efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491135018557

OMB No 1545-0052

2016

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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 www.irs.gov/form990pf.

Open to Public Inspection

| For | caler | ndar year 2016, or tax year beginning 01-0 | 1-20 | 16 | | , aı | nd er | nding 12-31- | 2016 | |
|--------------------|----------|--|------------|-------------|----------------------------|---------|-------|-----------------------|--|---|
| | | Indation | | | | | | A Employer id | entification numbe | er |
| FK | ANKLIN | I SQUARE FOUNDATION | 01-0746539 | | | | | | | |
| | | d street (or P O box number if mail is not delivered to street ac NTRAL PARK AVENUE | ldress) | Roor | m/suite | | | B Telephone nu | mber (see instructio | ns) |
| | | n, state or province, country, and ZIP or foreign postal code IL 60201 | | | | | | C If exemption | application is pendir | ng, check here |
| G CH | neck al | Il that apply | n of a | forme | er nublic | charity | | D 1. Foreign or | ganizations, check h | ere \Box |
| | | ☐ Final return ☐ Amended r | | | pub | J, | | 1 | ganizations meeting | ▶ ⊔ |
| | | ☐ Address change ☐ Name chan | | | | | | | k here and attach co | |
| H Ch | neck tv | pe of organization ✓ Section 501(c)(3) exempt pr | | founda | ation | | | | undation status was n 507(b)(1)(A), che | |
| | | 1 4947(a)(1) nonexempt charitable trust Other to | | | | lation | | under sectio | ii 507(b)(1)(A), cile | .k nere |
| | | ket value of all assets at end J Accounting metho | | ☑ c. | | Accru | ıal | F If the founda | ation is in a 60-mont | h termination \Box |
| | | from Part II, col (c), ◆\$ 2,280,711 | y) _ | be on | n cash ba | asıs) | | under sectio | n 507(b)(1)(B), che | ck here |
| Pa | rt I | Analysis of Revenue and Expenses (The tot. | a/ | , | D | | | l | | (d) Disbursements |
| | | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) | | (a) | Revenue expense book | s per | (ь) | Net investment income | (c) Adjusted net income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | | | | 97,626 | 1 | | | |
| | 2 | Check ▶ ☐ If the foundation is not required to atta | ich | | | | | | | |
| | 3 | Interest on savings and temporary cash investments | - | | | 1,418 | | 1,418 | | |
| | 4 | Dividends and interest from securities | | | | 38,960 | | 38,960 | | |
| | 5a | Gross rents | | | | | | | | |
| | ь | Net rental income or (loss) | | | | | | | | |
| ĭ | 6a | Net gain or (loss) from sale of assets not on line 10 | | % J | | 26,325 | | | | |
| Reverkie | ь 7 | Gross sales price for all assets on line 6a 1! Capital gain net income (from Part IV, line 2) | 50,374 | | | | | 18,897 | | |
| ~ | 8 | Net short-term capital gain | | - | | | | 10,03. | | |
| | 9 | Income modifications | | | | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | | | | |
| | ь | Less Cost of goods sold | | | | | | | | |
| | С | Gross profit or (loss) (attach schedule) | | | | | | | | |
| | 11 | Other income (attach schedule) | | 9 | | 68 | | 68 | | |
| | 12 | Total. Add lines 1 through 11 | | | | 164,397 | | 59,343 | | |
| | 13 | Compensation of officers, directors, trustees, etc | | | | | | | | |
| | 14 | Other employee salaries and wages | | | | | | | | |
| es | 15 | Pension plans, employee benefits | | | | | | | | |
| ens | 16a | Legal fees (attach schedule) | • | | | | | | | |
| Expense | Ь | Accounting fees (attach schedule) | • | | | | | | | |
| ē E | C | Other professional fees (attach schedule) | ٠ | | | | | | | |
| atıv | 17 | Interest | • | - · | | | | | | |
| and Administrative | 18 19 | Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion | : | 9 2) | | 500 | | 500 | | |
| Ē | 20 | Occupancy | | | | | | | | |
| Ā | 21 | Travel, conferences, and meetings | | | | | | | | |
| anc | 22 | Printing and publications | | | | | | | | |
| | 23 | Other expenses (attach schedule) | | 9 | | 8,812 | | 8,812 | | |
| Operating | 24 | Total operating and administrative expenses. | | | | | | | | |
| <u>pe</u> | | Add lines 13 through 23 | | | | 9,312 | | 9,312 | | 0 |
| 0 | 25 | Contributions, gifts, grants paid | • | | | 150,418 | | | | 150,418 |
| | 26 | Total expenses and disbursements. Add lines 24 25 | and | | | 159,730 | | 9,312 | | 150,418 |
| | 27 | Subtract line 26 from line 12 | | | | | | | | |
| | a | Excess of revenue over expenses and disbursements | | | | 4,667 | | | | |
| | ь | Net investment income (if negative, enter -0-) | | | | | | 50,031 | | |
| | С | Adjusted net income(If negative, enter -0-) | • | | | | | | | |
| ror | raper | work Reduction Act Notice, see instructions. | | | | | 4 | Cat No 11289> | √ Fο | rm 990-PF (2016) |

