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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Fo	r caler	idar year 2016 or tax year beginning ,	and ending				
		pundation PETER AND MARY LEVIN FAMILY	_		A Emp	loyer identification number	
		DATION			20	-3841581	
_		nd street (or P O box number if mail is not delivered to street address)		phone number (see instructions)		
		EDWARDS ROAD, SUITE 180			51	3-236-3896	·
		n, state or province, country, and ZIP or foreign postal code CINNATI OH 45209			C If exe	emption application is pending,	check here
_			m of a farmer public ob		D 1. F		
	Oncor	Final return Amended	m of a former public ch	idiny		oreign organizations, check her	- -
		Address change Name cha	-		î	oreign organizations meeting th 5% test, check here and attach	_
- u	Chock	type of organization X Section 501(c)(3) exempt private					
Ü			e private foundation		-	rate foundation status was term on 507(b)(1)(A), check here	inated under
L_L 		rket value of all assets at J Accounting method.		crual		foundation is in a 60-month ten	musture.
		rear (from Part II, col (c), Other (specify)	Casir Acc	Juai		r section 507(b)(1)(B), check he	. 1
	ine 16)		be on cash hasis.)	}			<u></u>
F	arti	Analysis of Revenue and Expenses (The total of	(a) Revenue and	1		1	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inve		(c) Adjusted net income	for chantable purposes
	1-	the amounts in column (a) (see instructions))	DOORS	 		ļ	(cash basis only)
(A) a	1 2	Contributions, gifts, grants, etc., received (attach schedule) Check Ki if the foundation is not required to attach Sch. B.		<u> </u>			
	3		32		32	I RE	CENED.
	4	Interest on savings and temporary cash investments Dividends and interest from securities	17,137	+	$\frac{32}{17,137}$		160
	5a	Gross rents	17,137	 	17,137		THE STATE OF THE S
	1.	Net rental income or (loss)		<u> </u>			**************************************
NWW DS Revenue	6a	Net gain or (loss) from sale of assets not on line 10	52,576				
§ ē	Ь	Gross sales price for all assets on line 6a 346,185		<u> </u>		Property of the second	many a way ye garan a
Z &	7	Capital gain net income (from Part IV, line 2)	 		52,576		· · · · · · · · · · · · · · · · · · ·
DENNADS Revenue	8	Net short-term capital gain				0	
	9	Income modifications					
MAR	10a	Gross sales less returns and allowances					
≥	Ь	Less Cost of goods sold					
୍ର	C	Gross profit or (loss) (attach schedule)					·*····································
7017 -	11	Other income (attach schedule) STMT 1	4,540		4,540		
₹	12	Total. Add lines 1 through 11	74,285 0		4,285	0	
es es	13 14	Compensation of officers, directors, trustees, etc.		 			
penses	15	Other employee salaries and wages Pension plans, employee benefits		 			
	16a	Legal fees (attach schedule)		 			
ш	ь	Accounting fees (attach schedule) STMT 2	5,715		2,857		
ĕ	C	Other professional fees (attach schedule) STMT 3	800				
rat	17	Interest					
ist	18	Taxes (attach schedule) (see instructions) STMT 4	580		580		
Ë	19	Depreciation (attach schedule) and depletion					<u>, , , , , , , , , , , , , , , , , , , </u>
n b	20	Occupancy					
و	21	Travel, conferences, and meetings	- <u></u>				
an	22	Printing and publications					
Operating and Administrative Ex	23	Other expenses (att sch) STMT 5	19,757		1,363		
atii	24	Total operating and administrative expenses.			أممما	_	
er		Add lines 13 through 23	26,852		4,800	0	0
ŏ	25	Contributions, gifts, grants paid	122,550		4 600		122,550
	26	Total expenses and disbursements. Add lines 24 and 25	149,402		4,800	0	122,550
	27	Subtract line 26 from line 12.	-75,117				
	b	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	-75,117		9,485		<u> </u>
	C	Adjusted net income (if negative, enter -0-)			, -200	0	
	. ~						

Part II 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 agree with end-of-year figure reported on prior year's return)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize) ▶

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

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

6 782,207

Form 990-PF (2016)

