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2016

OMB No 1545-0052

Form 990-PF Department of the Treasury

Internal Revenue Service

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 www.irs.gov/form990pf.

Open to Public

| | | | | | | | Inspection |
|---------------------------------------|----------------|---|------------------------------|----------|-----------------------|---|----------------------------|
| or | caler | ndar year 2016, or tax year beginning 01-01-20 |)16 , ar | nd er | nding 12-31- | 2016 | |
| | | indation Foundation | | | A Employer Id | entification numbe | - |
| Va | ii Siouii | Touridation | | | 04-6691809 | | |
| | | street (or P O box number if mail is not delivered to street address) 161787E Scotch Pine Lane | Room/suite | | B Telephone nu | mber (see instructior | ıs) |
| P | J BUX I | 101/6/E SCOUCH PINE Lane | | | (508) 748-1665 | i | |
| | | , state or province, country, and ZIP or foreign postal code A 02791 | 1 | | C If exemption | application is pending | a. check here |
| WC3 | | | | | | approcessor to postant, | ▶ ∟ |
| G Cł | neck al | I that apply Initial return Initial return of a | former public charity | | _ | ganızatıons, check he | ▶ ∟ |
| | | ☐ Final return ☐ Amended return | | | | rganizations meeting k here and attach cor | |
| | | ☐ Address change ☐ Name change | | | E If private for | ındatıon status was t | erminated |
| _ | | pe of organization Section 501(c)(3) exempt private | | | under sectio | n 507(b)(1)(A), chec | k here ► L |
| | | a 4947(a)(1) nonexempt charitable trust U Other taxable to the value of all assets at end 1 Accounting method | ✓ Cash ☐ Accru | | E If the founds | ation is in a 60 month | termination |
| of | year <i>(f</i> | rom Part II, col (c), | ☑ Cash ☐ Accru | aı | | ation is in a 60-month n 507(b)(1)(B), checl | |
| line | € 16)▶ | \$ 9,479,700 | be on cash basis) | | | | |
| Pa | rt I | Analysis of Revenue and Expenses (The total | | | | | (d) Disbursements |
| | | of amounts in columns (b), (c), and (d) may not necessarily | (a) Revenue and expenses per | (b) | Net investment income | (c) Adjusted net income | for charitable purposes |
| | | equal the amounts in column (a) (see instructions)) | books | | income | income | (cash basis only |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | 1,000,000 | | | | |
| | 2 | Check ► ☐ if the foundation is not required to attach | | | | | |
| | | Sch B | | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | |
| | 4 | Dividends and interest from securities | 223,722 | | 223,722 | 223,722 | |
| | 5a | Gross rents | | | | | |
| ө | b | Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 | -13,190 | | | | |
| Revenue | 6a | - , , | -13,190 | | | | |
| eve | р 7 | Gross sales price for all assets on line 6a 698,892 Capital gain net income (from Part IV, line 2) | | | | | |
| ~ | 8 | Net short-term capital gain | | | | | |
| | 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) | | | | | |
| | 12 | Total. Add lines 1 through 11 | 1,210,532 | | 223,722 | 223,722 | |
| | 13 | Compensation of officers, directors, trustees, etc | 30,000 | | | | 30,00 |
| | 14 | Other employee salaries and wages | | | | | |
| es. | 15 | Pension plans, employee benefits | | | | | |
| en: | 16a | Legal fees (attach schedule) | 00.1 | | | | |
| X | Ь | Accounting fees (attach schedule) | 2,875 | | 2,875 | | |
| Operating and Administrative Expenses | _ c | Other professional fees (attach schedule) | 45,030 | | 45,030 | 45,030 | |
| <u> </u> | 17 | Interest | 9 4,372 | | 2,384 | 2,384 | 7 |
| <u> </u> | 18 19 | Taxes (attach schedule) (see instructions) | 7,5/2 | | 2,304 | 2,304 | , |
| Ē | | Occupancy | | | | | |
| Ad | 20 21 | Travel, conferences, and meetings | 12,818 | | | | |
| <u> </u> | 22 | Printing and publications | | | | | |
| <u>5</u> | 23 | Other expenses (attach schedule) | 791 | | 41 | 41 | |
| at II | 24 | Total operating and administrative expenses. | | | | | |
| <u>p</u> | | Add lines 13 through 23 | 95,886 | | 50,330 | 50,330 | 30,07 |
| 0 | 25 | Contributions, gifts, grants paid | 432,000 | | | | 432,00 |
| | 26 | Total expenses and disbursements. Add lines 24 and | | | | | |
| | 27 | Subtract line 26 from line 12 | 527,886 | | 50,330 | 50,330 | 462,07 |
| | 27 a | Subtract line 26 from line 12 Excess of revenue over expenses and | 682,646 | | | | |
| | | disbursements | 332,340 | | | | |
| | ь | Net investment income (if negative, enter -0-) | | <u> </u> | 173,392 | J= | |
| - | С | Adjusted net income(If negative, enter -0-) | | | | 173,392 | |

8,147,999

8,147,999

8,147,999

8.147.999

9,480,601

9,480,601

9,480,601 9,480,601

2

3

4

5

6

8,147,999

682,646

649,956

9,480,601

9,480,601 Form 990-PF (2016)

