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OMB No 1545-0052

Inspection

Department of the Treasury

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>. Internal Revenue Service , and ending 09-30-2016 For calendar year 2015, or tax year beginning 10-01-2015 Name of foundation A Employer identification number Timken Family Charitable Trust 34-6922439 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite c/o 200 Market Ave N Room 210 (330) 452-1144 City or town, state or province, country, and ZIP or foreign postal code Canton, OH  $\,$  44702  $\,$ C If exemption application is pending, check here G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return A mended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change If private foundation status was terminated  $\checkmark$ Section 501(c)(3) exempt private foundation **H** Check type of organization under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation JA ccounting method ✓ A ccrual IFair market value of all assets at end Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), Other (specify) line 16) ▶\$ 1,082,711 (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses Disbursements Revenue and Adjusted net income (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see Net investment for chantable expenses per books ıncome purposes (d) (cash basis only) Contributions, gifts, grants, etc , received (attach 1 2 Check ► ☐ If the foundation is **not** required to attach Sch B Interest on savings and temporary cash investments 3 40,897 40,897 40,897 4 Dividends and interest from securities Gross rents . . . . . Net rental income or (loss)\_ b (چە 23.665 Net gain or (loss) from sale of assets not on line 10 6a b Gross sales price for all assets on line 6a 68,557 23,665 7 Capital gain net income (from Part IV, line 2) . Net short-term capital gain . 8 9 Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold . . . b Gross profit or (loss) (attach schedule) . c 11 Other income (attach schedule) 40.897 64.562 64.562 12 Total.Add lines 1 through 11 Compensation of officers, directors, trustees, etc 13 Other employee salaries and wages 14 Pension plans, employee benefits. 15 Operating and Administrative Expenses **16**a Legal fees (attach schedule). . . ارچە 1.400 1,400 Accounting fees (attach schedule). b Other professional fees (attach schedule) c 17 **چ** 646 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 20 Occupancy Travel, conferences, and meetings. 21 22 Printing and publications . . (چە 200 200 23 Other expenses (attach schedule). Total operating and administrative expenses. 24 2.246 0 1.600 Add lines 13 through 23 . . . . 45,450 45.450 25 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 47.696 n 47.050 27 Subtract line 26 from line 12 16.866 а Excess of revenue over expenses and disbursements b Net investment income (If negative, enter -0-) 64 562

Adjusted net income(if negative, enter -0-)

40 897

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			of year
			(a) Book Value	(b) Book		(c) Fair Market Value
	1	Cash—non-interest-bearing	67,839	1	40,768	40,768
	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 schedule) ▶				
		Less allowance for doubtful accounts ▶				
S	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments —U S $$ and state government obligations (attach schedule)	222,553		177,660	
	b	Investments—corporate stock (attach schedule)	743,465	<b>9</b> 3	832,741	851,331
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)	415			
	16	<b>Total assets</b> (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	1,034,272		1,051,169	1,082,711
	17	Accounts payable and accrued expenses			31	
_	18	Grants payable				
Liabilities	19	Deferred revenue				
≝	20	Loans from officers, directors, trustees, and other disqualified persons $% \left( 1\right) =\left( 1\right) \left( 1\right) \left$				
<u> </u>	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe ►)				
	23	Total liabilities(add lines 17 through 22)			31	
S		Foundations that follow SFAS 117, check here ▶				
çes		and complete lines 24 through 26 and lines 30 and 31.				
an	24	Unrestricted				
Balance	25	Temporarily restricted				
ק	26	Permanently restricted				
Fund		Foundations that do not follow SFAS 117, check here				
ō		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds $\ldots \ldots \ldots$	1,310,588		1,310,588	3
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds	-276,316		-259,450	
Net	30	Total net assets or fund balances(see instructions)	1,034,272		1,051,138	3
_	31	$\textbf{Total liabilities and net assets/fund balances} (\texttt{see} \ \texttt{instructions})  .  .$	1,034,272		1,051,169	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	•	•		
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree		_
				_	1	1,034,272
2		Enter amount from Part I, line 27a			2	16,866
3		Other increases not included in line 2 (itemize) ▶			3	
4		Add lines 1, 2, and 3			4	1,051,138
5		Decreases not included in line 2 (itemize) ▶			5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—I	Part II, column (b), I		6	1,051,138