Part IV Cap	<u>ital Gains a</u>	<u>nd Losses for Tax on Investme</u>	nt Income					·	
•	(a) List and desc	cribe the kind(s) of property sold (e.g., real estate,			(b) How acquired P – Purchase	(c) Date	acquired	(d) Date sold	
	2-staly blick warehouse, or continon stock, 200 sns. MLC Co) D = 0					(mo ,	day, yr)	(mo , day, yr)	
1a SEE STA	TEMENT 1	1			P	VAR	COUS	VARIOUS	
b SEE STA		2			P	VARIOUS VARIOUS			
c RAYMOND	JAMES -	CAPITAL GAIN DISTRIB	HTIONS				·		
d									
e									
		(f) Depreciation allowed	(a) (Cost or o	other basis		(h) Gair	n or (loss)	
(e) Gross sales	(e) Gross sales price (or allowable)				se of sale			f) minus (g)	
а	103,080				108,706			-5,626	
b	241,531				184,903			56,628	
c	1,574							1,574	
	2,3,-1								
<u>d</u>									
Complete ask for			4004						
Complete only for	assets snowing	gain in column (h) and owned by the four	dation on 12/31	1/69				(h) gain minus	
(ı) FMV as of 1	2/31/69	(j) Adjusted basis			of col (i)	c		less than -0-) or rom col. (h))	
		as of 12/31/69	ov	vercol (j), if any		LUSSES (II		
_a	. <u></u>							-5,626	
_b								56,628	
С				-				1,574	
d									
e									
		If gain, also enter in F	Part I line 7	7					
Capital gain net in	come or (net cap	pital loss) If (loss), enter -0- in F			•	2		52,576	
2 Not short tarm on	utal asia or /loca	—	art 1, 11/10 /		j			02/0.5	
•	• .	s) as defined in sections 1222(5) and (6):	_	٦ .	1	1			
-	in Part I, line 8, 0	column (c) (see instructions) If (loss), ente	er -u- in			_		š. / A	
Part I, line 8 Part V Qua		der Section 4940(e) for Reduce	 _			3		N/A	
If section 4940(d)(2) ap	oplies, leave this	•							
		on 4942 tax on the distributable amount of		base	period?			Yes X No	
If "Yes," the foundation	does not qualify	under section 4940(e). Do not complete	this part.						
1 Enter the appropri	ate amount in ea	ach column for each year, see the instruct	ons before mak	king ar	ny entries.				
	a)	(b)			(c)			(d)	
	nod years ax year beginning in)	Adjusted qualifying distributions	Ne	et value o	of nonchantable-use assets	1		Inbution ratio divided by col. (c))	
)15	297	624		1,330,3	30		0.223722	
	114	80	000		1,530,			0.052261	
)13	278			1,433,6			0.194460	
		167			1,438,4	64		0.116564	
)12		000		1,543,3			0.033044	
)11		, 000		1,545,5	009		0.033044	
2 Total of line 1, cold	• •					2		0.620051	
		year base penod – divide the total on line	2 by 5, or by the	е			1	0 104010	
number of years th	e foundation ha	s been in existence if less than 5 years				_3		0.124010	
4. Enter the net value	of popobositobl	o uso consta for 2016 from Port V. Ino E					ļ	1,101,722	
4 Cittel the net value	or noncramabl	e-use assets for 2016 from Part X, line 5				4		1,101,122	
						Ì_		126 625	
5 Multiply line 4 by lii	ne 3					5		136,625	
						- }			
6 Enter 1% of net in	estment income	e (1% of Part I, line 27b)				_ 6		695	
							1		
7 Add lines 5 and 6						7		137,320	
							1		
8 Enter qualifying dis	tributions from f	Part XII, line 4				8_		122,550	
		ine 7, check the box in Part VI, line 1b, ar	d complete that	t part	using a 1% tax rate	See the			
Part VI instructions	•				- 				

Form	1 990-PF (2016) THE PETER AND MARY LEVIN FAMILY 20-3841581				age 4
P	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	····			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	1			
,	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)	-			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		1,	390
	here ▶ ☐ and enter 1% of Part I, line 27b	1			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	1			
	Part I, line 12, col. (b).	ĺ			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0
3	Add lines 1 and 2	3		1,	390
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			<u>~~~</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		⊥,	390
6	Credits/Payments:	-			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 2,624	Ī			
Ь	Exempt foreign organizations – tax withheld at source	Ī			
С	Tax paid with application for extension of time to file (Form 8868)	I			
_d	Backup withholding erroneously withheld 6d 6d	_		2	624
7	Total credits and payments Add lines 6a through 6d	7			<u>624</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		-	234
10		10			234
<u>11</u>		11			
	art VII-A Statements Regarding Activities		<u>_</u>	Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		1a	162	X
b	participate or intervene in any political campaign?		, 'a	-	
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1b		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		1.5	-	
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c	•	x
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
_	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	•			
	on foundation managers \$		ŧ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2_		X
	If "Yes," attach a detailed description of the activities				- "
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_	4a	ļ	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	A 4b	ļ	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	ļ.,,	X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ŀ		
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			.	
	conflict with the state law remain in the governing instrument?		6	X	├
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	X	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		Į.		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8Ь	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				l
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"				ł
	complete Part XIV		9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their]	1	[
	names and addresses		10	L	X
			Form 9	90-PI	F (2016)