9,479,700

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Land, buildings, and equipment basis ▶ _

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Unrestricted

Permanently restricted . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶ _

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) > ____

Temporarily restricted

C

11

12

13

14

15

16

17

18

19 20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

| List and describe the k 2-story brick warehous | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr | | |
|---|---|--|------------------------------------|---|-------------------------------|
| 1a See Additional Data Table | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | Cost or | (g) other basis ense of sale | Gain o | h) r (loss)) minus (g) |
| a See Additional Data Table | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| Complete only for assets show | ving gain in column (h) and owned b | y the foundation | on 12/31/69 | (| 1) |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | | Gains (Col (h) gain minus col (k), but not less than -0-) o Losses (from col (h)) | |
| a See Additional Data Table | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Capital gain net income or (r | | n, also enter in P ss), enter -0- in F | | 2 | -13,19 |
| 3 Net short-term capital gain o | or (loss) as defined in sections 1222(| 5) and (6) | | | |
| If gain, also enter in Part I, l in Part I, line 8 | ine 8, column (c) (see instructions) | If (loss), enter -0 | } | 3 | -23,7 |
| Part V Qualification Under | er Section 4940(e) for Reduce | ed Tax on Net | Investment In | come | |
| | e foundations subject to the section 4 | | | | |
| (| | (.) | | ·- <i>,</i> | |

If section 4940(d)(2) applies, leave this part blank

(a) Base period years Calendar

year (or tax year beginning in)

2015 2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

.

Enter the appropriate amount in each column for each year, see instructions before making any entries

423,952

433,070

406,075

391,165

396,034

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

Net value of noncharitable-use assets

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

8,418,988

8,897,965

8,452,979

7,956,955

7,844,210

2

3

4

5

6

7

8

(d)

Distribution ratio

(col (b) divided by col (c))

Page 3

Yes 🗸 No

0 05036

0 04867

0 04804

0 04916 0 05049

0 246714

0 049343

9,112,048

449,616

451,350

462,070

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1,734

| 6a Did the foundation, during the year, | receive any funds, directly or | ındırectly, to pay premit | ums on | | |
|---|---|---|---|-----------|------------------------------|
| • | | | · 🗌 Yes 🗸 | No | |
| b Did the foundation, during the year, | pay premiums, directly or inc | directly, on a personal be | nefit contract? | 6b | No |
| If "Yes" to 6b, file Form 8870 | | | | | |
| 7a At any time during the tax year, was | | | ∟ Yes 💌 | | |
| b If yes, did the foundation receive an | , | | | 7b | No |
| Part VIII Information About Cand Contractors | fficers, Directors, Trus | tees, Foundation Ma | anagers, Highly Paid Er | nployees | ·, |
| 1 List all officers, directors, trustee | s, foundation managers a | nd their compensation | | _ | |
| (a) Name and address | Title, and average hours per week (b) devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | | nse account, r allowances |
| See Additional Data Table | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 2 Compensation of five highest-pai | d employees (other than t | hose included on line 1 | see instructions) If no | ne enter | "NONE " |
| | | llose ilicidaed oil illie 1 | Contributions to | ne, enter | HOHL |
| (a) Name and address of each employee pa more than \$50,000 | Title, and average hours per week (b) devoted to position | (c) Compensation | employee benefit plans and deferred (d) compensation | | nse account, · allowances |
| NONE | | | (u) compensation | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total number of other employees paid ove | r \$50,000 | | | | |

| Form 990-PF (2016) | | Page 7 |
|---|---------------------------------------|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, and Contractors (continued) | Foundation Managers, Highly P | aid Employees, |
| 3 Five highest-paid independent contractors for professional service | es (see instructions). 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 | | > |
| Part IX-A Summary of Direct Charitable Activities | | · |
| List the foundation's four largest direct charitable activities during the tax year. Include rele | | er of Expenses |
| organizations and other beneficiaries served, conferences convened, research papers produ | ced, etc | |
| 1 | | |
| | | |
| 2 | | |
| 2 | | |
| | | |
| 3 | | |
| 3 | | |
| | | |
| 4 | | |
| 4 | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see | <u>'</u> | |
| Describe the two largest program-related investments made by the foundation during the | ne tax year on lines 1 and 2 | Amount |
| 1 | | |
| | | |
| 2 | | |
| 2 | | |
| | | |
| All other program-related investments. See instructions | | |
| 3 | | |
| <u> </u> | | |
| | | |
| Total. Add lines 1 through 3 | | • |
| <u>-</u> | | Form 990-PF (2016) |

1a

1b

2

3a 3b

4

5

462,070

462,070

1,734

460.336

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

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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.

Amounts set aside for specific charitable projects that satisfy the

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

b

2

3

4

5

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

income Enter 1% of Part I, line 27b (see instructions).