| | | l I | |
|------------------|---|---------------------------------------|------------|
| 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 ▶ | | |
| 8 | Inventories for sale or use | | |
| 9 | Prepaid expenses and deferred charges | | |
| 10a | Investments—U S and state government obligations (attach schedule) | 76,055 | % j |
| b | Investments—corporate stock (attach schedule) | 347,122 | ارچ• |
| 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) | 978,173 | چ |
| 14 | Land, buildings, and equipment basis ▶ | | |
| | Less accumulated depreciation (attach schedule) ▶ | | |
| 15 | Other assets (describe >) | | |
| 16 | Total assets (to be completed by all filers—see the | | |
| | ınstructions Also, see page 1, item I) | 1,615,198 | |
| 17 | Accounts payable and accrued expenses | | |
| 18 | Grants payable | | |
| 19 | Deferred revenue | | |
| 20 | Loans from officers, directors, trustees, and other disqualified persons | | |
| 21 | Mortgages and other notes payable (attach schedule) | | |
| 22 | Other liabilities (describe) | | |
| 23 | Total liabilities(add lines 17 through 22) | | |
| | Foundations that follow SFAS 117, check here ▶ | | |
| | and complete lines 24 through 26 and lines 30 and 31. | | |
| 24 | Unrestricted | | |
| 25 | Temporarily restricted | | |
| 26 | Permanently restricted | | |
| | · | | |
| | Foundations that do not follow SFAS 117, check here | | |
| 27 | and complete lines 27 through 31. Capital stock, trust principal, or current funds | | |
| 2 <i>7</i> 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | |
| 28 29 | Retained earnings, accumulated income, endowment, or other funds | 1,615,198 | |
| 29 30 | Total net assets or fund balances (see instructions) | 1,615,198 | |
| 30 31 | Total liabilities and net assets/fund balances (see instructions) . | 1,615,198 | |
| | | 1,013,130 | |
| t IIII | Analysis of Changes in Net Assets or Fund Balances I net assets or fund balances at beginning of year—Part II, column (a), line | 30 (must agree with | end- |
| of-ye | ear figure reported on prior year's return) | · · · · · · · | |
| | r amount from Part I, line 27a | | . - |
| | lines 1, 2, and 3 | | . |
| | reases not included in line 2 (itemize) | · · · · · · · · · · · · · · · · · · · | · |
| Tata | I not people or fund halances at and of year /line 4 minus line E). Bart II | | F |