Part IV Capital Gains and Losses for Tax on Investment Income

How acquired

			(s) of property sold (e g , re or common stock, 200 shs			How acquire P—Purchase (b) D—Donation	e (c)	Date acquired (mo , day, yr )	Date sold (d) (mo , day, yr )
1 a	45000 HSBC Fin Corp	)				(2) D Domation		006-10-25	2019-01-19
b	<u>'</u>								
с									
d									
е е									
			Donraciation allows	<u>а</u> Т	Cost	or other basis	Н_	Cour	or (loss)
(e	e) Gross sales price		Deprectation allower (f) (or allowable)	u		expense of sale			(f) minus (g)
а	4.	5,000	<u> </u>			44,89	92		108
b									
С									
d									
e							_		
	mnlete only for assets sh	howing	gain in column (h) and owne	d hv t	he foundation	on 12/31/69	_	Gaine (Col	(h) gain minus
	F M V as of 12/31/69		Adjusted basis	14 5 7 6	Exc	ess of col (ı)		col (k), but no	ot less than -0-) <b>or</b>
			<b>(j)</b> as of 12/31/69		(K) over	col (j), if any	(1)	Losses	(from col (h)) 108
a		-					_		108
b							_		
С .							_		
d							_		
е							_		
2	Capital gain net incom	ne or (ne				n Part I, line 7 in Part I, line 7			23,665
3	Net short-term canital	l dain oi	(loss) as defined in sectio	ne 12	22(5) and (6)		' <del>  _</del>		23,003
3	•	-	ne 8, column (c) (see instru				,		
	in Part I, line 8 .						}   з		
Part	V Qualification U	nder S	Section 4940(e) for R	leduc	ed Tax on	Net Investm	ent I	ncome	
	tional use by domestic pr on 4940(d)(2) applies, le		undations subject to the se s part blank	ection	4940(a) tax (	on net investmen	t ıncor	me)	
			n 4942 tax on the distributa r under section 4940(e) Do		•		oeriod?	,	┌ Yes 🗸 No
			ch column for each year, se				tries		
	(a)		(b)		(a)			(d)	
	e period years Calendar or tax year beginning in)	Adjus	ted qualifying distributions	Net	(c) value of nonchan	table-use assets		Distributio (col (b) divided	
y cur (	2014		70,275			1,272,564		(cor (b) divided	000 055223
	2013		53,500			1,406,125			000 038048
	2012		34,525			1,277,546			000 027024
	2011		57,200			1,172,036			000 048804
	2010		49,345			1,207,374			000 040870
2	<b>Total</b> of line 1, column	(d)				[	2		000 209969
3			the 5-year base period—div ation has been in existence				3		000 041994
4	•		ritable-use assets for 2015		•		4		1,047,872
5					•	-	5		44,004
6			ncome (1% of Part I, line 2			F	6		646
7				•		ļ.	7		44,650
8			from Part XII, line 4...			ļ-	8		47,050
0			than line 7, check the box i			L		usıng a 1% ta:	
	the Part VI instruction	าร							

