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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	calend	ar year 2015 or tax year beginning $09/01/15$, a	and ending 08/3	31/16			
Nai	me of fou	ndation			A Emplo	oyer identification number	
		80/20 FOUNDATION, INC.				-4217594	
		street (or P O box number if mail is not delivered to street address)	R	oom/suite		none number (see instructions)	
		W COUNTY LINE ROAD SOUTH state or province, country, and ZIP or foreign postal code			26	0-625-6749	
-		WAYNE IN 46814			C If exer	mption application is pending, o	check here
			n of a former public ch	antv	D 1 50	reign organizations, check her	
0	JIICUN E	Final return Amended	•	arity			
		Address change Name chai				reign organizations meeting the *% test, check here and attach	
	No 1- 4						
		ype of organization: X Section 501(c)(3) exempt private				ate foundation status was term n 507(b)(1)(A), check here	inated under
			e private foundation X Cash Acc				· .
		ket value of all assets at J Accounting method: ear (from Part II, col. (c), Other (specify)	⊼ Casn	rual	1	foundation is in a 60-month ten section 507(b)(1)(B), check he	
	ne 16) j		o on each basis \		225.	200.0 00. (2)(1)(2), 0.100	
	art l	Analysis of Revenue and Expenses (The total of	(a) Revenue and	·			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net inv		(c) Adjusted net income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	2	Check ► X if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	40,975		40,975		
	5a	Gross rents					
Ф	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	1,470				
Š	b	Gross sales price for all assets on line 6a 1, 470					
8	7	Capital gain net income (from Part IV, line 2)			1,470		
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances		<u> </u>			
	b	Less Cost of goods sold		<u> </u>			
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					****
	12	Total. Add lines 1 through 11	42,445		42,445	0	
Ş	13	Compensation of officers, directors, trustees, etc.	1,000		500		
enses	14	Other employee salaries and wages					
Ω.	15	Pension plans, employee benefits					CEIVED
Μ̈	16a	Legal fees (attach schedule) Accounting fees (attach schedule) STMT 1	1,335		668	RE	
9	b	Accounting fees (attach schedule) STMT 1 Other professional fees (attach schedule)	1,333	<u>'</u>	000	8	2016 O
aţį	17	Interest				<u> </u>	27 2016 O
	18	Taxes (attach schedule) (see instructions) STMT 2	1,676			m	2010 S
	19	Depreciation (attach schedule) and depletion	1,070			00	MEN, UI
త ⊥∠U≬ఠ Administrative Ex∣	20	Occupancy					25 71 3 75
ಶ ĕ	21	Travel, conferences, and meetings					
_ <u>_</u> _	22	Printing and publications	•	<u> </u>			
ીહ∤ gand	23	Other expenses (att. sch.)					
	24	Total operating and administrative expenses.					
ī Ē		Add lines 13 through 23	4,011		1,168	0	0
岩翼	25	Contributions, grifts, grants paid SEE STATEMENT 3	86,000		,		86,000
S O	26	Total expenses and disbursements. Add lines 24 and 25	90,011	1	1,168	0	86,000
SCANNED Operating	27	Subtract line 26 from line 12.	······································				
	a	Excess of revenue over expenses and disbursements	-47,566				
	Ь	Net investment income (if negative, enter -0-)		1	41,277		
	С	Adjusted net income (if negative, enter -0-)		1		0	

Fo	m 990	-PF(2015) THE 80/20 FOUNDATION, INC.	20-421759	94	Page 2
1	David 1	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End o	f year
4	Part I	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			
ı	2	Savings and temporary cash investments	38,037		
1	3	Accounts receivable ▶			
1		Less allowance for doubtful accounts ▶			
-	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
١	6	Receivables due from officers, directors, trustees, and other		·:	
١	•	disqualified persons (attach schedule) (see	1		
١		instructions)			
-	7	Other notes and loans receivable (att. schedule)			
1	•	Less allowance for doubtful accounts			
Assets	8	Inventones for sale or use		_	
SS	9	Prepaid expenses and deferred charges	420 055	420 150	441 000
٩	10a	Investments – U S and state government obligations (attach schedule) STMT 4	429,055	428,150	441,090
	b	Investments – corporate stock (attach schedule) SEE STMT 5	583,581	583,142	725,470
ı	С	Investments – corporate bonds (attach schedule) SEE STMT 6	376,505	376,387	384,192
١	11	Investments – land, buildings, and equipment. basis			
١		Less accumulated depreciation (attach sch.)			
١	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶		1	
		Less accumulated depreciation (attach sch.)		<u></u>	· · · · · · · · · · · · · · · · · · ·
	15	Other assets (describe ►			
	16	Total assets (to be completed by all filers – see the			
		instructions. Also, see page 1, item I)	1,427,178	1,387,679	1,550,752
	17	Accounts payable and accrued expenses		8,067	
	18	Grants payable			
es	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ab	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	8,067	
		Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.	1		
<u>ဗ</u>	24	Unrestricted			
a	25	Temporarily restricted			
Ba	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
교		and complete lines 27 through 31.	1		
히	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SSE	29	Retained earnings, accumulated income, endowment, or other funds	1,427,178	1,379,612	
ğ	20	•	1,427,178	1,379,612	
Ş	30	Total net assets or fund balances (see instructions)	1,421,110	1,3/9,012	
-	31	Total liabilities and net assets/fund balances (see	1 407 170	1 207 670	
_,	m4 1	instructions)	1,427,178	1,387,679	
_	Part I				·
1		net assets or fund balances at beginning of year – Part II, column (a), line 30 (mus	t agree with		1 405 455
		of-year figure reported on prior year's return)		1	1,427,178
		r amount from Part I, line 27a		2	-47,566
		r increases not included in line 2 (itemize) ▶		3	
4		ines 1, 2, and 3		4	1,379,612
E	Door	one on the fundad in line 2 (Itamiro)		2	