	art VII-A Statements Regarding Activities (continued)			
44	At any time dispersition were did the foundation dispersition of a second of the secon	1	Yes	No
11,	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			х
12	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	11		
14	person had advisory privileges? If "Yes," attach statement (see instructions)	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	x	
	Website address ► NONE			
14	The books are in care of ▶ PETER LEVIN Telephone no ▶ 513-2	36-	389	6
	3805 EDWARDS RD., STE 180			
	Located at ▶ CINCINNATI OH ZIP+4 ▶ 45209	•		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	_	1	▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	A		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	····		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a			ŧ	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		Ī	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		1	
	disqualified person?	[[1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		I	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No		I	
			1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a penod after		1	
	termination of government service, if terminating within 90 days.) Yes X No		ŧ	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations		I	
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1ь	Ť	
	Organizations relying on a current notice regarding disaster assistance check here			
Ç	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		ŧ	
	were not corrected before the first day of the tax year beginning in 2016?	1c	Ī	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		1	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		I	
	6e, Part XIII) for tax year(s) beginning before 2016?		1	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		ł	
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		I	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		1	
	all years listed, answer "No" and attach statement – see instructions) N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		1	
2-	▶ 20 , 20 , 20 , 20 Did the foundation half was a 20% down and a 4 down a 20% down a 2		1	
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1	
	at any time during the year? Yes X No		ŧ	
	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		1	
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		I	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		1	
	foundation had excess business holdings in 2016) N/A	3b	ŧ	
	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a	+	x
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	Ţ	x
		~ 99	O-PE	