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

**b** If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation.

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

**▶**0H

If "Yes," complete Part XIV

and addresses

8h

9

10

Yes

No

No

Par	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 th	e			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disquali	fied person had			
	advisory privileges? If "Yes," attach statement (see instructions)		12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	on application?	13	Yes	
	Website address ►N/A				
14	The books are in care of ▶JONATHAN CRAWFORD  Telep		1455-	5281	
		P+4 ▶ <u>44702</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check her	1 1	•	<b>•</b>	_
	and enter the amount of tax-exempt interest received or accrued during the year	15		1 1	1
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other	authority over	۔ ا	Yes	No
	a bank, securities, or other financial account in a foreign country?  See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank	and Einancial	16		No
	Accounts (FBAR) If "Yes", enter the name of the foreign country	aliu Filialiciai			
Par	t VIII-B Statements Regarding Activities for Which Form 4720 May Be Requir	ed			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
<b>1</b> 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 🗸 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	┌─ Yes 🗸 No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes 🗸 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	┌─ Yes 🗸 No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	ΓYes √ No			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"	i ica ita ita			
	ıf the foundation agreed to make a grant to or to employ the official for a period				
	after termination of government service, if terminating within 90 days )	┌ Yes ┌ No			
b	If any answer is "Yes" to $1a(1)-(6)$ , did <b>any</b> of the acts fail to qualify under the exceptions described				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶_			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts				
	that were not corrected before the first day of the tax year beginning in 2015?		<b>1</b> c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a p	rıvate			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d				
	and 6e, Part XIII) for tax year(s) beginning before 2015?	Yes  ✓ No		 	
b	If "Yes," list the years > 20, 20, 20, 20 Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 494	2(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 49-	` ' '			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )		2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the year	s here			
	▶ 20, 20, 20				
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at	_			
		│ Yes  ✓ No		 	
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundat or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period appro				
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, o				
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determ				
	If the foundation had excess business holdings in 2015 )		3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable	purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeo				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year begin	ning in 2015?	4b		No

Form 990-F											Page (	
Part VII					ich Form 4720	May	Be Required <i>(Cor</i>	ntii	nuec	1)		
	g the year did the foundation	' '	•									
( <b>1)</b> C	arry on propaganda, or oth	erwise	attempt to influence	e leg	ıslatıon (section 49	45(e))	Yes	~	No			
	ifluence the outcome of an		•		, ,	•						
10	n, directly or indirectly, any	vote	registration drive?.	•			· · · · \ \ Yes	~	No			
<b>(3)</b> P	rovide a grant to an individ	ual foi	travel, study, or oth	ers	ımılar purposes?		☐ Yes	<b>~</b>	No	ı İ		
		anization other than a charitable, etc , organization described 7 (see instructions)										
	rovide for any purpose othe ducational purposes, or for		- ·				· · ·		No			
<b>b</b> Ifany	answer is "Yes" to 5a(1)-	(5), d	id <b>any</b> of the transact	tions	fail to qualify under	the e	xceptions described i	ın	j	i	j	
Regul	ations section 53 4945 or	inac	urrent notice regard	ıng c	lisaster assistance (	(see ii	nstructions)?		.	5b		
O rgar	nizations relying on a curre	nt not	ice regarding disasti	eras	sistance check here	e		_	.	1		
<b>c</b> If the	answer is "Yes" to question	n 5a(	4), does the foundati	ion c	laım exemption from	n the						
tax be	ecause it maintained exper	diture	responsibility for th	e gr	ant?		· · · · \ Yes	$\Box$	No			
If "Ye	s," attach the statement req	uired l	y Regulations section	n 53	4945-5(d)		·	•	ĺ	ĺ	İ	
<b>6a</b> Did th	ne foundation, during the ye	ar, re	ceive any funds, dire	ctly	or indirectly, to pay	prem	ums on					
a pers	sonal benefit contract?					٠	· · Fyes	V	No			
<b>b</b> Did th	ne foundation, during the ye	ar, pa	y premiums, directly	orı	ndirectly, on a perso	onal be	enefit contract?		. i	6b	No	
	s" to 6b, file Form 8870				.,				l			
<b>7a</b> Atan	y time during the tax year,	was t	ne foundation a party	to a	a prohibited tax shel	ter tra	nsaction?	I.	No			
<b>b</b> Ifves	, did the foundation receiv	e anv	proceeds or have an	v ne	t income attributable	e to th	•		i	7b	i	
	_ Information Abou			_							ovees,	
Part VII	and Contractors			,								
1 List al	officers, directors, truste	es, fo	ındation managers a	nd t	heir compensation (	see in:	-					
(a)	Name and address	(b)	Title, and average hours per week devoted to position		Compensation(If not paid, enter -0-)	1	(d) Contributions to ployee benefit plans deferred compensation				e account, Ilowances	
WARD J TIMK	EN	TRU	STEE		0	1	referred compensation					
C/O 200 M CANTON, 0	ARKET AVE N STE 210 OH 44702	000			ŭ							
JONATHAN T	CRAWFORD	TRU	STEE		0			T				
C/O 200 M CANTON, O	ARKET AVE N STE 210 )H 44702	000	00									
W R TIMKEN		_	STEE		0							
C/O 200 M CANTON, (	ARKET AVE N STE 210	000	00									
	nsation of five highest-pa	id emi	lovees (other than t	hos	e included on line 1–	-see ir	structions) If none	ent	er"N	ONE."		
2 compc		u ciii				300 11	Contributions to	$\overline{}$	<u></u>	OITE.		
Name and	(a) address of each employee more than \$50,000	paid	Title, and avera hours per wee ( <b>b)</b> devoted to posi	ek	(c) Compensatio		employee benefit plans and deferred (d) compensation				e account, Ilowances	
								$\dagger$				
						$\dashv$		+				
						_		+				
		_	I		I	- 1						