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

453.868

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6,329

| Form 990-PF (2 | 016) |
|----------------|------|
| Part XIII | Undi |

Page 9 istributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2015 2015 2016 453.868 1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 6,329 a Enter amount for 2015 only. **b** Total for prior years Excess distributions carryover, if any, to 2016

1.873

1.873

1,873

1.873

From 2011. **b** From 2012.

c From 2013. . .

d From 2014. e From 2015. f Total of lines 3a through e. 4 Qualifying distributions for 2016 from Part

XII, line 4 > \$

a Applied to 2015, but not more than line 2a

(Election required—see instructions).

required—see instructions).

b Applied to undistributed income of prior years c Treated as distributions out of corpus (Election d Applied to 2016 distributable amount.

same amount must be shown in column (a))

e Remaining amount distributed out of corpus

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

9 Excess distributions carryover to 2017.

10 Analysis of line 9

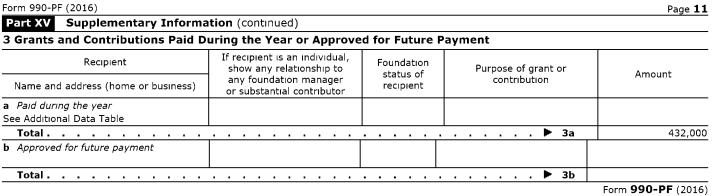
a Excess from 2012. . . **b** Excess from 2013. . c Excess from 2014. . . . d Excess from 2015. . . e Excess from 2016. . .

Subtract lines 7 and 8 from line 6a

indicated below:

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



| ter gross | amounts unless otherwise indicated | Unrelated bu | siness income | Excluded by section | 512, 513, or 514 | (e) Related or exemp |
|---|---|--|----------------------|------------------------------------|----------------------|--------------------------------------|
| - | service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| - | and contracts from government agencies | | | | | |
| | ship dues and assessments | | | | | |
| | st on savings and temporary cash | | | | | |
| | ments | | | 14 | 223,722 | |
| | tal income or (loss) from real estate | | | | | |
| | inanced property | | | | | _ |
| | ebt-financed property | | | | | |
| | vestment income | | | | | |
| | r (loss) from sales of assets other than | | | | | |
| invent | pry | | | 18 | -13,190 | |
| | ome or (loss) from special events | | | | | |
| | rofit or (loss) from sales of inventory evenue a | | | | | |
| | | | | | | |
| с | | | | | | |
| d | | | | | | |
| | | | | | | |
| е | Add calumna (b) (d) and (a) | | | | 240 522 | |
| e | l Add columns (b), (d), and (e) | | | | 210,532 | |
| e Subtota Total. A se worksh | l Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculatio | ns) | | | 210,532 3 | 210,532 |
| e Subtota Total. Asse worksh | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Leet in line 13 instructions to verify calculations. Relationship of Activities to the | ^{ns}) e Accomplish i | ment of Exem | pt Purposes | 3 | 210,53 |
| e Subtota Total. A e worksh art XVI | l Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculatio | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| e Subtota Total. A e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| e Subtota Total. A e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| e Subtota Total. A e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| e Subtota Total. / e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| e Subtota Total. A e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| eSubtota Total. A e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| e Subtota Total. A e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
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| eSubtota Total. A ee worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| e Subtota Total. A e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| eSubtota Total. A ee worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| eSubtota Total. A ee worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,53 |
| e Subtota Total. / ee worksh art XVI ine No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,532 |
| e Subtota Total. / ee worksh art XVI ine No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplish Income is reporte | ment of Exem | pt Purposes of Part XVI-A contribu | ted importantly to | 210,532 |