	dina Antivitian for Which Can		3841581	mucd)		Page
5a Dunng the year did the foundation pay of	ding Activities for Which For	m 4/20 May Be R	equirea (cont	inueu)		
5a Dunng the year did the foundation pay c(1) Carry on propaganda, or otherwise		4045(5)\2		Yes X No		I
(2) Influence the outcome of any specif			لــا	Yes X No		1
directly or indirectly, any voter regist	· · · · · · · · · · · · · · · · · · ·	to carry on,	\Box	Yes X No		1
(3) Provide a grant to an individual for t				Yes X No		1
(4) Provide a grant to an organization o			L	163 [22] 110		1
section 4945(d)(4)(A)? (see instruct		i described iii		Yes X No		1
(5) Provide for any purpose other than i	•	or educational	L	163 22 140		ł
purposes, or for the prevention of cr	•	or Coocational		Yes 🗓 No		1
o If any answer is "Yes" to 5a(1)-(5), did a		ier the exceptions desc		103 = 110		1
Regulations section 53.4945 or in a cum				N/A	5b	Ţ
Organizations relying on a current notice		•		▶ □		
If the answer is "Yes" to question 5a(4),	-			ر ب		Ī
because it maintained expenditure response			N/A	Yes No		I
If "Yes," attach the statement required by			, ,			1
Did the foundation, during the year, rece		ay premiums				1
on a personal benefit contract?	,	→ 1==	\Box	Yes X No		Ī
Did the foundation, during the year, pay	premiums, directly or indirectly, on a pe	rsonal benefit contract			6b	T x
If "Yes" to 6b, file Form 8870	, ,,, s w.p.					
At any time during the tax year, was the	foundation a party to a prohibited tax sl	nelter transaction?	Π,	Yes X No		1
If "Yes," did the foundation receive any p				A\N	7b	Ī
· · · · · · · · · · · · · · · · · · ·	fficers, Directors, Trustees, F			Paid Employe	es,	
and Contractors						
List all officers, directors, trustees, fou	ndation managers and their comper	nsation (see instructi	ons).			
		(b) Title, and average	(c) Compensation	(d) Contributions to		
(a) Name and	address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred		se account, lowances
		- 	ļ <u> </u>	compensation		
PETER E LEVIN	CTNCTNNATIO	IDDECTDENT	t	Į.	Į.	
	CINCINNATI	PRESIDENT			}	,
194 REGIMENT DRIVE	OH 45244	2.00	0	0		
7194 REGIMENT DRIVE KATHERINE LEVIN SHAPIRO	OH 45244 NEW YORK	2.00 DIRECTOR				
7194 REGIMENT DRIVE KATHERINE LEVIN SHAPIRO .11 W. 89TH STREET, APT GA	OH 45244 NEW YORK NY 10024	2.00 DIRECTOR 0.00	0	0		
194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO .11 W. 89TH STREET, APT GA TEAN LEVIN WYMAN	OH 45244 NEW YORK NY 10024 VIENNA	2.00 DIRECTOR 0.00 DIRECTOR	0	0		(
194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO 11 W. 89TH STREET, APT GA TEAN LEVIN WYMAN 15 UPHAM PLACE NORTHWEST	OH 45244 NEW YORK NY 10024 VIENNA VA 22180	2.00 DIRECTOR 0.00 DIRECTOR 0.00				
7194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO L11 W. 89TH STREET, APT GA JEAN LEVIN WYMAN 715 UPHAM PLACE NORTHWEST LINNE LEVIN DELYONS	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR	0	0		(
7194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO .11 W. 89TH STREET, APT GA TEAN LEVIN WYMAN 715 UPHAM PLACE NORTHWEST LINE LEVIN DELYONS 720 CREEKWOOD LANE	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00	0	0		
PETER F. LEVIN 7194 REGIMENT DRIVE KATHERINE LEVIN SHAPIRO 111 W. 89TH STREET, APT GA JEAN LEVIN WYMAN 715 UPHAM PLACE NORTHWEST INNE LEVIN DELYONS 7720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00	0	0		
7194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO 111 W. 89TH STREET, APT GA TEAN LEVIN WYMAN 715 UPHAM PLACE NORTHWEST THINK LEVIN DELYONS 1720 CREEKWOOD LANE Compensation of five highest-paid en	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0	0 0 0 enter		
2194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO .11 W. 89TH STREET, APT GA TEAN LEVIN WYMAN .15 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS .720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 — see instru	0 0 uctions). If none,	0 0 enter (d) Contributions to employee benefit	(e) Expens	se account,
194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO 11 W. 89TH STREET, APT GA EAN LEVIN WYMAN 15 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	(
194 REGIMENT DRIVE ATHERINE LEVIN SHAPIRO 11 W. 89TH STREET, APT GA EAN LEVIN WYMAN 15 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0 0 uctions). If none,	0 0 enter (d) Contributions to employee benefit	(e) Expens	se account,
194 REGIMENT DRIVE ATHERINE LEVIN SHAPIRO 11 W. 89TH STREET, APT GA EAN LEVIN WYMAN 15 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,
194 REGIMENT DRIVE ATHERINE LEVIN SHAPIRO 11 W. 89TH STREET, APT GA EAN LEVIN WYMAN 15 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,
194 REGIMENT DRIVE ATHERINE LEVIN SHAPIRO 11 W. 89TH STREET, APT GA EAN LEVIN WYMAN 15 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,
194 REGIMENT DRIVE ATHERINE LEVIN SHAPIRO 11 W. 89TH STREET, APT GA EAN LEVIN WYMAN 15 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,
2194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO 211 W. 89TH STREET, APT GA EAN LEVIN WYMAN 25 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,
194 REGIMENT DRIVE ATHERINE LEVIN SHAPIRO 11 W. 89TH STREET, APT GA EAN LEVIN WYMAN 15 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 – see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,
2194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO 211 W. 89TH STREET, APT GA EAN LEVIN WYMAN 25 UPHAM PLACE NORTHWEST NNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 - see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,
7194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO .11 W. 89TH STREET, APT GA TEAN LEVIN WYMAN 715 UPHAM PLACE NORTHWEST LINE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 - see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,
7194 REGIMENT DRIVE CATHERINE LEVIN SHAPIRO .11 W. 89TH STREET, APT GA TEAN LEVIN WYMAN 715 UPHAM PLACE NORTHWEST LINNE LEVIN DELYONS 720 CREEKWOOD LANE Compensation of five highest-paid en "NONE."	OH 45244 NEW YORK NY 10024 VIENNA VA 22180 CINCINNATI OH 45237 nployees (other than those included	2.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 on line 1 - see instru	0 0 uctions). If none,	O O enter (d) Contributions to employee benefit plans and deferred	(e) Expens	se account,

Form 990-PF (2)	016) THE PETER AND MARY LEVIN FAMILY	20-3841581	Page 7
Part VIII	Information About Officers, Directors, Trustees, Founand Contractors (continued)	dation Managers, Highly Paid Er	
3, Five high	est-paid independent contractors for professional services (see instru	uctions). 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		
	four largest direct charitable activities during the tax year. Include relevant statistical information such their beneficianes served, conferences convened, research papers produced, etc.	ch as the number of	Expenses
1 N/A			
2		· · · · · · · · · · · · · · · · · · ·	
3			
4			
Part IX-B	Summary of Program-Related Investments (see instru	ortions\	
	pest program-related investments made by the foundation during the tax year on lines 1 and 2	icitoris)	Amount
1 N/A			
2			
· -	ated investments. See instructions	j	
3			
Total, Add lines 1	through 3		

