foundation attempt to influence any national, state, coarticipate or intervene in any political campaign?	or local legislation or did it	•	1 a	162	No X
b	Old it spend more than \$100 during the year (either directly or indirectly) for polit (see Instructions for the definition)?	tical purposes		1 b		Х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies or distributed by the foundation in connection with the activities	of any materials published				
c	Ord the foundation file Form 1120-POL for this year?			1 c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed	during the year:				
	1) On the foundation   \$ 0. (2) On foundation man	lagers ►\$	0.	.		
	Enter the reimbursement (if any) paid by the foundation during the year for political expoundation managers.	denditure tax imposed on				
	Has the foundation engaged in any activities that have not previously been repor	ted to the IRS?		2		
	If 'Yes,' attach a detailed description of the activities.			<del>-</del>		
3	Has the foundation made any changes, not previously reported to the IRS, in its govern	ing instrument, articles				لييا
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a confor			3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more duri	ng the year?		4 a		X
	f 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N	/ <u>A</u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If 'Yes,' attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through 4945) s	satisfied authori				
	By language in the governing instrument, or	satisfied ettiler.				}
•	By state legislation that effectively amends the governing instrument so that no mand with the state law remain in the governing instrument?	latory directions that conflict		6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II,	col. (c), and Part XV		7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (se-	e instructions)				
_	N/A					
	if the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen (or designate) of each state as required by <i>General Instruction G<sup>2</sup> If 'No,' attach explanation</i>	eral		8 b	X	
		aning of section 4942(i)(2)	or 4942(1)/5)			
	ls the foundation claiming status as a private operating foundation within the me for calendar year 2015 or the taxable year beginning in 2015 (see instructions for			9	Х	
	Old any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a and addresses</i>	schedule listing their names _See Stateme:	nt_6	10	Х	
RΛΛ				rm 990	DE C	015

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Pai	t 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 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 persadvisory privileges? If 'Yes,' attach statement (see instructions).	son had	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemptio Website address . • N/A	n application?	13	Х	<u> </u>
14		e no. ► 630	730-3	838	
1-7	Located at ► 2328 Island Trail Chapin SC ZIP + 4 ►		720 3	030_	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	22000_	N/A	<u> </u>	- ГТ <sup></sup> -
13	and enter the amount of tax-exempt interest received or accrued during the year	► 15		•	N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority	over a		Yes	No
16	bank, securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country				
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	a 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?	Yes X N	<b>'</b>		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X N		ļ	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes XN	>		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes XN	>		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes XN	,		
-	(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 termination of government service, if terminating within 90 days.)	Yes XN	o		
١ .	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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	)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗌			
(	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts that were not corrected before the first day of the tax year beginning in 2015?	,	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
i	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	Yes X N	0		
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 _ , 20				
1	<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942	2(a)(2)			
,	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942	(a)(2) to	2 b	NT	/A
	all years listed, answer 'No' and attach statement - see instructions) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here	20	<u>'                                     </u>	YA
1	► 20 , 20 , 20 , 20	nere			1
3	a Did the foundation hold more than a 2% direct or indirect interest in any business	Yes X N			
	enterprise at any time during the year?		٠		
	b If 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or	n ed			
	(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)		31	N N	I/A
,	a Did the foundation invest during the year any amount in a manner that would jeopardize its	•	-		1
4	charitable purposes?		4 a	1	X
	<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could				
	reopardize its charitable purpose that had not been removed from jeopardy before the first day of		41	_	X
BAA	the tax year beginning in 2015?		Form 99		
DAA					. ,