Total number of other employees paid over \$50,000.

5

1

2a

3

4

5

6

7

1

2

5

Part XII

Part XI

967,774

96,055

1,063,829

1,063,829

1,047,872

15,957

52,394

52,394

646

51,748

51,748

51,748

47,050

47,050

46,404

646

## Part X Minimum Investment Return

				_							_			
	(All	do	mes	tic fo	ounda	ations	r	าน	st	C	omplet	e	this	part
_										_				

. Foreign foundations, see instructions.)

	(All o	dome	stıc	foun	datı	ons	mu:	st
- · ·	market		of ac	coto	not		100	ь.

Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes

Fair market value of all other assets (see instructions). . . . . . . . . . . . . Reduction claimed for blockage or other factors reported on lines 1a and

1e

2 3

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

check here  $\triangleright$  and do not complete this part.)

**Qualifying Distributions** (see instructions)

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

Distributable Amount

2a

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

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

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

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

6 7

1a

1b

1c 1d

> 2 3

> 4

1

2c

3

4

5

1a

1h

2

3а

3b

4

5

646

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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

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

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

Part XIII Undistributed Income (see instructions)

		<b>(a)</b> Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				51,748
	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
c	From 2012				
d	From 2013				
е	From 2014				
f	Total of lines 3a through e	7,797			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 ▶ \$				
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				
_	Treated as distributions out of corpus (Election				
٠	required—see instructions)				
d	Applied to 2015 distributable amount				47,050
	Remaining amount distributed out of corpus				
	Excess distributions carryover applied to 2015	4,698			4,698
	(If an amount appears in column (d), the same amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,099			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions				
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see				
_	instructions				
t	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
_	be required - see instructions)				
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	3,099			
10	Analysis of line 9				
а	Excess from 2011				
b	Excess from 2012				
	Excess from 2013				
	Excess from 2014 3,099				
е	Excess from 2015				
					Form <b>990-PF</b> (2015)