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains a	nd Losses for Tax on Investment	Income	 	_		
	cabe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co)		(b) How acquired P – Purchase D – Donation	(c) Date ac (mo , day	-	(d) Date sold (mo , day, yr)
1a LT CAPITAL GAIN	DISTRIBUTION					
b						
C						
d			ļ	<u></u>		
<u>e</u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain (e) plus (f)	
a 1,470						1,470
b						
С						
d						
е						
Complete only for assets showing	gain in column (h) and owned by the founda	tion on 12/31/69		(I) (Gains (Col	(h) gain minus
(I) F M V as of 12/31/69	(j) Adjusted basis	(k) Exces	ss of col (i)	col (k), but not l	ess than -0-) or
(I) I M V as OI 12/31/05	as of 12/31/69	over col	(j), if any		Losses (fro	ern col (h))
_a						1,470
b						
c						
d						
е						
2 Capital gain net income or (net ca	pital loss) If gain, also enter in Part If (loss), enter -0- in Part			2		1,470
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6):	_				
If gain, also enter in Part I, line 8,	column (c) (see instructions). If (loss), enter -	0- in \				
Part I, line 8				3		
Part V Qualification Ur	nder Section 4940(e) for Reduced	Tax on Net I	nvestment Incom	16		
(For optional use by domestic private	foundations subject to the section 4940(a) tax	k on net investme	ent income)			
If section 4940(d)(2) applies, leave thi	•		•			
in section 4540(d)(2) applies, leave th	s part blank.					
Was the foundation liable for the secti	on 4942 tax on the distributable amount of an	y year in the base	e period?			Yes X No
If "Yes," the foundation does not quality	fy under section 4940(e). Do not complete thi	s part				
1 Enter the appropriate amount in e	ach column for each year, see the instruction	s before making	any entries			
(a)	(b)		(c)			(d)
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	e of nonchantable-use assets			nbution ratio rvided by col (c))
2014	75,0	000	1,579,0	41		0.047497
2013	91,4	01	1,587,2	48	,	0.057585
2012	72,0	000	1,571,1	73		0.045826
2011	80,3	32	1,538,6	70		0.052209
2010	81,7	18	1,609,0	14		0.050788
2 Total of line 1, column (d)				2		0.253905
3 Average distribution ratio for the 5	i-year base period – divide the total on line 2 i	by 5, or by the				
number of years the foundation ha	as been in existence if less than 5 years			3		0.050781
					_	
4 Enter the net value of noncharitab	ole-use assets for 2015 from Part X, line 5			4		1,589,067
5 Multiply line 4 by line 3				5		80,694
, ,					-	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6		413
	,					
7 Add lines 5 and 6				7		81,107
						/
8 Enter qualifying distributions from				,		
	Part XII. line 4			8		86.000
	Part XII, line 4 line 7, check the box in Part VI, line 1b, and	complete that par	t using a 1% tax rate. S	8 See the	_	86,000

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Pa	Tt VI 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)	l l			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			413
	here ▶ X and enter 1% of Part I, line 27b			-	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)	Ī			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0
3	Add lines 1 and 2	3			413
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		_	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			413
6	Credits/Payments		······································	·	-11-5
а	2015 estimated tax payments and 2014 overpayment credited to 2015 [6a] 1,320	1			
b	Exempt foreign organizations – tax withheld at source	I			
c	Tax paid with application for extension of time to file (Form 8868) 6c	I			
d	Backup withholding erroneously withheld 6d	I			
7	Total credits and payments. Add lines 6a through 6d	7		1	320
8	· · · · · · · · · · · · · · · · · · ·	8			<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			907
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2016 estimated tax 907 Refunded	10			901
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 90.7 Refunded ▶ Int VII-A Statements Regarding Activities	_11		_	
	· · · · · · · · · · · · · · · · · · ·	-		Vaa	LNI
Id	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No X
b	participate or intervene in any political campaign?		1a		 ^-
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				l v
	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.				,,
C	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. \$				٠,
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				,,
4	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	-	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	NT /70	4a		<u> </u>
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		177
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
e	If "Yes," attach the statement required by General Instruction T. Are the sequirements of costion E08(s) (relating to costions 4041 through 4045) estimated eithers.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or By state legislation that offertively expende the governing instrument as that as a send stand discrete as that				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			v	
-	conflict with the state law remain in the governing instrument?	•	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	-
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	IN				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			٠,	ŀ
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				ŀ
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"				١
4.0	complete Part XIV		9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				١
	names and addresses		10		X_
		1	-om 99	IU-PF	(2015)