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

| Part | XVII | Exempt Organi | | runsiers ro | ana mansactio | nis una itele | | itabic | | |
|--------------|------------|---------------------------|-----------------|-------------------|--------------------------------|-----------------|---|---------------|------------|--|
| | | · · · | ndirectly enga | | | | zation described in section 50 cical organizations? | I | Yes | No |
| a Tran | nsfers | from the reporting four | ndation to a r | noncharitable ex | empt organization | of | | | | |
| | | | | | · - | | | 1a(1) | | No |
| (2) | Othe | r assets | | | | | | 1a(2) | | No |
| b Oth | er trar | nsactions | | | | | | | | |
| (1) | Sales | of assets to a nonchar | ıtable exemp | t organization. | | | | 1b(1) | | No |
| (2) | Purc | nases of assets from a | noncharitable | e exempt organı | zation | | | 1b(2) | | No |
| (3) | Rent | al of facilities, equipme | nt, or other a | ssets | | | | 1b(3) | | No |
| (4) | Reim | bursement arrangemer | nts | | | | | 1b(4) | | No |
| (5) | Loan | s or loan guarantees. | | | | | | 1b(5) | | No |
| (6) | Perfor | mance of services or m | nembership o | r fundraising so | licitations | | | 1b(6) | | No |
| | - | | | • | | | | 1c | | No |
| | | | | | | | ld always show the fair marke | | | |
| | | | | | | | teived less than fair market va assets, or services received | lue | | |
| | <i>'</i> | J | | ` | | · . | , | | | |
| (a) Line | No | (b) Amount involved | (c) Name of | noncharitable exe | empt organization | (d) Description | on of transfers, transactions, and s | narıng arra | ngemen | its |
| | _ | | | | | | | | | |
| | _ | | | | | | | | | |
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| | _ | | | | | | | | | |
| 2a is th | ne fou | ndation directly or indir | ectly affiliate | d with or relate | ed to one or more | tax-exempt or | rganizations | | | |
| | | in section 501(c) of the | • | | • | • | - | □Yes | ✓ N | lo |
| | | omplete the following s | · | chan section 5 | 01(0)(3)) 01 111 300 | | | | ۱۰ ت | Ü |
| ווט | es, c | (a) Name of organizati | | 1 (| b) Type of organization | on I | (c) Description of rela | tionship | | |
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| | | | | | | | anying schedules and statem | | | |
| Sign | | th preparer has any kno | | orrect, and com | ipiete Deciaration | or preparer (o | ther than taxpayer) is based o | II all IIIIOI | mation | 1 01 |
| | | ***** | , | | 2017-05-03 | **** | * May the | IRS discus | ss this r | eturn |
| Here | . ■ | | | | | —) — | | e preparer s | | |
| | , | Signature of officer or t | rustee | | Date | ▼ Title | (see in: | str)? 🗹 Y | es 🗆 N | ło |
| | • | Print/Type preparer's | s name | Preparer's Sig | nature | Data | PTIN | · | | |
| | | . Tille, Type preparer | idiiic | | | Date | Check if self- | D004 11 | - 404 | No N |
| | | Joseph I McArdio | 1. CDA | | | | employed ▶ 🔲 | P00146 | 5401 | |
| Paid | | Joseph L McArdle | JI CFA | | | | | | | |
| Prep | arer | . Firm's name ► BEN | OIT & MCARI | L DLE PC | | | | | | |
| Use (| | I IIII S Haille F BEIG | | | | | Firm's | EIN ► | | |
| | • | | 40 WAREHAM | 1 RD - P O BOX | 1037 | | | | | |
| | | м | ARION, MA | 027381037 | | | Phone | no (508 |) 748- | 1611 |
| | | | | , | | | | | | |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 800 Shs Gilead Sciences Р 2016-01-01 2016-12-22 Р 2016-12-23 100 Shs IShares NASDAQ 2016-05-11 1000 Shs Novo-Nordisk Ρ 2016-03-23 2016-12-22 350 Shs SPDR S & P Biotech ETF Ρ 2016-05-11 2016-12-23 200 Shs Gilead Sciences Ρ 2015-11-17 2016-12-22 Ρ 2015-04-27 2016-12-23 300 Shs IShares NASDAQ Ρ 2016-12-22 200 Shs Novo-Nordisk 2015-11-17 1350 Shs SPDR S & P Biotech ETF Р 2015-04-09 2016-12-23 98 Shs California Resources Ρ 2006-10-11 2016-05-11 1500 Shs Deere & Co Ρ 2000-01-01 2016-05-11 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (g) plus expense of sale (f) (or allowable) (h) (e) plus (f) minus (g) 58,424 67,653 -9,22927,062 26.255 807 35,736 54,097 -18,361 21,274 18,266 3,008 14,606 20,859 -6,25376,640 101,085 -24,445 7,147 10,817 -3,67078.339 97.397 -19,058 157 75 82 126,693 117,725 8,968 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (k) over col (j), if any (j) as of 12/31/69 -9.229807 -18,361 3,008 -6,253-24,445 -3,670-19,058 82 8,968

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 300 Shs Fiserv Ρ 2000-12-04 2016-03-23 500 Shs Glacier Bancorp Inc Р 2012-10-19 2016-03-23 100 Shs Johnson & Johnson Р 1992-10-22 2016-06-28 Р 100 Shs Merck & Co Inc 2004-03-23 2016-06-28 Ρ 2300 Shs PRA Group 2012-03-30 2016-03-23 1500 Shs Royal Dutch Shell Ρ 2000-01-01 2016-02-04 2000 Shs Safeguard Scientific Ρ 2011-07-07 2016-12-22 Р 200 Shs Stryker Corp 2009-05-12 2016-03-23 Capital Gain Distribution Ρ 2000-01-01 2016-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (g) plus expense of sale (or allowable) (h) (e) plus (f) minus (g) (f) 30,108 5,440 24,668 12,638 7,446 5,192 11,741 1,250 10,491 5,536 4,409 1,127 65,259 55,053 10,206 66,783 78,664 -11,881 37,585 24,551 -13,034 21,089 8.006 13,083 15.109 15,109 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 24,668 5.192 10,491 1,127 10,206 -11,881 -13,034 13,083 15,109

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation FRIC H STRAND Trustee 0 00 PO BOX 1031 MARION, MA 02738 Michelle ADESSO Trustee 0.00 798 DIVISION STREET S DARTMOUTH, MA 02748 DENNIS VAN SLOUN Trustee 0.00 17230 CLEAR SPRING LANE MINNETONKA, MN 55345 JOSEPH VAN SLOUN Executive Direc 30.000 10 00 3527 JIDANA LANE MINNETONKA, MN 55345 DAVID B TITUS Trustee 0.00 PO Box 1219 MARION, MA 02738 EVERETT M DAVIS Trustee 0 00 1961 White Feather Lane Nokomis, FL 34275 NANCY VAN SLOUN Trustee 0.00 30 WEST POINT DRIVE TONKA BAY, MN 55331