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Part VII-B   Statements Regarding Activiti		4720 May Be Req	uired (c	ontinued)			
5 a During the year did the foundation pay or incu	_	40454 \\ 2					
(1) Carry on propaganda, or otherwise attemp	_	•	•	∐ Yes X	No		
<ul><li>(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra</li></ul>	lic election (see section ation drive?	4955), or to carry		$\vdash$	No		
(3) Provide a grant to an individual for travel,	study, or other similar i	purposes?	•	Yes X	No		
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions)	nan a charitable, etc, or s)	ganization described		Yes X	No		
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	, literary, or or animals?		Yes X	No		
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to one a current notice regard	qualify under the excep ding disaster assistance	tions e		5	i b	N/A
Organizations relying on a current notice rega	rding disaster assistanc	e check here		▶ 🔲			
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure response	sibility for the grant?		N/A	Yes	No		
If 'Yes,' attach the statement required by Regi							
6a Did the foundation, during the year, receive ar on a personal benefit contract?					No	ь Ь	
<b>b</b> Did the foundation, during the year, pay premise of Yes' to 6b, file Form 8870.	iums, airectly or mairec	lly, on a personal bene	ni contrac	t:	<u>                                   </u>		<del>  X</del>
7a At any time during the tax year, was the found					No		
<b>b</b> If 'Yes,' did the foundation receive any procee					.,	b b	
Part VIII Information About Officers, D and Contractors					mploye	es,	
1 List all officers, directors, trustees, foundation							
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	emplo plans	ributions to byee benefit and deferred pensation	(e) Expe		ccount, vances
Dennis A Roberson	Director	0.		0.			0.
_2328 Island Trail	5.00						
Chapin, SC 29036	Dimenton	0					0.
Debra Lin Roberson 2328 Island Trail	Director 5.00	0.		0.			υ.
Chapin, SC 29036	3.00						
Robert H. Tennies, ED.D	Director	0.		0.			0.
2415 NW 30th Rd	5.00						
Boca Raton, FL 33431							
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none	e, enter 'NONE			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Cont emplo plans a	ributions to byee benefit and deferred bensation	(e) Expe	nse a r allow	eccount, vances
None							
				,			
	-						
	1						
Total number of other employees paid over \$50,000	0	<u></u>	1	•			0
BAA	TEEA0306L 1	0/13/15			Form	990-PF	(2015)

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Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, Highly Paid Employees,	
3 Five highest-paid independent contractors for professional services (see instructions).		
	Type of service (c) Comper	rsation
None_\		
	· ·	
Total number of others receiving over \$50,000 for professional services	<b>&gt;</b>	0
Rartlx-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information su organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ch as the number of Expens	 es
1 N/A	· · · · · · · · · · · · · · · · · · ·	
N/A		
2		
3		
4		
		····
Part XB Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2 Amoui	nt
1 N/A		
2		
All other program-related investments. See instructions		<u>-</u>
3		

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Form 990-PF (2015)

Total. Add lines 1 through 3

BAA

'	a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	66,757.
	<b>b</b> Program-related investments — total from Part IX-B	1 b	
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)	3 a	
	<b>b</b> Cash distribution test (attach the required schedule).	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	66,757.
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	66,757.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

Form 990-PF (2015)

Part XIII Undistributed Income (see Instri	uctions)	N/A		
	(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	<b>(d)</b> 2015
Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015:				-
a Enter amount for 2014 only				
<b>b</b> Total for prior years. 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
<b>b</b> From 2011				
<b>c</b> From 2012			,	1
<b>d</b> From 2013				11
e From 2014		_		
f Total of lines 3a through e .				
4 Qualifying distributions for 2015 from Part				
XII, line 4· ► \$				
a Applied to 2014, but not more than line 2a	·			
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)	<u>.                                    </u>			
c Treated as distributions out of corpus (Election required – see instructions)				
<b>d</b> Applied to 2015 distributable amount	<del></del>			· · · _ · _ · _ · · · · · · ·
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015				
(If an amount appears in column (d), the same amount must be shown in column (a).)				
Carrio ameent mast se chemi in consum (cy)			1	
6 Enter the net total of each column as				
indicated below:		_		
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	· · · · · · · · · · · · · · · · · · ·	<u></u>		
<b>b</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 6c from line 6b Taxable amount — see instructions.				
e Undistributed income for 2014. Subtract line 4a from line 2a Taxable amount — see instructions.				
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016.				
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 (see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2011				
<b>b</b> Excess from 2012.				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