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	rt 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	·-			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	Χ	
	Website address ► N/A					_
14	·	ne no. 🕨	260-6	25-	674	9
	3821 W COUNTY LINE ROAD SOUTH		46014			
	Located at ► FORT WAYNE IN	ZIP+4 ▶	46814			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here		_ 1			▶ ∟
	and enter the amount of tax-exempt interest received or accrued during the year	▶ _1	5		1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		ĺ		Yes	No
	over a 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					
De	the foreign country ► Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required				I	<u></u>
					Yes	No
10	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly):				163	140
1a	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		110			
	disqualified person?	Yes	X No		1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	_			1	
	the benefit or use of a disqualified person)?	Yes	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				1	
	termination of government service, if terminating within 90 days)	Yes	X No		1	
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		4-		1	
	were not corrected before the first day of the tax year beginning in 2015?		N/A	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				1	
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	7	₩.		1	
	6e, Part XIII) for tax year(s) beginning before 2015?	Yes	X No		1	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20				1	
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions.)		N/A	2b	1	
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		14/17	20		-
С	► 20 , 20 , 20 , 20				1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
Ju	at any time during the year?	Yes	X No		1	
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or	. · · · ·	٠٠٠ تت			
-	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the				ı	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of				I	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the				ı	
	foundation had excess business holdings in 2015.)		N/A	3b	1	
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					
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?			4b]	X
			F	om 99	0-PF	(2015)

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		Activities for Which Fo	orm 4720 May Be Re	equired (contin	nued)		
5a	During the year did the foundation pay or inc						
	(1) Carry on propaganda, or otherwise atter	npt to influence legislation (secti	on 4945(e))?	Y	'es X No		I
	(2) Influence the outcome of any specific pu	blic election (see section 4955);	or to carry on,	_	_		Ī
	directly or indirectly, any voter registration	n drive?		_ Y	′es 🏻 No		I
	(3) Provide a grant to an individual for trave	, study, or other similar purpose	87	Y	′es 🏻 No		
	(4) Provide a grant to an organization other	than a chantable, etc , organiza	tion described in	_			
	section 4945(d)(4)(A)? (see instructions)	•		_ Y	′es 🏻 No		
	(5) Provide for any purpose other than religi	ous, charitable, scientific, literar	y, or educational	_			
	purposes, or for the prevention of cruelty	to children or animals?		Y	′es 🏻 No		
b	If any answer is "Yes" to 5a(1)–(5), did any of	of the transactions fail to qualify i	under the exceptions desc	nbed in			
	Regulations section 53.4945 or in a current r	notice regarding disaster assista	nce (see instructions)?		N/ <u>A</u>	5b	
	Organizations relying on a current notice reg	arding disaster assistance chec	k here		▶ ∐		
C	If the answer is "Yes" to question 5a(4), does	s the foundation claim exemption	n from the tax	. —	_		1
	because it maintained expenditure responsit	ollity for the grant?		N/A 📙 Y	′es 🗌 No		
	If "Yes," attach the statement required by Re	gulations section 53 4945-5(d).					
6a	Did the foundation, during the year, receive a	any funds, directly or indirectly, to	o pay premiums				
	on a personal benefit contract?			Y	′es 🛚 X No		
þ	Did the foundation, during the year, pay pren	niums, directly or indirectly, on a	personal benefit contract?	?		6b	<u> X</u>
	If "Yes" to 6b, file Form 8870.						1
	At any time during the tax year, was the foun	• • •			′es ⊠ No		1
	If "Yes," did the foundation receive any proce				N/A	7b	
P		ers, Directors, Trustees	, Foundation Mana	gers, Highly P	aid Employee	es,	
4 1	and Contractors	4:					
1 1	List all officers, directors, trustees, founda	tion managers and their com	pensation (see instruction	ons).	40 000000000000000000000000000000000000	-	
			(b) Title, and average	(c) Compensation	(d) Contributions to	i _	
	(a) Name and addr	ess	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation		ense account, r allowances
DC	(a) Name and addr	FORT WAYN	hours per week	(If not paid,	plans and deferred		
		······································	hours per week devoted to position	(If not paid,	plans and deferred		
38	DNALD WOOD	FORT WAYN	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred compensation		r allowances
38 DF	ONALD WOOD 321 W. COUNTY LINE ROAD SOUTH	FORT WAYN IN 46814	hours per week devoted to position PRESIDENT 3.00	(If not paid, enter -0-)	plans and deferred compensation		r allowances
38 DF	ONALD WOOD 321 W. COUNTY LINE ROAD SOUTH ARLENE RICHARDSON	FORT WAYN IN 46814 FORT WAYNE	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE	(If not paid, enter -0-)	plans and deferred compensation		r allowances
38 DF	ONALD WOOD 321 W. COUNTY LINE ROAD SOUTH ARLENE RICHARDSON	FORT WAYN IN 46814 FORT WAYNE	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE	(If not paid, enter -0-)	plans and deferred compensation		r allowances
38 DF	ONALD WOOD 321 W. COUNTY LINE ROAD SOUTH ARLENE RICHARDSON	FORT WAYN IN 46814 FORT WAYNE	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE	(If not paid, enter -0-)	plans and deferred compensation		r allowances
38 DF	ONALD WOOD 321 W. COUNTY LINE ROAD SOUTH ARLENE RICHARDSON	FORT WAYN IN 46814 FORT WAYNE	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE	(If not paid, enter -0-)	plans and deferred compensation		r allowances
38 DF	ONALD WOOD 821 W. COUNTY LINE ROAD SOUTH ARLENE RICHARDSON 821 W. COUNTY LINE ROAD SOUTH Compensation of five highest-paid emplo	FORT WAYN IN 46814 FORT WAYNE IN 46814	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00	(If not paid, enter -0-)	plans and deferred compensation O		r allowances
38 D# 38	ONALD WOOD 821 W. COUNTY LINE ROAD SOUTH ARLENE RICHARDSON 821 W. COUNTY LINE ROAD SOUTH	FORT WAYN IN 46814 FORT WAYNE IN 46814	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00	(If not paid, enter -0-)	plans and deferred compensation O		r allowances
38 D# 38	ONALD WOOD 821 W. COUNTY LINE ROAD SOUTH ARLENE RICHARDSON 821 W. COUNTY LINE ROAD SOUTH Compensation of five highest-paid emplo	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00	(If not paid, enter -0-)	plans and deferred compensation O	(e) Exp	r allowances
38 DF 38	ONALD WOOD 821 W. COUNTY LINE ROAD SOUTH ARLENE RICHARDSON 821 W. COUNTY LINE ROAD SOUTH Compensation of five highest-paid emplo	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	o allowances O O observed account,
38 DF 38	COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGH SOUTH COMPENSATION OF FIVE HIGHEST-PAID EMPIREMENTAL SOUTH (a) Name and address of each employee paid	FORT WAYN IN 46814 FORT WAYNE IN 46814 Oyees (other than those include	hours per week devoted to position PRESIDENT 3.00 VICE PRESIDE 3.00 ded on line 1 – see instru (b) Title, and average hours per week	(If not paid, enter -0-) 0 1,000 ictions). If none,	plans and deferred compensation 0 0 enter (d) Contributions to employee benefit plans and deferred	(e) Exp	opense account,