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | | |
|--|--|--------------------------------------|---|----------|--|--|--|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount | | | |
| , | or substantial contributor | | | <u> </u> | | | |
| a Paid during the year | | | | | | | |
| Nefeli Neamonitaki 3825 Pascolo Bend Chaska, MN 55318 | NONE | I | Scholarship | 1,000 | | | |
| Courtni Carter 342 Old Westport Road N Dartmouth, MA 02747 | NONE | I | Scholarship | 1,000 | | | |
| Connecticut College 270 Mohegan Ave New London, CT 06320 | NONE | PRVT | Ann C Wheeler Endowment | 1,000 | | | |
| Hannah Rogers 1801 Milk Street Dighton, MA 02715 | NONE | I | Scholarship | 1,000 | | | |
| Nicholas Anderson 8 Field Stone Drive Westport, MA 02790 | NONE | I | Scholarship | 1,000 | | | |
| Westport Fishermen's Association PO Box 83 Westport Point, MA 02791 | NONE | PRVT | UNRESTRICTED | 1,000 | | | |
| DUCKS UNLIMITED One Waterfowl Way Memphis, TN 38120 | NONE | Public | UNRESTRICTED | 15,000 | | | |
| MORRIS ANIMAL FOUNDATION 10200 East Girard Suite B 430 Denver, CO 80231 | NONE | Public | UNRESTRICTED | 20,000 | | | |
| MONTANA STATE UNIVERSITY FND PO Box 173150 Bozeman, MT 59717 | NONE | PRVT | Horticultural Department | 4,000 | | | |
| BEREA COLLEGE 101 Chestnut Street Berea, KY 40403 | NONE | PRVT | UNRESTRICTED | 10,000 | | | |
| Westport River Watershed Alliance 1151 Main Road Westport, MA 02790 | NONE | Public | UNRESTRICTED | 10,000 | | | |
| FRONTIER NURSING 195 School Street Hyden, KY 41749 | NONE | PRVT | UNRESTRICTED | 11,000 | | | |
| Minnesota State Horticultural Socie 2705 Lincoln Dr Roseville, MN 55113 | NONE | Public | UNRESTRICTED | 1,200 | | | |
| NEADS 305 Redemption Rock Trail Princeton, MA 01541 | NONE | Public | UNRESTRICTED | 5,000 | | | |
| FRIENDS ACADEMY 1088 Tucker Road North Dartmouth, MA 02747 | NONE | Public | Girls Sports Programand Literacy Development, \$7,000 each | 14,000 | | | |
| Total | | | | 432,000 | | | |

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| Form 990PF Part XV Line 3 - Grant | ts and Contributions Paid | During the | Year or Approved for Future | Payment |
|---|---|-------------------------|---|---------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| Perkins School for the Blind 175 N Beacon St Watertown, MA 02472 | NONE | Public | UNRESTRICTED | 10,000 |
| Alice Lloyd College 100 Purpose Road Pippa Passes, KY 41844 | NONE | PRVT | UNRESTRICTED | 30,000 |
| Fred Hutchinson Cancer Research Cen 1100 Fairview Ave N Seattle, WA 98109 | NONE | Public | UNRESTRICTED | 20,000 |
| Demarest Lloyd Center 430 Potomska Road Dartmouth, MA 02748 | NONE | Public | UNRESTRICTED | 5,000 |
| Student Conservation Association 689 River Road Charlestown, NH 03603 | NONE | Public | UNRESTRICTED | 10,000 |
| BOWDOIN COLLEGE 5000 South St Brunswick, ME 04011 | NONE | PRVT | UNRESTRICTED | 2,000 |
| TABOR ACADEMY Front Street Marion, MA 02738 | NONE | PRVT | UNRESTRICTED | 1,500 |
| Westport Land Conservation Trust PO Box 3975 830 Drift Rd Westport, MA 02790 | NONE | Public | UNRESTRICTED | 1,000 |
| Animal Rescue League of Greater Fal 474 Durfee Street Fall River, MA 02720 | NONE | Public | UNRESTRICTED | 70,000 |
| Trustees University of Pennsylvania 3451 Walnut Street Philadelphia, PA 19104 | NONE | Public | UNRESTRICTED | 28,000 |
| Cummings School of VetMedicin 200 Westboro Road North Grafton, MA 01536 | NONE | Public | Unrestricted | 10,000 |
| The Raptor Center 1920 Fitch Avenue St Paul, MN 55108 | None | Public | Unrestricted | 10,000 |
| Minnesota Landscape Arboretum Found 3675 Arboretum Drive Chaska, MN 55318 | None | Public | Unrestricted | 13,000 |
| Pamela Katten Foundation 525 W Monroe Chicago, IL 60661 | None | PRVT | Unrestricted | 500 |
| Vested Interest in K-9's PO Box 9 East Taunton, MA 02718 | None | Public | Purchase bullet proof vest for police dog | 1,100 |
| Total | | | | 432,000 |