For	m 990-PF (201	.5)					Page <b>1</b> (
- 8	Part XIV P	Private Operating Foundat	ions (see instru	ictions and Part	VII-A, question	9)	
1a					. •		
b	Check box to	ındıcate whether the organızatıon	is a private operat	ing foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a	Page 10  Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)  If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.  Check box to indicate whether the organization is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.  Enter the lesser of the adjusted net income from Part I in the minimum investment return from Part A for each year listed.  Subject of the 2.  Qualifying distributions from Part XII, Inne 4 for each year listed.  Amounts included in line 2c not used directly for active conduct of exempt activities.  Qualifying distributions made directly for active conduct of exempt activities.  Qualifying distributions made directly for active conduct of exempt activities.  Subtract line 2 from line 2c.  Complete 3a, 0, or 6 or the alternative test—enter (1) Value of assets qualifying under section 4942()(3)(8)(0)  "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.  "Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on secunities loans (section 5942()(3)(8)(0)).  (2) Support from general public and 5 or more exempt organization (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)  Information Regarding Foundation Managers:  List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the						
			(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Iotai
b	85% of line 2a						
С	, ,	•					
d	directly for ac	tive conduct of exempt					
e							
Ĭ	- , -	•					
_							
3							
а		•					
b		-					
	•	•					
С	• •						
		-					
		•					
		•					
		•					
	section 4	942(j)(3)(B)(III)					
		·					
Ðε			Complete this	l part only if th	e organization	had \$5,000 o	r more in
						45,000	
1							
а	,	-				,	atıon
	See attached	statement					
			% or more of the	stock of a cornora	tion (or an equally	large portion of the	<u> </u>
_	,	partnership or other entity) of wh			, , ,	range portion or the	-
	NONE						
_	7f	on the second se		t- D			
2		Regarding Contribution, Grant, Gif		., , ,			
	unsolicited red	If the foundation only makes of quests for funds If the foundation ns, complete items 2a, b, c, and o	ı makes gıfts, gran			· ·	
a	The name, ad-	dress, and telephone number or e	-mail address of th	ne person to whom	applications shou	ld be addressed	
-	JONATHAN	,		20.00.11 to 1111011		50 444105504	
		ve N Suite 210					
	Canton, OH 4						
	(330) 455-52	281 TIMKENPARTNERSHIP COM					
_			itted and informati	on and materials t	hay should include		
-		hich applications should be subm rm is required Information submi			•		50163
_	Any submissi	•	icco must metude	vermeation of tile	applicants Status	ander INC Section	20163
C	No submissio						
_	5 45.1115510						

 $\textbf{d} \ \ \, \text{Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other institutions of the such as a such$ 

factors See attachment Form 990-PF (2015)

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid	During the Year or App	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
Name and address (home or business)  a Paid during the year  See Additional Data Table	any foundation manager or substantial contributor		contribution	
Total		<del></del>	▶ 3a	45,450
Approved for future payment				
Total			▶ 3b	

	amounts unless otherwise indicated		isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
<b>1</b> Program	n service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See
а						instructions )
f						
<b>g</b> Fees a	and contracts from government agencies					
<b>3</b> Interes	rship dues and assessmentst on savings and temporary cash ments					
	ds and interest from securities			14	40,897	7
	tal income or (loss) from real estate					
	financed property					
6 Net ren	tal income or (loss) from personal					
8 Gain or	nvestment income (loss) from sales of assets other than					
	ory			18	23,665	5
	ome or (loss) from special events profit or (loss) from sales of inventory					
<b>11</b> Other re	evenue <b>a</b>					
e						
<b>12</b> Subtota	I Add columns (b), (d), and (e).				64,562	
	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify			1	3	64,562
Part XVI			plishment of	Exempt Purpose	es	
Line No. ▼	Explain below how each activity for wh the accomplishment of the foundation's instructions )					
	1					

Part	XVII	Information Re Noncharitable				actio	ns and Relatio	nships With			<u> </u>
		ganızatıon directly or ii 01(c) of the Code (othe	ndırectly eng	age in any of t	he following wit		-			Yes	No
orga	anızatı	ons?									
<b>a</b> Trai	nsfers	from the reporting four	ndation to a n	oncharitable e	exempt organiza	ation of					
(1)	Cash								1a(1)		No
(2)	Other	assets							1a(2)		No
<b>b</b> Oth	er tran	sactions									
(1)	Sales	of assets to a noncha	rıtable exemp	ot organizatior	1				1b(1)		No
(2)	Purch	ases of assets from a	noncharitable	e exempt orga	inization				1b(2)		No
(3)	Renta	l of facilities, equipme	nt, or other a	ssets					1b(3)		No
(4)	Reiml	oursement arrangemen	nts						1b(4)		No
(5)	Loans	or loan guarantees.							1b(5)		No
(6)	erforn	nance of services or m	embership or	fundraising s	olicitations				1b(6)		No
<b>c</b> Sha	rıng of	facilities, equipment,	maılıng lısts,	other assets,	or paid employ	ees			<b>1</b> c		No
of th ın a	ne goo ny trar	wer to any of the above ds, other assets, or se nsaction or sharing arm	rvices given angement, sh	by the reporting the column	ng foundation I (d) the value o	f the fo f the go	undation received ods, other assets	less than fair marke , or services receive	et value ed	<b>!</b>	
(a) Line	No	(b) Amount involved	(c) Name of r	noncharitable exe	mpt organization	(a)	Description of transfe	rs, transactions, and sha	iring arra	ngemer	nts
des <b>√</b> N	cribed 10	ndation directly or indi in section 501(c) of the omplete the following : (a) Name of organization	ne Code (othe	er than section	•	ın sect			·	es	
Sign	the b	er penalties of perjury, pest of my knowledge a mation of which prepar	and belief, it is	s true, correct				other than taxpaye	r) is bas	sed on	all
Here	\	****			2016-11-15	_ \	*****	return	he IRS di he prepa		
	9	Signature of officer or t	rustee		Date	7	Title	below (see і	nstr )?	Yes \	Vο
		Print/Type preparer's	s name	Preparer's S	ignature		Date	Check if self- employed ▶	PTIN		
Paid Prepa	arer	Firm's name ▶		I				Firm's EIN ▶	1		
Use (		Firm's address ▶						Phone no			
								, none no			