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

13 14

15 16

17 18

24 25 26

27 28 29

30

31 Part I

2

3

4

5

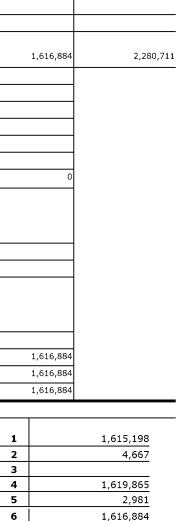
Liabilities

Net Assets or Fund Balances

1,616,884

1,026,804

1,421,048



Form **990-PF** (2016)

| Form 990-PF (2016) | | Page 7 |
|---|---|---------------------------|
| Part VIII Information About Officers, Directors, Truste and Contractors (continued) | es, Foundation Managers, Highly F | Paid Employees, |
| 3 Five highest-paid independent contractors for professional se | ervices (see instructions). If none, ente | r "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 | la valariant atatratical information and as the niversity | |
| List the foundation's four largest direct charitable activities during the tax year Includ organizations and other beneficiaries served, conferences convened, research papers | produced, etc | Expenses |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments (s | · | |
| Describe the two largest program-related investments made by the foundation dur 1 N/A | ing the tax year on lines 1 and 2 | Amount |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| | | |
| Total. Add lines 1 through 3 | | • |
| | | Form 990-PF (2016) |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

3a 3h

4

5

150.418

150.418

Form **990-PF** (2016)

Amounts set aside for specific charitable projects that satisfy the

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

3

4

5

Page 9

104,486

104.486

Form **990-PF** (2016)

| Form 990-PF (20 | 016) |
|-----------------|------|
| Part XIII | Une |
| | |

| 990-PF (2 | 016) |
|-----------|------|
| t XIII | Und |

| Part XIII | Undistributed Income (see instruc | tions) |
|-----------|-----------------------------------|--------|
| | | |
| D | Doub VI June 7 | |

- Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. Excess distributions carryover, if any, to 2016
 - From 2011.
- **b** Total for prior years **b** From 2012. . . . c From 2013. .
- 108.808 **d** From 2014. . . .
- e From 2015.
- 45 159 30,385
- 4 Qualifying distributions for 2016 from Part
- 61,603 f Total of lines 3a through e. XII, line 4 🕨 \$

required—see instructions).

same amount must be shown in column (a))

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. .

b Excess from 2013. .

c Excess from 2014. . .

d Excess from 2015. .

e Excess from 2016. .

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 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 2011 not

indicated below:

- a Applied to 2015, but not more than line 2a
- **b** Applied to undistributed income of prior years
 - (Election required—see instructions).
- c Treated as distributions out of corpus (Election

58.114 45,159

30.385

61.603

45.932

58,114

304.069

45.932

350,001

108.808

241,193

(a)

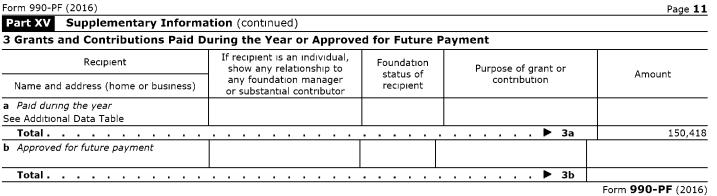
Corpus

(b)

Years prior to 2015

(c)