	'art XIII Undistributed Income (s	<u>ee instructions)</u>				,
	•		(a)	(b)	(c)	(d)
1	 Distributable amount for 2016 from Part XI, 		Corpus	Years prior to 2015	2015	2016
	line 7			·	}	53,69
2	Undistributed income, if any, as of the end of	2016 [.]				
	Enter amount for 2015 only				 	· .+ · · · · · · · · · · · · · · · · · ·
_	Total for prior years. 20, 20					
3	Excess distributions carryover, if any, to 2016	•				
	a From 2011					
	From 2012	96,404				
	From 2013	209,522				
	From 2014	6,321				
	From 2015	231,859				
	Total of lines 3a through e		544,106			· · · · · · · · · · · · · · · · · · ·
4	Qualifying distributions for 2016 from Part XII,	j				
	line 4 ▶ \$ 122,550					
	Applied to 2015, but not more than line 2a	į				
Ь	Applied to undistributed income of prior years		1	1		
	(Election required – see instructions)					
С	Treated as distributions out of corpus (Election	ر (,	
	required – see instructions)					
	Applied to 2016 distributable amount					53,696
	Remaining amount distributed out of corpus	}	68,854			
5	Excess distributions carryover applied to 2016	, , , , , , , , , , , , , , , , , , ,				, , , , , , , , , , , , , , , , , , ,
	(If an amount appears in column (d), the same	,	1		1	
_	amount must be shown in column (a))		1			
6	Enter the net total of each column as		1			
	indicated below:	_	51.0.050		1	
	Corpus Add lines 3f, 4c, and 4e Subtract line	5	612,960			
D	Pnor years' undistributed income Subtract	ļ			1	
	line 4b from line 2b	}				
С	Enter the amount of prior years' undistributed				1	
	income for which a notice of deficiency has	1			1	
	been issued, or on which the section 4942(a)	1			1	
	tax has been previously assessed	1				
a	Subtract line 6c from line 6b. Taxable	j	1		1	
_	amount – see instructions	}				
е]	1		Ì	
	4a from line 2a. Taxable amount – see	1	İ		Į	
	instructions	ļ.	- h ' 	··· ·····		
T	Undistributed income for 2016. Subtract lines	[
	4d and 5 from line 1. This amount must be	į	I			•
-	distributed in 2017	-				0
7	Amounts treated as distributions out of corpus	[1	
	to satisfy requirements imposed by section	-			1	
	170(b)(1)(F) or 4942(g)(3) (Election may be				1	
	required—see instructions)					
8	Excess distributions carryover from 2011 not	f			1	
	applied on line 5 or line 7 (see instructions)	}				·
9	Excess distributions carryover to 2017.	1			1	
40	Subtract lines 7 and 8 from line 6a		612,960			
10	Analysis of line 9.	00.00	1		1	
a	Excess from 2012	96,404			1	
b	Excess from 2013	209,522			1	
C	Excess from 2014	6,321	1		1	
d	Excess from 2015	231,859			1	
_ <u>e</u> _	Excess from 2016	68,854	<u>_</u>			···

Part XV Supplementary Information (co	ntinued)			
3 Grants and Contributions Paid During the	Year or Approved for Fu	uture Payment	, 	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year INTERACT FOR CHANGE 3805 EDWARDS RD., STE 180 CINCINNATI OH 45209	NONE TO CONTINUE	501(C)(3) A DONOR-ADVI	SED FUND	122,550
Tabel				122 550
Total b Approved for future payment N/A			▶ 3a	122,550
Total			▶ 3h	

Analysis of Income-Producing Activities

Part XVI-A

Er	Enter gross amounts unless otherwise indicated.		Unrelated	d business income	Excluded	by section 512, 513, or 514	(0)		
	Dragge	ada rayanya	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)		
7	-	rvice revenue			++				
	a		 		++				
	·				 				
	ц 		 		+				
	u		 		 				
	f		 		 				
		nd contracts from government agencies			1				
2	-	dues and assessments	1		 				
	-	savings and temporary cash investments			14	32			
4		nd interest from securities			14	17,137			
-		come or (loss) from real estate.					·		
		anced property			1		 ,,		
		t-financed property			1				
6		come or (loss) from personal property			1				
	Other invest				14	4,540			
8	Gain or (loss	s) from sales of assets other than inventory			18	52,576			
		or (loss) from special events							
		or (loss) from sales of inventory							
11	Other reveni	ue a		_					
	b]				
	c								
	d				11				
	е				1				
12	Subtotal Ad	d columns (b), (d), and (e)		0		74,285			
		ne 12, columns (b), (d), and (e)				13	74,285		
		in line 13 instructions to venfy calculations.)		 					
	art XVI-B	Relationship of Activities to the Ac							
!	Line No.	Explain below how each activity for which income is							
	V N/A	accomplishment of the foundation's exempt purpose	es (other than by	providing funds for su	uch purpos	es) (See instructions)			
	N/A								
									