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 contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Massachusetts Audubon Society None Public Unrestricted 10,000 208 S Great Road Lincoln, MA 01773 REDWOOD CITY HERITAGE None Public Unrestricted 1,000 ASSOCIATION 627 Hamilton Street Redwood City, CA 94063 Public Unrestricted 6,900 Star Kids of New Bedford PO Box 79198 None Dartmouth, MA 02747 Univ of Minnesota Masonic Cancer Ct None Public Unrestricted 11,000 425 E River Pkwv Minneapolis, MN 55455 Public BLITHEWOLD INC 101 Ferry Road None Unrestricted 10,000 Bristol, RI 02809 Bentley University 175 Forest Street PRVT None Unrestricted 1.000 Waltham, MA 02452 Guiding Eyes for the Blind None Public Unrestricted 5,000 611 Granite Springs Road Yorktown Heights, NY 10598 Ι Benjamin Sosin 16559 Creekside Lane None Scholarship 1,000 Minnetonka, MN 55345 Camp Sunshine 35 Acadia Road None Public Unrestricted 9,000 Casco, ME 04015 The Shwartz Center for Children None Public Unrestricted 5,000 1 Posa Place Dartmouth, MA 02747 PC Unrestricted 10,000 New England Aquarium 1 Central Wharf None Boston, MA 02110 Public America's Vet Dogs None Unrestricted 21,000 371 East Jericho Turnpike Smithtown, NY 11787 Katherine Cummings 121 County Road None **PRVT** Scholarship 1,000 EFreetown, MA 02176 University of Minnesota Foundation None Public Scholarship 7.000 1365 Gortner Avenue St Paul, MN 55108 CLEAR 19223 Prairie Street None Public Unrestricted 3,000

432,000

Northridge, CA 91324

Total

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| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | |
|--|--|--------------------------------------|----------------------------------|---------|--|--|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount | | |
| Name and address (home or business) | or substantial contributor | recipient | | | | |
| a Paid during the year | | | | | | |
| Horticultural Reseach Institute 1200 G Street NW Suite 800 Washington, DC 20005 | None | Public | Unrestricted | 1,000 | | |
| Forever Paws Animal Shelter 300 Lynnwood St Fall River, MA 02721 | None | PC | Unrestricted | 500 | | |
| Dana Hall School 45 Dana Road Wellesley, MA 02482 | None | PC | Unrestricted | 750 | | |
| Choate Rosemary Hall 333 Christian Street Wallingford, CT 06492 | None | PC | Annual fund | 1,000 | | |
| Marion Art Center 80 Pleasant Street Marion, MA 02738 | None | PC | Unrestricted | 4,000 | | |
| Minnesota Land Trust 2356 University Ave W Suite 240 St Paul, MN 55114 | None | PC | Unrestricted | 1,000 | | |
| Yankee Golden Retriever Rescue PO Box 808 Hudson, MA 01749 | None | PC | Unrestricted | 2,000 | | |
| The Smile Train PO Box 96231 Washington, DC 20090 | None | PC | Unrestricted | 500 | | |
| Hmong American Farmers Association 941 Lafond Avenue West Suite 100 Saint Paul, MN 55104 | None | PC | Unrestricted | 500 | | |
| MN Adult Teen Challenge 1619 Portland Ave S Minneapolis, MN 55404 | None | PC | Unrestricted | 500 | | |
| Southcoast Health 43 High Street Wareham, MA 02571 | None | PC | Tobey Hospital Annual Fund | 2,000 | | |
| Town of Fairhaven Animal Shelter 200 Bridge Street Fairhaven, MA 02719 | None | PC | Unrestricted | 500 | | |
| Save the Children 501 Kings Hwy E - Suite 400 Fairfield, CT 06825 | None | PC | Unrestricted | 650 | | |
| Community Nurse Home Care 62 Center Street Fairhaven, MA 02719 | None | PC | Unrestricted | 100 | | |
| EducateMe Inc 1613 E Street SE Washington, DC 20003 | None | PC | Unrestricted | 1,500 | | |
| Total | | | | 432,000 | | |

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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 status of contribution show any relationship to any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Bristol County Sheriff's Office None PC K-9 Unit 1,000 400 Faunce Corner N Dartmouth, MA 02747 Unrestricted Chaska Historical Society 112 W 4th St None PC 300 Chaska, MN 55318 City of Fall River 685 Pleasant Street None PC Unrestricted 1,000 Fall River, MA 02721 GOV Town of Westport Animal Control Off None Animal Control Fund 1,000 816 Main Street Westport, MA 02790 Abbott Northwestern Hospital None PC Unrestricted 1.000 800 E 28th St Mineapolis, MN 55407 Missions Inc Home Free Shelter PC. To benefit the home free shelter None 1.000

3409 E Medicine Lake Blvd Minneapolis, MN 55441

432,000

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| efile GRAPHIC print - DO NOT PROCE | SS As Filed D | ata - | DL | N: 93491125021127 | | | | |
|------------------------------------|-----------------------|--------------------------|------------------------|---|--|--|--|--|
| TY 2016 Accounting Fees Schedule | | | | | | | | |
| | | | | | | | | |
| Nai | | | | | | | | |
| E | IN: 04-66918 | 809 | | | | | | |
| Software | ID: 1600030 | 3 | | | | | | |
| Software Versi | i on: 2016v3.0 | | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | | | |
| Benoit & McArdle | 2,875 | 2,875 | 2,875 | 0 | | | | |