2015



| Par | t XVI | -A Analysis of Income-Producing | Activities | | | | |
|---------------|------------|---|----------------------|----------------------|-----------------------|----------------------|--|
| | | amounts unless otherwise indicated | | usiness income | Excluded by sectio | n 512, 513, or 514 | (e) Related or exempt |
| 1 Pr | ogram | service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) |
| | - | | | 7 | | 7.11.10 4.110 | |
| | | | | | | | |
| | | | | | | | |
| d | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| _ | | and contracts from government agencies | | | | | |
| | | rship dues and assessments | | | | | |
| | | st on savings and temporary cash ments | | | | | 1,418 |
| | | ds and interest from securities | | | | | 38,960 |
| 5 N | let ren | tal income or (loss) from real estate | | | | | |
| | | financed property | | | | | |
| | | ebt-financed property | | | | | |
| | | ntal income or (loss) from personal property | | | | | |
| | | nvestment income. | | | | | 68 |
| | | r (loss) from sales of assets other than ory | | | | | 26,325 |
| | | ome or (loss) from special events | | | | | 20,323 |
| | | profit or (loss) from sales of inventory | | | | | |
| 11 C | Other r | evenue a | | | | | |
| b | | | | | | | |
| _ | | | | | | | |
| | | _ | | | | | |
| | | | | | | | |
| 12 S | ubtota | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) | | | | <u> </u> | 66,771 66,771 |
| See ' | worksh | neet in line 13 instructions to verify calculation | ns) | | 1 | .3 | 00,771 |
| | t XVI | | | hment of Exem | pt Purposes | | |
| | e No. ▼ | Explain below how each activity for which the accomplishment of the foundation's exinstructions) | | | | |) |
| 3 | | INVESTMENT INCOME USED TO FUND GRAN | TS | | | | |
| <u>-</u> 4 | | INVESTMENT INCOME USED TO FUND GRAN | | | | | |
| 8 | | GAINS ON SALES OF ASSETS USED TO FUND | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| Part XVI | Exempt Organi | | ansters to a | and Iransactio | ns and Relatio | onsnips with Non | icnaritable | | |
|--------------------|--|------------------------|------------------|-------------------------------|-------------------|----------------------------|----------------------|-------------|-----|
| | rganization directly or in Code (other than section | directly engage | | | | | on 501 | Yes | No |
| a Transfers | from the reporting foun | dation to a nor | ncharıtable ex | empt organization | of | | | | |
| (1) Cash | h | | | | | | . 1a(1) | | No |
| (2) Oth | er assets | | | | | | . 1a(2) | | No |
| b Other tra | insactions | | | | | | | | |
| (1) Sale | es of assets to a nonchar | itable exempt o | organization. | | | | . 1b(1) | | No |
| (2) Puro | chases of assets from a r | oncharitable e | exempt organiz | zation | | | 1b(2) | | No |
| (3) Ren | tal of facilities, equipmer | nt, or other ass | sets | | | | 1b(3) | | No |
| (4) Rein | nbursement arrangemen | ts | | | | | . 1b(4) | | No |
| (5) Loar | ns or loan guarantees. | | | | | | . 1b(5) | | No |
| (6) Perfo | ormance of services or m | embership or f | fundraising sol | licitations | | | . 1b(6) | | No |
| c Sharing o | of facilities, equipment, r | naılıng lısts, ot | her assets, or | paid employees. | | | . 1c | | No |
| | swer to any of the above | | | | | | | | |
| | ods, other assets, or ser ansaction or sharing arra | | | | | | | | |
| (a) Line No | (b) Amount involved | (c) Name of no | oncharitable exe | mpt organization | (d) Description o | f transfers, transactions, | and sharing arra | ngement | ts |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 2a Is the fou | undation directly or indire | ectly affiliated | with, or relate | d to, one or more | tax-exempt orgai | nizations | | | |
| described | d in section 501(c) of the | Code (other t | han section 50 | 01(c)(3)) or in sect | ion 527? | | . 🗆 Yes | ✓ No | 0 |
| b If "Yes," | complete the following s | chedule | | | | | | | |
| | (a) Name of organization | on | (1 | b) Type of organizatio | on | (c) Description | tion of relationship | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| of r | der penalties of perjury, my knowledge and belief ich preparer has any kno | , it is true, cor | | | | | | | |
| Here \ | ***** | | | 2017-04-25 | ***** | | lay the IRS discus | | |
| / | Signature of officer or t | rustee | | Date | Title | | see instr)? 🗹 Y | | |
| | Print/Type preparer's | s name F | Preparer's Sıgı | nature | Date | Check if self- | PTIN | | |
| | | | | | | employed ▶ □ | P01393 | 942 | |
| Paid | KATHLEEN M O'CO | NNELL | | | 2017-04-25 | | | | |
| Paiu Preparei | r - | | | | | | | | |
| Use Only | | UBERT GALLAC | GHER TYLER & | MULCAHEY | | F | Firm's EIN ▶23 | -16011 | 64 |
| | | 1 SOUTH BRO | AD ST 20TH F | LOOR | | | | | |
| | PH | HILADELPHIA F | PA 19107 | | | F | Phone no (215 |) 587-0 | 119 |
| | 1 | PHILADELPHIA, PA 19107 | | | | | | | |