Form 990-PF (2015) Roberson Family				81-071244	6 Page <b>10</b>
Part XIV Private Operating Founda	<b>tions</b> (see instruc	tions and Part	t VII-A, question	າ 9)	
1 a If the foundation has received a ruling or detus effective for 2015, enter the date of the	ruling		•		12/01/15
<b>b</b> Check box to indicate whether the founda		ating foundation d		X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	<u>,</u>	
investment return from Part X for	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
each year listed	3,099.			<u> </u>	3,099.
<b>b</b> 85% of line 2a .	2,634.				2,634.
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>	66,757.				66,757.
d Amounts included in line 2c not used directly for active conduct of exempt activities .		·			0.
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>	66,757.				66,757.
3 Complete 3a, b, or c for the alternative test relied upon:					<u> </u>
a 'Assets' alternative test - enter.					
(1) Value of all assets	1,512,552.				1,512,552.
(2) Value of assets qualifying under section 4942(j)(3)(B)(l)	1,512,552.				1,512,552.
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					,
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(i)(3)(B)(III).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income				<u> </u>	
Supplementary Information assets at any time during the	(Complete this page ins	oart only if the tructions.)	foundation had	d \$5,000 or more	in
Information Regarding Foundation Mana a List any managers of the foundation who have close of any tax year (but only if they have None	e contributed more tha	n 2% of the total co an \$5,000) (See	ontributions received section 507(d)(2))	by the foundation bef	ore the
<b>b</b> List any managers of the foundation who ow a partnership or other entity) of which the None	n 10% or more of the s foundation has a 10	ock of a corporation or greater inter	on (or an equally larg est.	e portion of the owner	ship of
2 Information Regarding Contribution, Gra Check here  X if the foundation only m requests for funds. If the foundation make complete items 2a, b, c, and d	akes contributions to pi	eselected charitable	le organizations and		
a The name, address, and telephone number of	or e-mail address of the	person to whom a	pplications should be	e addressed	
<b>b</b> The form in which applications should be	submitted and inform	ation and materia	als they should inclu	ude:	<del>-</del> n

c Any submission deadlines.

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or contribution status of Amount recipient Name and address (home or business) a Paid during the year Sonset Solutions None Operating funds 50,000. 2830 17th St Elkhart IN 46517 Moody Church None Operating funds 2,500. 1630 N Clark St Chicago IL 60614 Operating funds 2,000. Chapin Presbyterian None 600 Old Lexington Chapin SC 29036 Operating funds 2,500. Boca Raton Community Church None 470 NW 4th Ave Boca Raton FL 33432 1,000. Operating funds Reachglobal/EFCA None 901 East 78th Street Minneapolis MN 55420 ► 3a 58,000. Total **b** Approved for future payment ► 3b **Total** 

#### Part XVI-A Analysis of Income-Producing Activities

<del>- ,</del>	<del></del>	<del></del>			· · · · · · · · · · · · · · · · · · ·
Enter gross amounts unless otherwise ind	icated. Unrelat	ed business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a	<del></del>		code		
b		+	<del></del>		
		-	<del></del>		
4		<del></del>	+		<del></del>
<u> </u>	<del></del>	<del> </del>	<del></del>		
	<del></del>				
Total and and a decided to			<u> </u>		
g Fees and contracts from government	agencies				
2 Membership dues and assessments	· ·		<b></b>		
3 Interest on savings and temporary cash investi				271.	
4 Dividends and interest from securitie		ļ		11,518.	
5 Net rental income or (loss) from real	estate.				
a Debt-financed property	<u> </u>	<del></del>			<u></u>
b Not debt-financed property	. —	ļ <u> </u>			
6 Net rental income or (loss) from personal prop	perty				
7 Other investment income					47,453.
8 Gain or (loss) from sales of assets other than	· ———				67.
9 Net income or (loss) from special ev					
10 Gross profit or (loss) from sales of in	ventory				
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (				11,789.	47,520.
13 Total. Add line 12, columns (b), (d),				13 ͺ	59,309.
See worksheet in line 13 instructions to ve	erify calculations)				
Part XVI-B Relationship of Activ	ities to the Accomp	lishment of Exem	pt Purpose	es	
Line No. Explain below how each activi accomplishment of the founda	ty for which income is rep	orted in column (e) of	f Part XVI-A c	ontributed importantl	y to the
<del></del> - <del></del>	tion's exempt purposes (o		iunus for suc	in burboses) (see ii	
N/A				<del></del>	
		<del></del> _			
	<del></del>		<del></del>		
				· <del></del> · · · · · ·	
				<del></del>	
					_ <del></del>
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					<del></del>
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			<del> </del>		
	<del></del>			<del></del>	<del> </del>
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		<del></del>			
					· <del></del>
					<del></del>