orm 990PF Part XV Line 3 - Gr	ants and Contributions	Paid During	the Year or Approved for	Future Payment
Recipient  Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	or substantial contributor			
a Paid during the year				
AMERICAN FRIENDS OF THE ALMEIDA THEATRE INC 950 3RD AVE 32ND FL NEW YORK,NY 10022			UNRESTRICTED	7,200
AMERICAN FRIENDS OF THE DONMAR THEATRE INC 950 3RD AVE 32ND FL NEW YORK,NY 10022			UNRESTRICTED	1,500
PEREGRINE FUND 5668 WEST FLYING HAWK LAND BOISE,ID 83709			THE ARCHIVES OF FALCONRY	1,500
CANTON COUNTRY DAY SCHOOL 300 DEMINGTON AVE NW CANTON,OH 44718			UNRESTRICTED	10,000
CANTON MUSEUM OF ART 1001 MARKET AVE N CANTON,OH 44702			UNRESTRICTED	1,500
SAVE THE MANATEE CLUB INC 500 NORTH MAITLAND AVE MAITLAND,FL 32751			UNRESTRICTED	750
THE STARK COUNTY HUMANE SOCIETY PO BOX 7077 STATION A CANTON,OH 44705			UNRESTRICTED	3,500
TOWN OF GLASTONBURY 2155 MAIN STREET GLASTONBURY,CT 06033			UNRESTRICTED	3,000
ANNIE WRIGHT SCHOOLS 827 NORTH TACOMA AVE TACOMA,WA 98403			UNRESTRICTED	1,500
PHILLIPS ACADEMY 108 MAIN STREET ANDOVER,MA 01810			ANDOVER BREAD LOAF PROGRAM	500
VASHON ALLIED ARTS INC PO BOX 576 VASHON ISLAND, WA 98070			UNRESTRICTED	500
VASHON-MAURY ISLAND LAND TRUST PO BOX2031 VASHON,WA 98070			UNRESTRICTED	500
ARTS IN STARK PO BOX 21190 CANTON,OH 44702			UNRESTRICTED	10,000
GIRLS INC OF SANTA FE 301 HILLSIDE AVE SANTA FE,NM 87501			UNRESTRICTED	500
SANTA FE WALDORF SCHOOL 26 PRESTA DEL SOL SANTA FE,NM 87508			UNRESTRICTED	1,000
Total			▶ 3a	45,450

Recipient If recipient is an individual, Foundation Purpose of grant or A mount contribution show any relationship to status of Name and address (home or any foundation manager recipient bucinece)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

business)	or substantial contributor		
a Paid during the year			
SANTA FE WATERSHED ASSOCIATION		UNRESTRICTED	500

SANTA FE WATERSHED ASSOCIATION 1413 SECOND STREET SANTA FE,NM 87505	UNRESTRICTED	500
SOLACE CRISIS TREATMENT	UNRESTRICTED	500

1413 SECOND STREET SANTA FE,NM 87505			
SOLACE CRISIS TREATMENT CENTER 6601 VALENTINE WAY SANTA FE,NM 87507		UNRESTRICTED	500