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

JACQUELINE QUERN BERRY

SUSANNAH QUERN PRATT MARGARET OUERN ATKINS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BEACON OF HOPE NONE **EXEMPT** SALARY SUPPORT - COMM 12,000 5090 DOUG TAYLOR CIRCLE LEARN CTR ST JAMES CITY, FL 33956 NONE **EXEMPT** 15,000 **BOOKS & BREAKFAST** OPERATING EXPENSES 419 GREENWOOD STREET EVANSTON, IL 60201 FAMILY MATTERS 7731 N MARSHFIELD NONE **EXEMPT** YOUTH DEVELOPMENT 15,000 CHICAGO, IL 60626 **PROGRAMS** 10,000 HAVERFORD COLLEGE NONE **EXEMPT** OFFICE OF MUTICUTURAL 370 LANCASTER AVE AFFAIRS HAVERFORD, PA 19041 JAMES B MORAN CTR FOR YOUTH ADV NONE **EXEMPT** SALARY - SYSTEMS MANAGER 7,500 1123 EMERSON STE 203 EVANSON, IL 60202 MARCFIRST 1606 HUNT DRIVE **EXEMPT** 7,918 NONE TRANSITION PROGRAM NORMAL, IL 61761 10,000 NORTH SHORE SENIOR CENTER NONE **EXEMPT** HOUSE OF WELCOME ADULT DAY 161 NORTHFIELD ROAD SVCS NORTHFIELD, IL 60093 8,000 RAGDALE FOUNDATION NONE EXEMPT CROSS CULTURAL FELLOWSHIP 1260 N GREN BAY ROAD LAKE FOREST, IL 60045 5,000 SUNCOAST MANOR NONE **EXEMPT** SCHOLARSHIP SUPPORT 6909 DR MLK ST SOUTH WESTMINSTER FNDT BOX 347 ST PETERSBURG, FL 33705 NONE **EXEMPT** 25,000 YOU 1027 SHERMAN AVE NEW YOUTH LEARNING CTR EVANSTON, IL 60202 CONSTRUCTION 35,000 YOUNG CENTER IMMAGRANT CHILDREN NONE EXEMPT GENERAL OPERATIN GEXPENSES 6020 SOUTH UNIVERSITY AVE

150,418

Total . . .

3а

Name: FRANKLIN SQUARE FOUNDATION

ETN: 01 0746E20

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

| EIN: U1-U/40539 | | | | | | | | | | |
|------------------------|---------------|--------------|--------------|----------------|-------------------|--------|--------------|----------------|-------------|--------------------------|
| Name | Date Acquired | How Acquired | Date Sold | Purchaser Name | Gross Sales Price | Basis | Basis Method | Sales Expenses | Total (net) | Accumulated Depreciation |
| 25000 US INFL IND 2% | 2009-03 | PURCHASE | 2016-01 | | 29,929 | 25,819 | | | 4,110 | |
| 25000 US INFL IND 2 5% | 2009-03 | PURCHASE | 2016-07 | | 29,673 | 26,169 | | | 3,504 | |
| 350 SHS HOME DEPOT | 2016-08 | DONATION | 2016-08 | | 47,719 | 47,971 | | | -252 | |
| 440 SHS NIKE | 2016-08 | DONATION | 2016-08 | | 24,156 | 24,090 | | | 66 | |