Form 990-PF (20	115) THE 80/20 FOUNDATION, INC.	20-4217594	Page 7
Part VIII	Information About Officers, Directors, Trustees, For and Contractors (continued)	undation Managers, Highly Paid En	nployees,
3 Five highe	est-paid independent contractors for professional services (see in	structions). 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		
	four largest direct chantable activities during the tax year. Include relevant statistical information therefore beneficiaries served, conferences convened, research papers produced, etc.	n such as the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see in	structions)	
	gest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-re	lated investments. See instructions		
3			
Total. Add lines	1 through 2	_	
Total. Add mies	i dirough o	111111111111111111111111111111111111111	I

Form 990-PF (2015)

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

Form 990-PF (2015)

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Page 9

Pa	rt XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years pnor to 2014	2014	2015
	line 7				79,040
2	Undistributed income, if any, as of the end of 2015		1	-	
	Enter amount for 2014 only			76,379	
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2015		•		
а	From 2010				
þ	From 2011			•	
C	From 2012				
d	From 2013				
е	From 2014			!	
f	Total of lines 3a through e				
4	Qualifying distributions for 2015 from Part XII,	·			
	line 4 ▶ \$86,000		1	1	
а	Applied to 2014, but not more than line 2a			76,379	
	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election			***************************************	
_	required – see instructions)				
d	Applied to 2015 distributable amount				9,621
	Remaining amount distributed out of corpus				3,021
5	Excess distributions carryover applied to 2015				
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as		I I	1	
•	indicated below:		1		
•	•		1		
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				•••••••••••••••••••••••••••••••••••••••
D	Pnor 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				
a	Subtract line 6c from line 6b. Taxable				
	amount – see instructions	***************************************			
е	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				69,419
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				
0	Analysis of line 9:				
а	Excess from 2011		1	Ī	
b	Excess from 2012			1	
С	Excess from 2013		1		
d	Excess from 2014			•	
е	Excess from 2015			‡	
				T	