TEEA0502L 10/13/15

# Form 990-PF (2015) Roberson Family Foundation 81-0712446 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any oth described in section 501(c) of the Code (other than section 501(c)(3) organizations) relating to political organizations?	ner organization or in section 527,
a Transfers from the reporting foundation to a noncharitable exempt organization of:	
(1) Cash	1 a (1) X
(2) Other assets	1 a (2) X
<b>b</b> Other transactions:	
(1) Sales of assets to a noncharitable exempt organization	. 1 b (1) X
(2) Purchases of assets from a noncharitable exempt organization	1 b (2) X
(3) Rental of facilities, equipment, or other assets	. 1 b (3) X
(4) Reimbursement arrangements	. 1 b (4) X
(5) Loans or loan guarantees	1 b (5) X
(6) Performance of services or membership or fundraising solicitations.	1 b (6) X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c X
<b>d</b> If the answer to any of the above is 'Yes,' complete the following schedule. Column the goods, other assets, or services given by the reporting foundation. If the foundation recany transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods,	other assets, or services received.
	Description of transfers, transactions, and sharing arrangements
N/A	
·	
<ul> <li>2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt described in section 501(c) of the Code (other than section 501(c)(3)) or in section 5</li> <li>b If 'Yes,' complete the following schedule.</li> </ul>	organizations 527? Yes X No
(a) Name of organization (b) Type of organization	(c) Description of relationship
N/A	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which prep	parer has any knowledge  May the IRS discuss
Here lemis resoberson 18 Sept 2016	resident birector this return with the preparer shown below
Signature of officer or trustee Date Title	(see i isituctions):
Print/Type preparer's name Preparer's signature	Date Check of PTIN
Paid Michael N. Mahoney Michael N. Mahoney	9-1-16   self-employed   P00247358
, ula	Firm's EIN 364275061
	3042/3001
Use Only Firm's address 416 E Roosevelt Rd Wheaton, IL 60187	Phone no (630) 665-2700
BAA	Form <b>990-PF</b> (2015)
	1 OIII 220 I I (2013

#### 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.

► Attach to Form 950, Form 950-EZ, or Form 950-FF.

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

OMB No 1545-0047

2015

Name of the organization		Employer Identification number
Roberson Family Foundation	on	81-0712446
Organization type (check one).	<del></del>	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) orga	anization
	4947(a)(1) nonexempt charitable tru	ust <b>not</b> treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	١
	4947(a)(1) nonexempt charitable tru	ust treated as a private foundation
	501(c)(3) taxable private foundation	1
Check if your organization is covered by the	General Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (	10) organization can check boxes for both the G	Seneral Rule and a Special Rule. See instructions.
General Rule  X For an organization filing Form 990, property) from any one contributor	990-EZ, or 990-PF that received, during the year Complete Parts I and II See instructions for def	ar, contributions totaling \$5,000 or more (in money or termining a contributor's total contributions
Special Rules		
Under sections 500(a)(1) and 170(b)(1)	ction 501(c)(3) filing Form 990 or 990-EZ that m )(A)(vi), that checked Schedule A (Form 990 or 990- during the year, total contributions of the greater form 990-EZ, line 1 Complete Parts I and II.	-EZ) Part II line 13 16a, or 16b, and that
- during the year total contributions of	ction 501(c)(7), (8), or (10) filing Form 990 or 99 of more than \$1,000 <i>exclusively</i> for religious, charulty to children or animals. Complete Parts I, I	aritable, Scientific, literary, of educational
during the year, contributions exclu \$1,000. If this box is checked, enter charitable, etc., purpose Do not co	ction 501(c)(7), (8), or (10) filing Form 990 or 99 sively for religious, charitable, etc., purposes, but here the total contributions that were received implete any of the parts unless the <b>General Rule</b> charitable, etc., contributions totaling \$5,000 or	ut no such contributions totaled more than during the year for an exclusively religious, applies to this organization because
Caution. An organization that is not covered to the second	vered by the General Rule and/or the Special Ru	ules does not file Schedule B (Form 990, 990-EZ, or In line H of its Form 990-EZ or on its Form 990-PF,

BAA 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)