DLN: 93491135018557

TY 2016 Investments Corporate Stock Schedule

Name: FRANKLIN SQUARE FOUNDATION

EIN: 01-0746539

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|-------------------------------------|---------------------------|----------------------------------|
| 3 M COMPANY - 175 SHARES | 13,026 | 31,250 |
| 3 M COMPANY - 175 SHS (JQ) | 19,460 | 31,250 |
| AUTO DATA PROCESSING - 300 SHS (JQ) | 13,898 | 30,834 |
| AUTO DATA PROCESSING - 350 SHS | 10,686 | 35,973 |
| COLGATE PALMOLIVE - 40 SHS (JQ) | 1,726 | 2,618 |
| COLGATE-PALMOLIVE - 160 SHS (JQ) | 6,837 | 10,470 |
| COLGATE-PALMOLIVE CO - 400 SHS | 11,350 | 26,176 |
| DEVON ENERGY CORP - 100 SHS (JQ) | 7,831 | 4,567 |
| DEVON ENERGY CORP - 100 SHS (JQ) | 6,441 | 4,567 |
| DEVON ENERGY CORP - 200 SHS | 6,670 | 9,134 |
| DIAGEO PLC NEW ADR - 100 SHS (JQ) | 8,286 | 10,394 |
| DIAGEO PLC NEW ADR - 100 SHS (JQ) | 10,112 | 10,394 |
| DR PEPPER SNAPPLE - 180 SHS | 3,602 | 16,321 |
| DR PEPPER SNAPPLE - 72 SHS (JQ) | 2,207 | 6,528 |
| DR PEPPER SNAPPLE - 96 SHS (JQ) | 3,420 | 8,704 |
| EBAY INC - 250 SHS (JQ) | 5,054 | 7,423 |
| EXPEDITORS INTL WASH - 200 SHS | 8,725 | 10,592 |
| HOME DEPOT - 400 SHS (JQ) | 21,132 | 53,632 |
| ILLINOIS TOOL WORKS - 100 SHS (JQ) | 5,202 | 12,246 |
| ILLINOIS TOOL WORKS - 200 SHS (JQ) | 9,486 | 24,492 |
| ILLINOIS TOOL WORKS - 150 SHS | 5,391 | 18,369 |
| MEDTRONIC INC - 125 SHS | 6,081 | 8,904 |
| MICROSOFT CORP - 400 SHS (JQ) | 13,886 | 24,856 |
| MICROSOFT CORP - 450 SHS | 12,798 | 27,963 |
| NIKE - 150 SHS (JQ) | 8,185 | 7,625 |
| NIKE - 150 SHS (JQ SPIN) | 8,195 | 7,625 |
| NOVARTIS AG - 400 SHS | 23,359 | 29,136 |
| PAYPAL - 50 SHS (JQ - EBAY SPIN) | 7,816 | 9,868 |
| PROCTER & GAMBLE - 100 SHS (JQ) | 7,843 | 8,408 |
| PROCTOR & GAMBLE - 100 SHS | 6,522 | 8,408 |

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|--------------------------------------|---------------------------|----------------------------------|
| UNITED PARCEL SERVICE - 160 SHS (JQ) | 13,811 | 18,342 |
| UNITED PARCEL SERVICES - 160 SHS | 11,146 | 18,342 |
| WALMART STORES INC - 200 SHS (JQ) | 15,000 | 13,824 |
| WALMART STORES INC - 225 SHS | 13,120 | 15,552 |
| WALT DISNEY CO - 200 SHS (JQ) | 6,840 | 20,844 |
| WALT DISNEY CO - 250 SHS (JQ) | 11,968 | 26,055 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491135018557 | | | | |
|--|-----------------|-----------------|---------------------|--|--|--|--|
| TY 2016 Investments Government Obligations Schedule | | | | | | | |
| I | | | 1 | | | | |
| Name: | FRANKLIN SQ | UARE FOUNDATION | | | | | |
| EIN: | 01-0746539 | | 1 | | | | |
| US Government Securities - End of Year Book Value: | | 24,067 | | | | | |
| US Government Securities - End of Year Fair Market Value: | | 29,073 | | | | | |
| State & Local Government Securities - End of Year Book Value: | | | | | | | |
| State & Local Government Securities - End of Year Fair Market Value: | | | | | | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491135018557 |
|--------------------------------------|-----------------|---------------------|
| | | |