	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income				<u> </u>	<u></u>
Pa	art XV Supplementary Inform	•		the foundation ha	d \$5,000 or more	in assets at
_	any time during the ye		tions.)			
1	Information Regarding Foundation Man	=				
а	List any managers of the foundation who has			•	the foundation	
	before the close of any tax year (but only if N/A	tney have contributed	i more tnan \$5,000). (S	see section 507(a)(2).)		
<u> </u>	 	um 100/ or more of th	a stock of a composition	o (or on oqually lorge pe	ertion of the	
b	List any managers of the foundation who or ownership of a partnership or other entity)		•		ortion of the	
	N/A	or writer the loundatio	in has a 10% or greater	i iliterest.		
,	Information Regarding Contribution, Gr	ant Gift Loan Scho	olarship etc. Program	ms.		
	Check here ► X if the foundation only r				es not accept	
	unsolicited requests for funds. If the foundation		•	-	•	
	other conditions, complete items 2a, b, c, a		, (,		
а	The name, address, and telephone numbe		the person to whom as	oplications should be a	idressed:	
	N/A			•		
_	· 					
b	The form in which applications should be s	ubmitted and informat	tion and materials they	should include:		,
	N/A					
С	Any submission deadlines:					
	N/A					
d	Any restrictions or limitations on awards, su	uch as by geographica	al areas, charitable field	ds, kinds of institutions,	or other	
	factors					
	N/A					
AA						Form 990-PF (2015)

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 7 86,000 86,000 Total ▶ 3a **b** Approved for future payment N/A Total ▶ 3b

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Part XVI-/	Analysis of income-Producing Act	ivities				
Enter gross an	nounts unless otherwise indicated.	Unrelate (a) Business code	d business income (b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program s	ervice revenue.			5555		(See instructions)
a	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
b						
с					,	, <u>.</u>
d						T-1.
е						
f						
g Fees a	and contracts from government agencies					
2 Membersh	ip dues and assessments					
	savings and temporary cash investments			 		
4 Dividends	and interest from secunties			14	40,975	
	income or (loss) from real estate:					
	inanced property	ļ		4		· · · · · · · · · · · · · · · · · · ·
	bt-financed property	ļ		4		
	income or (loss) from personal property			- 		
	stment income					
	ss) from sales of assets other than inventory			14	1,470	····
	e or (loss) from special events			-		
•	ît or (loss) from sales of inventory					
11 Other reve	nue: a			1		· · · · · · · · · · · · · · · · · · ·
		.		 		
	a warne	·		 		·
		·		-		
e	42.42				40 445	
	Add columns (b), (d), and (e)		Į (42,445 13	42,445
					7.7	4/445
	l line 12, columns (b), (d), and (e)					12/113
See workshee	et in line 13 instructions to verify calculations.)	oomnlishm.	ant of Evenat D	IFDOCOS		12/110
See workshee Part XVI-	et in line 13 instructions to verify calculations.) Relationship of Activities to the A		•		<u> </u>	12/113
See workshee Part XVI- Line No.	Relationship of Activities to the Activity for which income	is reported in coli	umn (e) of Part XVI-A	contribute	d importantly to the	
See workshee Part XVI- Line No. ▼	et in line 13 instructions to verify calculations.) Relationship of Activities to the A	is reported in coli	umn (e) of Part XVI-A	contribute	d importantly to the	
See workshee Part XVI- Line No.	Relationship of Activities to the Activity for which income	is reported in coli	umn (e) of Part XVI-A	contribute	d importantly to the	
See workshee Part XVI- Line No. ▼	Relationship of Activities to the Activity for which income	is reported in coli	umn (e) of Part XVI-A	contribute	d importantly to the	
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See workshee Part XVI- Line No. ▼	Relationship of Activities to the Activity for which income	is reported in coli	umn (e) of Part XVI-A	contribute	d importantly to the	
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Part	XVII	Information Regardantes Exempt Organiza	_	nsters to and	IIransac	tions and Relat	ionsnips Witi	n Noncharitable			
1 D	id the oras	anization directly or indir		in any of the follow	ving with any	other organization d	lescribed	1		Yes	No
	•	01(c) of the Code (other		•	-	-					<u> </u>
	ganızatıor		trair ocotion	oo i(o)(o) oigainz	ations) of in	occion oz, rolaling	to political				
	•	om the reporting founda	ition to a non-	chantable exempt	organization	of:			- 1		
) Cash	om the reporting touride		Grantable exempt	organization	0		1	a(1)	1	Х
•	?) Other a	esets							a(2)		X
-	ther trans							ľ	-(-/		
		f assets to a noncharita	ble exempt o	rganization				1	b(1)	1	Х
	•	ses of assets from a no	•	_	ì				b(2)		X
-	•	of facilities, equipment,			•				b(3)		X
-	•	rsement arrangements	o. 0o. 0000						b(4)		X
•	•	or loan guarantees							b(5)		X
	•	nance of services or me	mbership or f	fundraising solicitat	tions				b(6)		X
•	•	acilities, equipment, ma	•	-					1c		Х
	-	er to any of the above is	•	•		umn (b) should alwa	vs show the fair m	_	<u></u>		
		goods, other assets, or		=			-				
		transaction or sharing	_								
	Line no	(b) Amount involved		e of nonchantable exemp				ansactions, and shanng arrang	jemen	ts	
N/A											
								-			
			<u> </u>								
		<u> </u>									
		ļ									
		lation directly or indirect	•				ons	_	_	r=	,
		n section 501(c) of the C		nan section 501(c)(3)) or in sec	tion 527?] Ye	s X	No
b If		nplete the following sch	edule			· · · · · · · · · · · · · · · · · · ·					
3.7		(a) Name of organization		(b) Type of o	rganization		(c) Descrip	otion of relationship			
N,	A										
		•									
											