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part I
Name of org	anuzation Son Family Foundation	' '	r Identification number 712446
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space		712440
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Dennis Roberson	-	Person X Payroll
	2328 Island Trail	\$1 <u>,520,000</u> .	Noncash
	Chapin, SC 29036	-	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 	\$	Person Payroll Noncash
			(Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-    \$=	Person Payroll Noncash Complete Part II for
<del></del>		-	noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		  \$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash Complete Part II for
			(Complete Part II for noncash contributions )
BAA	TEEA0702L 10/12/15	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2015)

Page

1 to

1 of Part II

Roberson Family Foundation

81-0712446

Employer identification number

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed	
(a) No. from' Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(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
		ş	
(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
		\$	
BAA	Sche	edule B (Form 990, 990-F	7 or 990-PF) (2015

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

1 of Part III

Name of organization
Roberson Family Foundation

BAA

Employer identification number 81-0712446

RUSCIDE	n rumrry roundaction		01 0712440		
(Part III)	Exclusively religious, charitable, et	tc., contributions to orga	nizations described in section 501(c)(7), (8),		
	or (10) that total more than \$1,000 for t	hat total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and			
	ne following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc.,				
•	contributions of \$1,000 or less for the year.	(Enter this information once. Se	see instructions.) . ►\$N/A		
	Use duplicate copies of Part III if additional				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	N/A				
		(e) Transfer of gift			
	Transferente nome addres	i ransfer of gift	Dolationship of transferor to transfero		
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
		. <b></b>			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	r di pose oi giit	030 37 gm	Sessification of now gire is not		
		(e) Transfer of gift			
-	<b>-</b>		Bolding big of the office of the original and the origina		
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
•			<u> </u>		
			L		
(-)	45				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I					
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
	Transfered S flame, address, and En 14		Trotationism of transfer to transfer to		
			<del> </del>		
	<del> </del>		<del> </del>		
	<u> </u>	<del></del>			
(a)	(b)	(c)	(d)		
(a) No. from	Purpose of gift	Use of gift	Description of how gift is held		
Part i					
		<u> </u>	<u>L.</u>		
	(e) Transfer of gift				
	Transferee's name, addres	is. and ZIP + 4	Relationship of transferor to transferee		
	The state of the s		,		
	<u> </u>		<del> </del>		
	,				

2015	Federal Statements	Page 1
	Roberson Family Foundation	81-0712446
Statement 1 Form 990-PF, Part I, Line 11 Other Income		
	(a) (b) Net Revenue Investment <u>per Books Income</u>	(c) Adjusted Net Income
Other Investment Income	Total $\frac{$}{$}$ $\frac{47,453}{47,453}$ $\frac{$}{$}$ 0.	\$ 0.
Statement 2 Form 990-PF, Part I, Line 16a Legal Fees		
	(a) (b) Net (c) Expenses Investment Adjusted	(d) Charitable
	Per Books         Income         Net Income           \$ 5,765.         \$ 5,765.         \$ 5,765.           Total         \$ 5,765.         \$ 5,765.	. \$ 5,765.
Statement 3 Form 990-PF, Part I, Line 18 Taxes		
Foreign Tax Paid	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income         \$       25.       \$       25.       \$       25.         Total       \$       25.       \$       25.       \$       25.	(d) Charitable Purposes . \$ 25. \$ 25.
Statement 4 Form 990-PF, Part I, Line 23 Other Expenses		
Admin Expenses Bank/Service Fees	(a) (b) Net (c)  Expenses Investment Adjusted  per Books Income Net Income  \$ 115. \$ 115. \$ 115.  2,852. 2,852. 2,852.  Total \$ 2,967. \$ 2,967. \$ 2,967.	. \$ 115. . 2,852.

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#### **Federal Statements**

Page 2

**Roberson Family Foundation** 

81-0712446

Statement 5 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks

Corporate Stocks	Valuation	Book	Fair Market
	<u>Method</u>	<u>Value</u>	<u>Value</u>
Merrill Lynch-acct #-2834 Merrill Lynch-acct #-2836	Mkt Val Mkt Val Total	\$ 174,668. 1,337,884. \$ 1,512,552.	1,337,884.

Statement 6 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During the Tax Year

Name of Substantial Contributor Address of Substantial Contributor

Dennis Roberson 2328 Island Trail Chapin, SC 29036