TY 2016 Investments - Other Schedule

Name: FRANKLIN SQUARE FOUNDATION

ETN: 01-07/6530

| EIN: 01-0746539 | | | | |
|--------------------------------------|-----------------------|------------|----------------------------------|--|
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value | |
| DODGE & COX FUNDS - 1710 SHS | AT COST | 49,223 | 65,163 | |
| FIRST EAGLE GLOBAL - 952 SHS (JQ) | FMV | 39,727 | 51,656 | |
| FIRST EAGLE GLOBAL FD - 387 SHS | AT COST | 19,064 | 20,999 | |
| FIRST EAGLE GLOBAL FD - 350 SHS (JQ) | FMV | 15,687 | 18,991 | |
| HARBOR INTL FUND - 1302 SHS (JQ) | FMV | 80,580 | 76,050 | |
| HARBOR INTL FUND - 1378 SHS | AT COST | 65,047 | 80,517 | |
| PERKINS MID CAP VALUE - 269 SHS (JQ) | FMV | 6,380 | 4,457 | |
| PERKINS MID CAP VALUE - 573 SHS | FMV | 11,628 | 9,499 | |
| PERKINS MID CAP VALUE - 1456 SHS (JQ | FMV | 35,119 | 24,126 | |
| ROYCE TOTAL RETURN FUND - 6375 SHS | AT COST | 76,962 | 87,220 | |
| ROYCE TOTAL RETURN FD - 4179 SHS(JQ) | FMV | 68,206 | 57,170 | |
| T ROWE PRICE REAL ESTATE - 1002 SHS | AT COST | 26,127 | 28,574 | |
| VANGUARD DIV GROWTH - 304 SHS | AT COST | 6,048 | 7,137 | |
| VANGUARD DIV GROWTH - 1571 SHS (JQ) | FMV | 21,397 | 36,809 | |
| VANGUARD S/T INVESTMT ADM - 3011 SHS | AT COST | 32,224 | 32,016 | |
| VANGUARD S/T INVSTMT - 5480 SHS | AT COST | 58,747 | 58,257 | |
| VANGUARD TOTAL STOCK - 10379 SHS | AT COST | 295,315 | 582,054 | |
| VANGUARD TOTAL STOCK - 450 SHS (JQ) | FMV | 25,565 | 25,236 | |
| VANGUARD TOTAL STOCK - 2766 SHS (JQ) | FMV | 93,758 | 155,117 | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491135018557 | | | |
|--------------------------------------|-----------------|-----------------|---------------------|--|--|--|
| TY 2016 Other Decreases Schedule | | | | | | |
| | | | | | | |
| Name: | FRANKLIN SQ | UARE FOUNDATION | | | | |
| EIN: | 01-0746539 | | | | | |
| De | escription | | Amount | | | |
| 2015 TAX PAID WITH FORM 990-PF EXT | | | 1,100 | | | |
| 2016 ESTIMATED TAX FORM 990-PF | | | 1,881 | | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN | N: 93491135018557 | | |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|--|
| TY 2016 Other Expenses Schedule | | | | | | |
| | | | | | | |
| Name: | FRANKLIN SQUA | ARE FOUNDATIO | N | | | |
| EIN: | 01-0746539 | | | | | |
| Other Expenses Schedule | Other Expenses Schedule | | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| EXPENSES | | | | | | |
| IL CHARITABLE ANNUAL REPORT | 15 | 15 | | | | |
| ABERDEEN - INVESTMENT MANAGEM | 8,787 | 8,787 | | | | |
| IL SECRETARY OF STATE - ANNUA | 10 | 10 | | | | |