	Under ne	naities of penury, I declare that	at I have examine	ed this return including :	accompanying	schedules and statements	and to the best of my	knowledge and helief it is to	<u></u>		
		nd complete Declaration of p						May the IRS discuss	•		
Sign			_					with the preparer sho			
Here	į	1	5					(see instructions)?		Yes	No
1616		1 VARUNI	MK ,	harel		10/24/1/6	VICE	PRESIDENT			
	Sign	nature of officer or trustee	14)10	jun ve		Date	Title	FRESIDENI			
	` 				Dmnor-d-	<u></u>			\neg		
	Pnnt/T	ype preparer's name			Preparer's sig	gnature		Date		Check	rf
Paid	नवचर.	REY A. SANDERS	SON, CPA		///Len	delan	alex.	10-18-	16	self-em	pioyed
repar	er i	name ► BADEN			TAKE T	LC		PTIN P002	ار ر	192	
Jse Or	lv I		POINTE					Firm's EIN ▶ 35-1			
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10500001 THE 80/20 FOUNDATION, INC.

Federal Statements

20-4217594 FYE: 8/31/2016

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	
-PF, Part I, Lir	_
-PF, Part I, Lir	0
-PF, Part I, Lir	Accounting
-PF, Part I, Lir	•
-PF, Part I, Lir	16b
ተ	Line
ተ	
ተ	Part
Statement 1 - Form	ተ
Statement 1	- Form
Statement	_
	statement 1

Charitable Purpose	\$		Charitable Purpose	\$ \$		Date
Adjusted Net	\$ \$	axes	Adjusted Net	o o o o o o o o o o	utions, Gifts, Grants	Book Value Explanation
Net Investment	\$ \$	-PF, Part I, Line 18 - T	Net Investment	w w	25 - Noncash Contrib	Book Value Amount
Total	\$ 1,335 \$ 1,335	Statement 2 - Form 990-PF, Part I, Line 18 - Taxes	Total	\$ 1,676 \$ 1,676	Statement 3 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants	FMV Explanation
Description	ACCOUNTING FEES TOTAL	35 1	Description	FEDERAL EXCISE TAX TOTAL	Statement 3 - Forn	Amount Description 1,000 .

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Description	m	Beginning of Year		End of Year	Basis of Valuation	"	Fair Market Value
FEDL NATL MTG ASSN POOL MUTUAL FUNDS - US	ς	5,446 423,609	ᡐ	4,541 423,609	COST	თ	3,019 438,071
TOTAL	\	429,055	\	428,150		\sqrt{s}	441,090

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20-4217594 FYE: 8/31/2016

Federal Statements

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

Description	ш	Beginning of Year		End of Year	Basis of Valuation	ш	Fair Market Value
MUTUAL FUNDS	က	583,581	တ	583,142	COST	က	725,470
TOTAL	က	583,581	တ	583,142		ς, I	725,470

Statement 6 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description		Beginning of Year		End of Year	Basis of Valuation	Ľ.	air Market Value
BOND FUNDS BONDS	ጭ	351,315 25,190	ళ	351,315 25,072	COST	ጭ	358,542 25,650
TOTAL	,	376,505	^م	376,387		ω. 	384,192

Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

(0)		71-1-1			
VE RESOURCE NONE NONE	525 OXFORD ST	Status	Ā	Purpose	Amount
NONE	5				
NONE	J.		GENERAL SUPPORT		2,000
NONE	303 E. MAIN ST.				
EIN CIN	PC		GENERAL SUPPORT		2,000
	311 MAIN STREET	-			
FORI WAINE IN 40802 NONE	PC		GENERAL SUPPORT		6,000
COMMUNITY HARVEST FOOD BANK 99	999 E TILLMAN RD.	ζD.			
FORT WAYNE IN 46816 NONE	PC		GENERAL SUPPORT		1,000
IVY TECH FOUNDATION 38	3800 N ANTHONY BLVD	BLVD.			
FORT WAYNE IN 46805 NONE	PC		GENERAL SUPPORT,	GENERAL SUPPORT, SCHOLARSHIP FUND	26,000
MATTHEW 25 41	413 E JEFFERSON BLVD	BLVD.			
FORT WAYNE IN 46802 NONE	PC		GENERAL SUPPORT		1,000
THE FORT WAYNE PHILHARMONIC 49	4901 FULLER DRIVE	VE			
FORT WAYNE IN 46835 NONE	PC		GENERAL SUPPORT		20,000