SOLACE CRISIS TREATMENT CENTER 6601 VALENTINE WAY SANTA FE,NM 87507		UNRESTRICTED	500
THE WILDLIFE CENTER INC PO BOX 246		UNRESTRICTED	500

6601 VALENTINE WAY SANTA FE,NM 87507			
THE WILDLIFE CENTER INC PO BOX 246 ESPANOLA,NM 87532		UNRESTRICTED	500

SANTA FE,NM 87507			
THE WILDLIFE CENTER INC PO BOX 246 ESPANOLA,NM 87532		UNRESTRICTED	500

THE WILDLIFE CENTER INC PO BOX 246 ESPANOLA,NM 87532		UNRESTRICTED	500
VASHON WILDERNESS PROGRAM 16204 CRESCENT DREIVE SW		UNRESTRICTED	500

45,450

VASHON, WA 98070

Total .

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -		DLN: 93491018005017	
TY 2015 Accounti	ing Fees Sche	edule			
	Name:	Tımken Famıly Charıtab	le Trust		
	<b>EIN:</b> 34-6922439				
	Software ID:	15000290			
Soft	ware Version:	15.3.0.0			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Timken Family LLC	1	1,400		1,400	

**Gross Sales Price** 

Basis

45,000 | 44,892

Basis Method

Purchaser Name

DLN: 93491018005017

**Accumulated Depreciation** 

Total (net)

108

Sales Expenses

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Date Acquired

2006-10

Name
45000 HSBC Fin Corp

How Acquired Date Sold

2019-01

TY 2015 General Explanation Attachment

Name: Timken Family Charitable Trust

EIN: 34-6922439

DLN: 93491018005017

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**Software ID:** 15000290

Software Version: 15.3.0.0

Identifier Return Reference Explanation

FORM 990 PF, PART XV INFORMATION REGARDING
FOUNDATION MANAGERS
ALEXANDER C TIMKEN, PETER T
TOOT,

FORM 990 PF PART XV INFORMATION REGARDING FOUNDATION MANAGERS
ALEXANDER C TIMKEN PETER T TOOT ELIZABETH BURNHAM TIMKEN ROBERT RINGEN
TIMKEN AND SARA M TIMKEN KRISTIN C TIMKEN AND ROBERT F KINGERY WARD J
TIMKEN AND JOY A TIMKEN THROUGH ATTRIBUTION PER IRC SECTION 507 D)2)

•

Name: Timken Family Charitable Trust

DLN: 93491018005017

End of Year Fair

52,689 40,111

15,986

7,386

49,240

7,363

7,319

7,103

7,325

7,856

7,205

7,259

7,208

**End of Year Book** 

58,378

30,148

14,792

14,919

65,218

7,476

7,503

7,386

7,485

8,239

7,564

7,568

7,588

**EIN:** 34-6922439

**Software ID:** 15000290

Software Version:	15.3.0.0
Name of Stoc	 k

1482 shares of SELECTED AMERICAN SHARES

1125 shares of BLACKROCK CORE BOND TRUST

775 shares of PIMCO FLOATING RATE STRATEGY FUND

2499 shares of WINTERGREEN INVESTOR

4712 shares of TIMKENSTEEL CORP

95 shares of WELLTOWER

6 shares of BANK AMERICA CORP

6 shares of WELLS FARGO CO

570 shares of ALLIANZGI NFJ

250 shares of BLACKSTONE MORTGAGE

325 shares of STARWOOD PROPERTY TRUST

920 shares of BLACKROCK ENHANCED EQUITY

170 shares of OAKTREE CAPITAL GROUP

	Value	Market Value
284 shares of AFRICA HYDROCARBONS INC	4,230	2
650 shares of APPOLLO INVESTMENT CORP	15,024	3,770
250 shares of BANK OF AMERICA CORP	9,978	3,913
100 shares of BERKSHIRE HATHAWAY INC	5,724	14,447
1081 shares of CONOCOPHILLIPS	75,425	60,340
5078 shares of KEYCORP NEW	153,158	61,799
9425 shares of TIMKEN COMPANY	156,711	331,195
650 shares of SEASPAN	11,778	8,665
940 shares of DODGE COX INTL STOCK	30,719	35,934
2069 shares of FAIRHOLME FUNDS INC	53,588	38,521
1402 shares of LONGLEAF PARTNERS	38,428	35,589
3392 shares of PIMCO SHORT	33,714	33,106