Name: FRANKLIN SQUARE FOUNDATION

EIN: 01-0746539 Other Income Schedule

| 1 | Other Income Schedule | | | | | |
|---|----------------------------|-----------------------------------|--------------------------|---------------------|--|--|
| | Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income | | |
| | NON DIVIDEND DISTRIBUTIONS | 68 | 68 | | | |

| efile GRAPHIC print - DO NOT PROCES | S As Filed Data | As Filed Data - DLN: 93491135018557 | | | | | |
|--|-----------------|-------------------------------------|------------------------|---|--|--|--|
| TY 2016 Taxes Schedule | | | | | | | |
| | | | | | | | |
| Name: FRANKLIN SQUARE FOUNDATION EIN: 01-0746539 | | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | | |
| FOREIGN TAXES | 500 | 500 | | | | | |

| efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491135018557 | | | | | | |
|--|--|--|---|--|--|--|
| Schedule B (Form 990, 990-EZ, | Schedule of Contributo | rs | OMB No 1545-0047 | | | |
| or 990-PF) Department of the Treasury Internal Revenue Service | ► Attach to Form 990, 990-EZ, or 990 ► Information about Schedule B (Form 990, 990-EZ, or 990-F <u>www.irs.gov/form990</u> . | | 2016 | | | |
| Name of the organizat FRANKLIN SQUARE FOUN | | Employer i | identification number | | | |
| | | 01-0746539 | 9 | | | |
| Organization type (che | ck one) | | | | | |
| Filers of: | Section: | | | | | |
| Form 990 or 990-EZ | ☐ 501(c)() (enter number) organization | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated a | s a private foundation | | | | |
| | ☐ 527 political organization | | | | | |
| Form 990-PF | ✓ 501(c)(3) exempt private foundation | ☑ 501(c)(3) exempt private foundation | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a | private foundation | | | | |
| | 501(c)(3) taxable private foundation | | | | | |
| | ation filing Form 990, 990-EZ, or 990-PF that received, during t r property) from any one contributor Complete Parts I and II S | | | | | |
| Special Rules | | | | | | |
| under sections : received from a | tion described in section 501(c)(3) filing Form 990 or 990-EZ th 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form by one contributor, during the year, total contributions of the greater that one 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II | 990 or 990-EZ), Part II, line 13 | s, 16a, or 16b, and that | | | |
| during the year, | tion described in section 501(c)(7), (8), or (10) filing Form 990 of total contributions of more than \$1,000 exclusively for religious the prevention of cruelty to children or animals. Complete Part | , charitable, scientific, literary, | | | | |
| during the year, If this box is che purpose Do no | tion described in section 501(c)(7), (8), or (10) filing Form 990 of contributions exclusively for religious, charitable, etc., purpose cked, enter here the total contributions that were received during complete any of the parts unless the General Rule applies to lible, etc., contributions totaling \$5,000 or more during the year | s, but no such contributions tot ng the year for an <i>exclusively</i> r this organization because it re | taled more than \$1,000 religious, charitable, etc , ceived <i>nonexclusively</i> | | | |
| 990-EZ, or 990-PF), bu | on that is not covered by the General Rule and/or the Special R it must answer "No" on Part IV, line 2, of its Form 990, or chec form 990PF, Part I, line 2, to certify that it does not meet the fili | ck the box on line H of its | | | | |
| For Paperwork Reduction for Form 990, 990-EZ, or 99 | Act Notice, see the Instructions Cat No 30613X 0-PF | Schedule B (Form 99 | 0, 990-EZ, or 990-PF) (2016) | | | |

Name of organization Employer identification number FRANKLIN SQUARE FOUNDATION 01-0746539 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person JACQUELINE QUERN BERRY **Payroll** 835 WESTERFIELD DR \$ 97,626 Noncash WILMETTE, IL60091 (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (b) (C) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (a) (b) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions)

| Schedule B (Forr | n 990, 990-EZ, or 990-PF) (2016) | | Page 3 | | |
|---|--|--|----------------------|--|--|
| Name of organization FRANKLIN SQUARE FOUNDATION | | Employer ident | ification number | | |
| | | 01-07 | 46539 | | |
| Part II | Noncash Property | | | | |
| (a) No.from Part I | (see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | |
| 1 | 350 SHS HOME DEPOT | \$ 47 971 | 2016-08-03 | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | |
| 1 | 440 NIKE INC | \$ 24 090 | 2016-08-03 | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | |
| 1 | 450 SHS VANGUARD TOTAL STOCK FD | \$ 25 565 | | | |
| (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 | | | |
| | | | | | |

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)