									
				- 					
						 			
									
									
_									
_									
_									
									
_									
									
									
									
_									
							200 27		

LAHLVAN	Exempt Organiz	_	ansiers io an	a iransactio	ns and Relations	uibs AAiri	n Nouchantable		
1. Did the c	organization directly or indi		e in any of the follo	wing with any oth	er organization describ	ed		Yes	No
ın sectior organiza	n 501(c) of the Code (othe	r than section	n 501(c)(3) organiz	zations) or in sect	ion 527, relating to poli	tical			
_	s from the reporting found	ation to a nor	nchantable exempt	t organization of					I
(1) Cash			·	-			<u>1a</u>	(1)	Х
(2) Othe	er assets						1a	(2)	X
b Other tra									!
	s of assets to a noncharita	-	=				<u>1b</u>		X
	hases of assets from a no			n			<u> 1b</u>		X
	al of facilities, equipment,		ets				1 <u>b</u>		X
	bursement arrangements	ř.					1 <u>1</u> 6		X
	is or loan guarantees ormance of services or me	mhamhin ar	fundraising enligits	ations			<u>1b</u> 1b		X
	of facilities, equipment, ma	•	_				10		X
_	wer to any of the above is	•			(b) should always sho	w the fair m	L		1_=_
	he goods, other assets, or								
	ny transaction or sharing								
(a) Line no	(b) Amount involved		e of nonchantable exem		T		ansactions, and sharing arrange	ments	
N/A									
		ļ			<u> </u>			<i></i>	
		<u> </u>		· · · · · · · · · · · · · · · · · · ·					
	_ 	ļ		 					
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· · · · · · · · · · · · · · · · · · ·		 		~ ~					
		<u> </u>		- ,					
·									
			·						
2a Is the four	ndation directly or indirectly	ly affiliated wi	th, or related to, or	ne or more tax-ex	empt organizations				
described	in section 501(c) of the C	ode (other th	an section 501(c)	(3)) or in section (527?			Yes X	No
b If "Yes," c	omplete the following scho	edule	,		, 				
	(a) Name of organization		(b) Type of o	organization		(c) Descript	tion of relationship		
N/A		}	·						
									
									
Under	penalties of perjury, I declare tha	t I have evamme	of this return, including	accompanyon schod	ules and statements and to the	he hest of my	rnowledge and helief it is to be		
correct	, and complete. Declaration of pr	reparer (other tha	an taxpayer) is based o	on all information of wh	nich preparer has any knowle	dge			
Sign		\mathcal{A}					May the IRS discuss the with the preparer shown		_
Here	1100	\mathcal{A}					(see instructions)?	Yes] No
	Inle	100		12	bulm 1	PRES	IDENT		
Si Si	gnature of officer or trustee		·····	Date		Title			
	/Type preparer's name			Preparer's signature			Date	7	$\overline{\Box}$
Ì	At a last change a second			open er a algrætur	-		Jaio	Check self-em	nployed
aid KEN	NETH B. PITCHER	t, CPA		KENNETH B	. PITCHER, CPA	A	02/24/1		,··u
reparer Frm	s name PITCH		DERS & DE				PTIN POOR		3
se Only		MONTGO		STE 325			Frm's EIN ▶ 27-09		
	CINCI	NNATI,	OH 4523	36			Phone no 513-5	54-4	600
 								990-PI	F (2016)

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Federal Statements

Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

Description							
	Revenue per Books		N	let Investment Income	Adjusted Net Income		
BROOKFIELD BUSINESS PTNRS LP			_		^		
BROOKFIELD INFRAST PTNRS LP	Ş	3	Ş	3	Ş		
BROOKFIELD PROPERTY PNTRS LP		3,307		3,307			
		1,230		1,230			
TOTAL	\$_	4,540	\$_	4,540	\$0		

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

_	•	
11000	rin	tiAn.
Desc		1110711

	 Total	_	Net Investment		Adjusted Net		Charitable Purpose
INDIRECT ACCOUNTING FEES							
	\$ 5,715	\$_	2,857	\$_		\$_	
TOTAL	\$ 5,715	\$_	2,857	\$	0	\$_	0

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description

		Total		Net Investment		Adjusted Net		Charitable Purpose
INDIRECT OTHER	PROFESSIONAL	FEES						
	\$	800) \$		\$_		\$_	
TOTAL	\$	800) \$	0	\$_	0	\$_	0

Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

Description

	 Total	-	Net Investment	Adjuste Net	ed	Charitable Purpose
FOREIGN INCOME TAXES						
	\$ 380	\$	380	\$		\$
STATE TAX EXPENSE	0.00		222			
	 200		200			
TOTAL	\$ 580	\$	580	\$	0	\$ 0