efile GRAPHIC print - DO NOT PROCESS	As Filed Da	ta -	DLN	: 93491018005017
TY 2015 Other Assets Scheduk	2			
Name: 7	Fimken Family	y Charitable Trust	<u>.</u>	
EIN: 3	34-6922439			
Software ID: 1	15000290			
Software Version:	15.3.0.0			
Description		Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
EXCISE TAX OVERPAYMENT		415		

TY 2015 Other Expenses Schedule	
Name:	Tımken Famıly Charıtable Trust
EIN:	34-6922439
Software ID:	15000290
Software Version:	15.3.0.0

DLN: 93491018005017

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Software Version: 15.3.0.0				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
State Filing Fee	200			200

Excise Taxes	646	Income	Income	Charitable Purposes
Category	Amount	Net Investment	Adjusted Net	Disbursements for
Softw	rare Version: 15.3.0.0	)		
	<b>Software ID:</b> 1500029	90		
	<b>EIN:</b> 34-6922	2439		
	Name: Timken l	Family Charitable Tri	ust	
TY 2015 Taxes Sch	nedule			
efile GRAPHIC print - DO	NOT PROCESS   AS FIRE	ed Data -	<u>U</u>	LN: 93491018005017

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491018005017
Schedule B		Schedu	le of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information abo	out Schedule B (Fo	Form 990, 990-EZ, or 990-PF orm 990, 990-EZ, or 990-PF) and b ovwwwww.irs.gov/form990	its instructions is at	2015
Name of the organizati				Employer id	lentification number
Timken Family Charital				34-692243	39
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	┌─ 501(c)( ) (	enter number) org	ganızatıon		
	T 4947(a)(1)	nonexempt charit	able trust <b>not</b> treated as a private	e foundation	
	☐ 527 politica	ıl organızatıon			
Form 990-PF	<b>√</b> 501(c)(3) €	exempt private fou	ndation		
	4947(a)(1)	nonexempt charit	able trust treated as a private fou	ındatıon	
	─ 501(c)(3) t	axable prıvate fou	ndation		
other property  Special Rules  For an organizar under sections a received from a Part VIII, line 1h,  For an organizar during the year,	tion described in section 509(a)(1) and 170(b)(1 ny one contributor, dur or (ii) Form 990-EZ, lin-	n 501(c)(3) filing F )(A)(vi), that chec ing the year, total is e 1 Complete Parts n 501(c)(7), (8), o pore than \$1,000 e	ır (10) fılıng Form 990 or 990-EZ t xclusively for religious, charitable	termining a contributor's to the state of the contributor's to the contr	total contributions  te regulations a, or 16b, and that amount on (i) Form 990,
during the year, this box is chec purpose Do not religious, charita  Caution. An organization 990-EZ, or 990-PF), but	contributions exclusive ked, enter here the total complete any of the parable, etc., contributions on that is not covered but must answer "No" of	ely for religious, chall contributions that arts unless the <b>Ge</b> totaling \$5,000 or by the General Rule on Part IV, line 2, o	or (10) filing Form 990 or 990-EZ than table, etc., purposes, but no state were received during the year fineral Rule applies to this organismore during the year	such contributions totaled for an exclusively religious zation because it receive	d more than \$1,000 If us, charitable, etc , ed nonexclusively
990-EZ, or 990-PF)	orm 550rr, raiti, iiile 2	, to certify trial it u	loes not meet the filing requiremen	TO OF COTTENUE D (FOITH	

Name of organization

Timken Family Charitable Trust

Employer identification number 34-6922439

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	itional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
		<u>\$</u>	Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash —
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
		<u>\$</u>	Noncash —
			(Complete Part II for noncash contributions)

Employer identification number

		34-6922439	
Part II	Noncas h Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(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
		s	
(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
		s	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

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