10500001 THE 80/20 FOUNDATION, INC.

Federal Statements

20-4217594 FYE: 8/31/2016 Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name		Address		
Address	Relationship	Status	Purpose	Amount
TRINITY EPISCOPAL CHURCH	611 W BERI	BERRY STREET		
FORT WAYNE IN 46802	NONE	PC	GENERAL SUPPORT	5,000
VISITING NURSE	5910 HOMESTEAD RD.	STEAD RD.		
FORT WAYNE IN 46814 N	NONE	PC	COMMUNITY GRIEF CENTER	15,000
FWCS FOUNDATION	1200 S. CJ	CLINTON ST.		
FORT WAYNE IN 46802	NONE	PC	SCHOLARSHIP FUND	1,000
FORT WAYNE RESCUE MISSION	301 W. SU	SUPERIOR STREET		
FORT WAYNE IN 46802	NONE	PC	GENERAL SUPPORT	1,000
TURNSTONE CENTER FOR CHILDREN & ADU	3320 N.	CLINTON ST.		
FORT WAYNE IN 46805	NONE	PC	GENERAL SUPPORT	2,000
INDIANA UNVERSITY-PURDUE UNIVERSITY 2101	ы	COLISEUM BLVD.		
FORT WAYNE IN 46805	NONE	PC	GENERAL SUPPORT	1,000
TOTAL				86,000

INVESTMENT REPORT August 1, 2016 - August 31, 2016 Account # 678-156965 CORPORATION

Holdings

Core Account		Price	Total	Total	Unrealized	Est. Annual Est.Yield	Est. Yield
Description	Quantity	Per Unit	Market Value	Cost Basis	Gain/Loss	Income (EAI)	(EY)
FIDELITY GOVT MMKT DAILY MONEY CLASS (FZBXX) 7-day vield 0.01%	21,933 670	\$1 0000	\$21,933 67	not applicable	not applicable	•	,
Total Core Account (1% of account holdings)			\$21,933.67			•	,
Mutual Funds							
		Price	Total	Total	Unrealized	Est. Annual Est. Yield	Est. Yield
Description	Quantity	Per Unit	Market Value	Cost Basis	Gain/Loss	Income (EAI)	(EY)
Bond Funds							.0,2
VANGUARD TOTAL BOND MARKET INDEX ADMIRAL (VBTLX)	39,465 898	\$11 1000	\$438,071 46	\$423,608 90	\$14,462 56	\$10,597 03	2 420%
VANGUARD INT-TERM BOND INDEX ADMIRAL (VBILX)	7,052.790	11 8500	83,575 56	76,251 18	7,324 38	2,139 71	2 560
VANGUARD HI YIELD CORPORATE ADMIRAL	17,301.038	5 8600	101,384 08	100,028 00	1,356 08	5,566 23	5 490
VANGUARD INTERMED TRM INVST GR ADMIRAL (VFIDX)	17,169 376	10 1100	173,582 39	175,036.00	-1,453 61	5,187 13	2 990
Total Bond Funds (51% of account holdings)			\$796,613 49	\$774,924 08	\$21,689 41	\$23,490 10	
Total Mutual Funds (51% of account holdings)			\$796,613.49	\$774,924.08	\$21,689.41	\$23,490.10	

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INVESTMENT REPORT August 1, 2016 - August 31, 2016

Holdings

Exchange Traded Products Indudes exchange-traded notes (ETNs), and other exchange-traded vehicles	ded notes (ETNs), an	d other exchange-fra	ided vehicles		-
Description	Quantity	Price Per Unit	Total Market Value	Total Cost Basis	Unrealized Gain/Loss
Equity ETPs				`	
VANGUARD INTL EQUITY INDEX FD INC FTSE	000 09	\$44 9800	\$2,698 80	\$2,877.75	-\$178 95
M VANGUARD ADMIRAL FDS INC S&P 500 VALUE	918 000	92 4400	84,859 92	54,698 97	30,160 95
INDEX FD ETF SHS (VOOV) M VANCILABD SED SMALL CAB 600 VV(IOV)	411 000	107 0000	13 085 22	25 120 78	18 564 46
MVANGUARD ADMIRAL FDS INC S&P MIDCAP	834 000	105 4800	87,970 32	51,879.44	36,090 88
400 INDEX FD ETF SHS (IVOO)					
MVANGUARD INTL EQUITY INDEX FD INC FTSE ALL-WORLD EX-IIS INDEX FD FTE SHS (VEL)	1,635 000	44 9800	73,542 30	80,083 57	-6,541.27
M VANGUARD INDEX FOS FORMERLY	437 000	199 5200	87,190 24	52,155 88	35,034 36
INDEX TR TO 05/24/2001 S&P 500 ETF SHS NEW (VOO)					
Total Equity ETPs(24% of account holdings)			380,246 80	267,116.37	113,130 43
Fixed Income ETPs					
VANGUARD CHARLOTTE TOTAL INTL BD INDEX FD ETF (BNDX)	2,903 000	\$56 0900	\$162,829 27	\$156,598 09 🗸	\$6,23118
VANGUARD SCOTTSDALE FDS INTERMEDIATE TERM CORPORATE BOND INDEX (VCIT)	1,578 000	89 6500	141,467.70	134,942 57	6,525 13
Total Fixed Income ETPs(19% of account holdings)			304,296 97	291,540 66	12,756 31
Other ETPs M VANGUARD INDEX FDS VANGUARD REIT ETF FORMERLY VANGUARD INDEX TR TO 05/24/01 REIT VIPER SHS (VNQ)	460 000	\$88 9700	\$40,926 20	\$24,484 93	\$16,441 27
Total Other ETPs (3% of account holdings)			40,926 20	24,484 93	16,441 27
Total Exchange Traded Products (46% of account holdings)	oldings)		\$725,469.97	\$583,141.96	\$142,328.01
		180400000000000000000000000000000000000			