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Federal Statements

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses

									
			Total	_	Net Investment	_	Adjusted Net	Charitab Purpos	
EXPENSES		\$		\$		\$		\$	
MANAGEMENT	FEES								
CHARITABLE	CONSULTING	FEES	1,363 18,394		1,363				
TOTAL		\$	19,757	\$_	1,363	\$	0	\$	0

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description

	 Beginning of Year	 End of Year	Basis of Valuation		Fair Market Value
INVESTMENT IN EQUITIES					
THURSHADAR TALMIRUT DINOS	\$ 703,593	\$ 505,662	COST	\$	804,177
INVESTMENT IN MUTUAL FUNDS	 20,972	 58,432	COST	_	54,952
TOTAL	\$ 724,565	\$ 564,094		\$_	859,129

Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments

Description

_	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
INVEST IN WEYERHAEUSER CO.				
\$	22,942 \$	22,942	COST	\$ 25,577
INVEST IN BROOKFIELD PROP PTNR LP				
	29,381	29,381	COST	32,193
INVEST IN BROOKFIELD INFRAST PTNR		24 600	000m	05 604
INVEST IN BROOKFIELD RENEW PINR L	34,605	34,600	COST	95,624
THAEST IN DECOULTED REMEM SINK D	r	27,144	COST	26,678
PROCEEDS FROM UNSETTLED TRADES		27,133	0001	20,010
	17,153		COST	
ISHARES TR NASDQ BIOTEC	,			
-		23,813	COST	22,557
TOTAL \$	104,081 \$	137,880		\$ 202,629

PF, Part II, Line			
	22 - Othe	r Liabiliti	<u>es</u>
	!	End of Year	
\$		\$	4,480
\$	0	\$	4,480
lanagers Who C	ontribute	d Over 2	% or \$5,000
		Amour	nt
	\$_		
	\$		0
ne 2b - Applicati	on Form	at and Re	equired Contents
		_	
NDER INTERNAL			
, Line 2c - Subm	ission D	<u>eadlines</u>	
		_	
	of Yes Sample Sa	s 0 lanagers Who Contribute s ne 2b - Application Forma CATIONS FROM NDER INTERNAL REVENUE ION 509 (A) (1), (2) Line 2c - Submission De	of Year \$ \$ 0 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

Statement 10 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

IN AWARDING GRANTS, THE FOUNDATION SEEKS TO STRENGTHEN THE WORLD THROUGH SERVICES THAT WORK TO ELIMINATE SOCIAL AND CIVIL INJUSTICE, THEREBY PROVIDING INDIVIDUALS AND FAMILIES WITH DIGNITY, A BETTER QUALITY OF LIFE AND INCREASED ECONOMIC AND SOCIAL OPPORTUNITY. THE FOUNDATION SHALL CONSIDER SUPPORTING ORGANIZATIONS THAT ADVANCE THIS FOCUS AREA BY AFFECTING CHANGE IN PEOPLE'S ATTITUDES AND PUBLIC POLICY; INCREASING THE ABILITY OF PEOPLE TO FREELY EXPRESS THEIR BELIEFS; PROVIDING A SAFETY NET FOR DISADVANTAGED INDIVIDUALS; ACCESS TO EDUCATION AND THE ARTS; ACCESS TO HEALTH SERVICES; SUPPORTING THE JEWISH COMMUNITY; AND SUPPORTING OTHER COMMUNITIES OF INTEREST INCLUDING GREATER CINCINNATI, AND SCHOOLS, COLLEGES AND UNIVERSITIES CONNECTED TO THE LEVIN FAMILY.

The Peter & Mary Levin Family Foundation Short-term Gains & Losses December 31, 2016