TY 2016 Investments Corporate Stock Schedule

Name: Van Sloun Foundation

EIN: 04-6691809

Software ID: 16000303

Software Version: 2016v3.0

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|------------------------------|---------------------------|----------------------------------|
| ANALOG DEVICES | 152,502 | 152,502 |
| JOHNSON & JOHNSON | 103,689 | 103,689 |
| MERCK | 52,983 | 52,983 |
| FISERV | 286,956 | 286,956 |
| PROCTER & GAMBLE | 92,488 | 92,488 |
| DOVER | 127,381 | 127,381 |
| US Bancorp Pfd | 56,580 | 56,580 |
| PEPSICO | 198,797 | 198,797 |
| Wells Fargo Pfd | 105,720 | 105,720 |
| Weyerhaeuser Co | 135,405 | 135,405 |
| Thermo Fisher Scientific Inc | 56,440 | 56,440 |
| Church & Dwight | 203,274 | 203,274 |
| Transcanada | 158,025 | 158,025 |
| NOVARTIS AG SPONSORED ADR | 101,976 | 101,976 |
| EXXON MOBIL | 153,442 | 153,442 |
| Adobe Systems | 144,130 | 144,130 |
| Glacier Bancorp | 271,725 | 271,725 |
| John Wiley Class A | 125,350 | 125,350 |
| Chevron Texaco | 164,780 | 164,780 |
| Illinois Toolworks | 244,920 | 244,920 |
| Occidental Pete | 74,792 | 74,792 |
| WATERS CORPORATION | 174,707 | 174,707 |
| J G BOSWELL | 142,875 | 142,875 |
| REALTY INCOME CORP. | 149,448 | 149,448 |
| KEWEENAU LAND ASSN LTD | 59,100 | 59,100 |
| Stryker Corp | 119,810 | 119,810 |
| Altrıa Group Inc | 135,240 | 135,240 |
| Paypal Holdings Inc | 78,940 | 78,940 |
| Goldman Sachs | 101,720 | 101,720 |
| Philip Morris International | 82,341 | 82,341 |

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|---------------------------------------|---------------------------|----------------------------------|
| Keycorp Inc | 50,980 | 50,980 |
| Imperial Oil | 139,040 | 139,040 |
| Safeguard Scientifics | 53,800 | 53,800 |
| Nestle S A ADR | 107,610 | 107,610 |
| Private Bancorp | 108,876 | 108,876 |
| Royal Dutch Shell | | |
| Deere and Company | | |
| E I du Pont de Nemours | 183,500 | 183,500 |
| Portfolio Recovery Associates | | |
| The Charles Schwab Corp | 276,290 | 276,290 |
| Dodge & Cox Income Fund | 780,826 | 780,826 |
| Apple Computer Inc | 115,820 | 115,820 |
| Vornado Realty Pfd | 50,340 | 50,340 |
| Walthausen Small Cap | 98,517 | 98,517 |
| Vanguard St Investment Grade Admıral | 1,336,046 | 1,336,046 |
| Cohen & Steers Pref Securities Income | 793,212 | 793,212 |
| Biogen Idec Inc | 99,253 | 99,253 |
| Celgene Corp | 115,750 | 115,750 |
| Gilead Sciences Inc | | |
| Nasdaq Biotechnology ETF | | |
| Novo-Nordisk | | |
| S & P Biotech ETF | | |
| Allied World Assurance Co | 161,130 | 161,130 |
| McCormick & Co | 93,330 | 93,330 |
| Paychex Inc | 182,640 | 182,640 |
| PNC Small Cap Fund | 108,397 | 108,397 |

| efile GRAPHIC print - DO NOT PROCESS | | | | | |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|
| TY 2016 Other Expenses Sche | dule | | | _ | |
| | | | | | |
| Name: | Van Sloun Foun | dation | | | |
| EIN: | EIN: 04-6691809 | | | | |
| Software ID: | Software ID: 16000303 | | | | |
| Software Version: | Software Version: 2016v3.0 | | | | |
| Other Expenses Schedule | | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |
| ADR fees | 41 | 41 | 41 | | |
| Insurance | 750 | | | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491125021127 | |
|--------------------------------------|-----------------|----------|---------------------|--|
| TY 2016 Other Increases Schedule | | | | |
| | | | | |
| Name: | Van Sloun Fou | ındatıon | | |
| EIN: | 04-6691809 | | | |
| Software ID: | 16000303 | | | |
| Software Version: | 2016v3.0 | | | |
| De | escription | | Amount | |
| Unrealized Gains and Losses Net | | | 649,956 | |

| efile GRAPHIC print - DO NOT PROCE | SS As Filed Data | - | DLN | i: 93491125021127 | |
|------------------------------------|--|--------------------------|------------------------|---|--|
| TY 2016 Other Professiona | TY 2016 Other Professional Fees Schedule | | | | |
| | | | | | |
| Naı | me: Van Sloun F | oundation | | | |
| E | IN: 04-6691809 | 1 | | | |
| Software ID: 16000303 | | | | | |
| Software Version: 2016v3.0 | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |
| American Research & Management | 45,030 | 45,030 | 45,030 | 0 | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DLN | N: 93491125021127 |
|--------------------------------------|---------------|--------------------------|------------------------|---|
| TY 2016 Taxes Schedule | | | | |
| | | | | , |
| Name: | Van Sloun Fo | oundation | | ! |
| EIN: | 04-6691809 | i. | | ' |
| Software ID: | 16000303 | | | 1 |
| Software Version: | 2016v3.0 | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| Commonwealth of Massachusetts | 70 | | | 70 |
| Federal excise taxes | 1,918 | | | |
| Foreign taxes | 2,384 | 2,384 | 2,384 | |

| efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491125021127 | | | | | | |
|---|---|---|--|--|--|--|
| Schedule B (Form 990, 990-EZ, | Schedule of Contributors | | OMB No 1545-0047 | | | |
| or 990-PF) Department of the Treasury Internal Revenue Service | 990-PF) ► Attach to Form 990, 990-EZ, or 990-PF Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at | | | | | |
| Name of the organizate Van Sloun Foundation | ion | Employer id | lentification number | | | |
| | | 04-6691809 | | | | |
| Organization type (ch | eck one) | | | | | |
| Filers of: | Section: | | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | ion | | | | |
| | ☐ 527 political organization | | | | | |
| Form 990-PF | 501(c)(3) exempt private foundation | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | |
| 501(c)(3) taxable private foundation | | | | | | |
| 141 | cation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution from any one contributor. Complete Parts I and II. See instructions for contributor. | • | • | | | |
| Special Rules | | | | | | |
| under sections received from a | tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ 3% s 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pany one contributor, during the year, total contributions of the greater of (1) \$5,000 one 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II | art II, line 13, | 16a, or 16b, and that | | | |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III | | | | | | |
| during the year If this box is che purpose Do no | tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such conti- ecked, enter here the total contributions that were received during the year for an et t complete any of the parts unless the General Rule applies to this organization be able, etc., contributions totaling \$5,000 or more during the year | tributions tota exclusively re ecause it rece | iled more than \$1,000 ligious, charitable, etc, eived <i>nonexclusively</i> | | | |
| 990-EZ, or 990-PF), bu | on that is not covered by the General Rule and/or the Special Rules does not file S t it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line F Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of | of its | | | | |
| For Paperwork Reduction for Form 990, 990-EZ, or 9 | | le B (Form 990 | , 990-EZ, or 990-PF) (2016) | | | |

| Vame of organi Van Sloun Found | | 04-6691809 | number |
|-----------------------------------|--|----------------------------|---|
| Part I | Contributors (see instructions) Use duplicate copies of Part I if ac | dditional space is needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person 🗸 |
| 1 | Neil Van Sloun | | Payroll |
| | PO Box 116 | \$ 500,000 | Noncash □ |
| | Westport Pt, MA02791 | | |
| | Westport I ty Pinozy 51 | | (Complete Part II for noncash contributions) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions | Type of contribution |
| 2 | | | Person 🗸 |
| 2 | Sylvia M Van Sloun PO Box 116 | | Payroll |
| | PO BOX 116 | \$ 500,000 | Noncash |
| | Westport Pt, MA 02791 | <u>-</u> | |
| | | | (Complete Part II for noncash contributions) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions | 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 |
| 140. | Nume, address, and 2n + 4 | Total contributions | Person |
| - | | | Payroll |
| | | \$ | |
| | | | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | inamo, adaroso, and a n | | Person |
| - | | | Payroll |
| | | \$ | |
| | | | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1101 | | . Juli John Marions | Person |
| - | | | Payroll |
| | | | · · · · · · · · · · · · · · · · · · · |
| | | <u>\$</u> | Noncash |
| | | | (Complete Part II for noncash contributions) |
| | | Schedule B (Fr | orm 990, 990-EZ, or 990-PF) (2016) |

| Schedule B (Form 99 | 0, 990-EZ, or 990-PF) (2016) | | Page 3 | |
|--|---|--|--------------------------------|--|
| Name of organization Van Sloun Foundation | | Employer identification number | | |
| _ | | 04-66 | 91809 | |
| 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 | |
| = | | | | |
| (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 | |
| | | \$ | | |
| (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 | |
| | | \$ | | |
| | | Schedule B (Form 9 | 990, 990-EZ, or 990-PF) (2016) | |

| Schedule B (Form 9 | 990, 990-EZ, or 990-PF) (2016) | | Page 4 |
|--|--|--|--|
| Name of organizat Van Sloun Foundatio | | | Employer identification number 04-6691809 |
| than \$1, organiza the year | 000 for the year from any one contributo | r. Complete columns (a) thro of exclusively religious, chari ctions.) ► \$ | d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for |
| (a) No.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | - | |
| | Transferee's name, address, and | (e) Transfer of gift | Relationship of transferor to transferee |
| | | | |
| (a) No.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | Transferee's name, address, and | (e) Transfer of gift | Relationship of transferor to transferee |
| | | | |
| (a) No.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | Transferee's name, address, and | (e) Transfer of gift ZIP 4 F | Relationship of transferor to transferee |
| | | | |
| | | | |
| (a) No.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| } | | (e) Transfer of gift | <u> </u> |
| | Transferee's name, address, and | ZIP 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | schedule B (Form 990, 990-EZ, or 990-PF) (2016) |