Holdings

August 1, 2016 - August 31, 2016

INVESTMENT REPORT

Bonds			i		;	:	• • •	(
Description	Maturity	Quantity	Price Per Unit /	Price Total Market Value Per Unit Accrued Interest (AI)	Total Cost Basis	Unrealized Gain/Loss	Est. Annual Income (EAI)	Coupon Rate
Asset Backed Securities					690%			
FEDL NATL MTG ASSN POOL #972690	02/01/38	75,000 000	\$110 6450	\$3,018 50	unknown	unknown	•	5 000%
FIXED COUPON ***UNRATED*** MONTHLY CUR FACTOR 0 03637454 CUR FACE	MONTHLY CUR F	ACTOR 0 03637454		2728 09 CUSIP. 31414QC39				
Total Asset Backed Securities (0% of account holdings)	of account holding	(s		\$3,018 50			•	
Corporate Bonds								
MWAL-MART STORES INC NOTE	04/05/17	25,000 000	\$102 6000	\$25,650 00	\$25,072 37 B t	\$577 63	\$1,343 740	5 375%
FIXED COUPON MOODYS ARE SAP AS SEMIANNUALLY CUSIP 931	S&P AA SEMIANN	UALLY CUSIP 9311	1142CG6	4044 O				
Total Corporate Bonds (2% of account holdings)	unt holdings)			\$25,650 00	\$25,072 37	\$577 63	\$1,343 740	
Total Bonds (2% of account holdings)	lings)		ė.	\$28,668.50	\$25,072.37	\$577.63	\$1,343.740	
Total Holdings				\$1,572,685.63	\$1,383,138.41	\$164,595.05	\$24,833.84	
		Accrued Interest (AI)	,	544 97				
		Total Including Accrised Interest (Al)	ad Interset (A!)	\$1 573 230 ED				

All remaining positions held in cash account

Cost Basis - the original amount paid for a security, including the amount of reinvested dividends and capital gains, plus or minus certain adjustments. See last page of statement for details Totath Cost Basis does not include the cost basis on core, money market or other positions where cost basis is unknown or not applicable.

Estimated Annual Income (EAI) & Estimated Vield (EV)- EAI is an estimate of annual income for a specific security position by its statement closing date market value. EY reflects only the income generated by an investment; it does not reflect changes in its price, which may fluctuate For certain types of securities, EAI and EY could include the return of principal or capital gains which would render them overstated. EAI and EY could include the return of principal or capital gains which would render them overstated. EAI and EY and EV could include for making investment, it admits, or tax decisions. There is no guarantee that your investments will actually generate the EAI or EY presented. Actual income and yield might be higher or lower. EAI and EY should not be confused with a security's 30-day Yield or 7-day Yield, if provided, as such yield quotations reflect the actual historical performance of a security. For additional information, including calculation details, refer to the "Additional Information at the end of your statement. EAI & EY

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Account # 678-156965 CORPORATION

INVESTMENT REPORT August 1, 2016 - August 31, 2016

Holdings

(Accrued Interest) - Presented for domestic fixed income securities and represents interest accumulated since the last coupon date, but not yet paid by the issuer or received by NFS. Ali is calculated for the following securities: fixed rate bonds and Certificates of Deposit (CDs). There is no guarantee that Al will be paid by the issuer. Al for treasury and GNMA securities, however, is backed by the full faith and credit of the United States Government. Al totals represent accruals for only those securities with listed Al in the Holdings section of this statement. Please refer to the Help/Glossary section of Fidelity com for additional information ₹

Third-party provided

This may not reflect all of your gains/losses due to incomplete cost basis.

See Additional Information and Endnotes for important information about the adjusted cost basis information provided

M Position held in margin account.

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Activity

Dividends, Interest & Other Income

(Includes dividend reinvestment)

Date S. 07/29 V.						
	Security Name	CUSIP	Description	Quantity	Price	Amount
	VANGUARD HI YIELD CORPORATE 922031760 ADMIRAL	922031760	Dividend Received	ı		\$459.05
	VANGUARD INT-TERM BOND INDEX 921937801 ADMIRAL	921937801	Dividend Received			178.45
07/29 V	VANGUARD INTERMED TRIM INVST 922031810 GR ADMIRAL	922031810	Dividend Received			432.28
V 62/70	VANGUARD TOTAL BOND MARKET 921937603 INDEX ADMIRAL	921937603	Dividend Received		_	866.48
08/05 V,	VANGUARD CHARLOTTE TOTAL INTL BD INDEX FD ETF	92203J407	Dividend Received		-	145.15
08/05 V.	VANGUARD SCOTTSDALE FDS INTERMEDIATE TERM CORPORATE BOND INDEX	92206C870	Dividend Received	, , , , , , , , , , , , , , , , , , , ,		372 41