Gain/Loss

Date Acquired	Date Sold	Quantity	Security	Proceeds	Cost Basis	Short Term
6/20/2016	6/28/2016	0.140	BROOKFIELD BUSINESS PARTNERS (BBU)	2 55	2 99	(0.44)
6/20/2016	10/6/2016	12 450	BROOKFIELD BUSINESS PARTNERS (BBU)	312.87	266 27	46 60
6/20/2016	10/6/2016	6 900	BROOKFIELD BUSINESS PARTNERS (BBU)	173 40	147.57	25 83
6/20/2016	10/6/2016	19 650	BROOKFIELD BUSINESS PARTNERS (BBU)	493 80	420 26	73.54
3/2/2016	11/9/2016	800.000	BROOKFIELD MTG OPP (BOIOLDD)	11,311.25	11,674 03	(362 78)
2/2/2016	11/9/2016	450 000	BROOKFIELD MTG OPP (BOIOLDD)	6,362 58	6,601 78	(239.20)
2/4/2016	11/9/2016	400 000	BROOKFIELD MTG OPP (BOIOLDD)	5,655.62	5,904 79	(249 17)
5/12/2016	10/21/2016	-3.000	CALL ANHEUSER BUSCH INBEV SA/ (03524A3LA4)	1,139 97	198.27	941 70
7/23/2015	4/13/2016	2,000 000	CHEUNG KONG PROPERTY HLDGS (CHKGF)	12,974.68	16,863 15	(3,888 47)
6/15/2016	10/18/2016	1,140.000	FANNIE MAE PFD NON-CUMULATIVE (FNMAS)	4,669 64	5,139 95	(470 31)
6/16/2016	10/21/2016	1,180 000	FEDERAL HOME LOAN MORTGAGE (FMCKJ)	4,709 94	5,365.97	(656 03)
12/23/2015	4/29/2016	90.000	GRAINGER W W INCORPORATED (GWW)	21,062 65	18,550 57	2,512 08
2/22/2016	7/14/2016	0 518	LIBERTY GLOBAL PLC (LILAK)	17 98	19 93	(1.95)
10/9/2015	4/26/2016	515 000	MSG NETWORK INCORPORATED CLASS (MSGN)	8,806 74	10,403 22	(1,596 48)
8/28/2015	4/29/2016	115.000	UNION PAC CORPORATION (UNP)	10,243 64	9,984.56	259 08
6/11/2015	4/29/2016	170 000	UNION PAC CORPORATION (UNP)	15,142.77	17,162.29	(2,019 52)
			Total Short Term Loss	103,080.08	108,705.60	(5,625 52)

The Peter & Mary Levin Family Foundation Long-term Gains & Losses December 31, 2016

Gain/Loss

Date Acquired	Date Sold	Quantity	Security	Proceeds	Cost Basis	Long Term
8/18/2010	4/29/2016	50 000	ANHEUSER BUSCH INBEV SA/NV (BUD)	6,223 92	2,686.53	3,537 39
8/18/2010	12/5/2016	275.000	ANHEUSER BUSCH INBEV SA/NV (BUD)	28,414 58	14,775 91	13,638.67
3/15/2011	12/5/2016	35.000	ANHEUSER BUSCH INBEV SA/NV (BUD)	3,616 40	1,948 44	1,667 96
10/16/2009	4/29/2016	260 000 1	BANK NEW YORK MELLON (BK)	10,483.28	7,121 87	3,361 41
2/17/2010	4/29/2016	140 000 1	BANK NEW YORK MELLON (BK)	5,644 85	3,891 52	1,753 33
2/12/2010	9/22/2016	0 500 (BROOKFIELD INFRAST PARTNERS LP (BIP)	16.69	5 54	11.15
6/4/2010	4/13/2016	1,000.000	CHEUNG KONG PROPERTY HLDGS (CHKGF)	6,487.34	4,285 64	2,201.70
6/4/2010	4/29/2016	1,000 000 (CK HUTCHISON HLDGS LIMITED SHS (CKHUF)	11,729 79	6,927 31	4,802 48
12/23/2014	11/15/2016	165 000 1	DIAGEO P L C SPON ADR NEW (DEO)	16,538 86	19,031 63	(2,492 77)
9/29/2014	11/15/2016	170 000 1	DIAGEO P L C SPON ADR NEW (DEO)	17,040 03	19,492 73	(2,452 70)
8/13/2014	2/2/2016	520.000 E	EBAY INCORPORATED (EBAY)	12,090.32	10,798 79	1,291.53
11/3/2014	2/24/2016	24 000 (GRAHAM HLDGS COMPANY (GHC)	11,669.27	11,715 97	(46.70)
1/23/2009	4/29/2016	550 000 1	MICROSOFT CORPORATION (MSFT)	27,491 98	9,504 77	17,987 21
4/23/2014	4/26/2016	410 000 1	MSG NETWORK INCORPORATED CLASS (MSGN)	7,011 19	5,808 86	1,202 33
10/13/2008	1/22/2016	610.000 f	NESTLE S A SPONSORED ADR (NSRGY)	43,187.81	23,097 18	20,090 63
7/17/2008	1/22/2016	95 000 f	NESTLE S A SPONSORED ADR (NSRGY)	6,725 97	4,153 41	2,572 56
9/21/2015	9/28/2016	155 000 7	TRIBUNE MEDIA COMPANY CLASS A (TRCO)	5,575 69	6,089 05	(513.36)
5/22/2015	9/28/2016	600 000 7	TRIBUNE MEDIA COMPANY CLASS A (TRCO)	21,583.34	33,567 83	(11,984 49)
			Total Long-term Gain	241,531.31	184,902.98	56,628 33