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For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation CENTIMARK FOUNDATION		A Employer identification number 20-8911858	
Number and street (or P O box number if mail is not delivered to street address) 12 GRANDVIEW CIRCLE		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code CANONSBURG, PA 15317		B Telephone number (see instructions) (724) 743-7747	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 208,275	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,550,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	397	397	397	
	4 Dividends and interest from securities . . .				
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 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 _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 Total. Add lines 1 through 11 . . . . .	1,550,397	397	397	
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	2,750			
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	63			
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	2,813	0		0
	25 Contributions, gifts, grants paid . . . . .	1,494,556			1,494,556
	26 Total expenses and disbursements. Add lines 24 and 25	1,497,369	0		1,494,556
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	53,028			
	b Net investment income (if negative, enter -0-)		397		
	c Adjusted net income (if negative, enter -0-) . . .			397	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	2,524	5,695	5,695
	2	Savings and temporary cash investments . . . . .	152,723	202,580	202,580
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule) . . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	155,247	208,275	208,275	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	155,247	208,275	
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	155,247	208,275		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	155,247	208,275		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	155,247
2	Enter amount from Part I, line 27a . . . . .	2	53,028
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	208,275
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	208,275

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b>			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	2	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	1,615,968	207,714	7 779774
2014	1,577,009	149,650	10 537982
2013	1,459,397	151,996	9 601549
2012	1,672,545	262,483	6 372013
2011	1,844,098	264,330	6 976499
<b>2 Total</b> of line 1, column (d)			<b>2</b> 41 267817
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 8 253563
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			<b>4</b> 296,849
<b>5</b> Multiply line 4 by line 3			<b>5</b> 2,450,062
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 4
<b>7</b> Add lines 5 and 6			<b>7</b> 2,450,066
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 1,494,556

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 instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	8
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	8
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	8
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	87
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	87
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . ▶	<b>10</b>	79
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> ▶ 79 <b>Refunded</b> ▶	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ PA _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>EDWARD B DUNLAP JR</u> Telephone no ► <u>(724) 743-7747</u>			

Located at ► 12 GRANDVIEW CIRCLE CANONSBURG PA ZIP+4 ► 15317

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . .	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year . . . . .	► <b>15</b>		
<b>16</b>	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	<b>16</b>	<b>Yes</b>	<b>No</b>
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►			

**Part 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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . .	<b>1b</b>		
	Organizations relying on a current notice regarding disaster assistance check here. . . . .			
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? . . . . .	<b>1c</b>		
<b>2</b>	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))			
<b>a</b>	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions) . . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b>	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or 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 the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (Continued)

<b>5a</b> During the year did the foundation pay or incur any amount to <b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> Organizations relying on a current notice regarding disaster assistance check here. <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<b>5b</b>		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes" to 6b, file Form 8870	<b>6b</b>		<b>No</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>7b</b>		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(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	Expense account, (e) other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**3 Five highest-paid independent contractors for professional services (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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> N/A	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
Total. Add lines 1 through 3 . . . . . ▶	



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	301,370
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	301,370
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	301,370
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	4,521
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	296,849
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	14,842

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	14,842
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	8
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	8
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	14,834
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	14,834
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	14,834

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	1,494,556
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	1,494,556
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,494,556

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				14,834
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . . 1,830,895				
<b>b</b> From 2012. . . . . 1,659,431				
<b>c</b> From 2013. . . . . 1,451,803				
<b>d</b> From 2014. . . . . 1,569,528				
<b>e</b> From 2015. . . . . 1,605,588				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	8,117,245			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 1,494,556				
<b>a</b> Applied to 2015, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2016 distributable amount. . . . .				14,834
<b>e</b> Remaining amount distributed out of corpus	1,479,722			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,596,967			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	1,830,895			
<b>9 Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a . . . . .	7,766,072			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . . 1,659,431				
<b>b</b> Excess from 2013. . . . . 1,451,803				
<b>c</b> Excess from 2014. . . . . 1,569,528				
<b>d</b> Excess from 2015. . . . . 1,605,588				
<b>e</b> Excess from 2016. . . . . 1,479,722				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	1,494,556
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .					397
<b>4</b> Dividends and interest from securities. . . .					
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .					
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). .					397
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .					397

(See worksheet in line 13 instructions to verify calculations )

Part XVI-B	Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

## Part XVII

- |       | Yes | No |
|-------|-----|----|
| 1a(1) |     | No |
| 1a(2) |     | No |
| 1b(1) |     | No |
| 1b(2) |     | No |
| 1b(3) |     | No |
| 1b(4) |     | No |
| 1b(5) |     | No |
| 1b(6) |     | No |
| 1c    |     | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

May the IRS discuss this return with the preparer shown below (see instr )? ☒ Yes ☐ No

Print/Type preparer's name  WARREN W KIJLING	Preparer's Signature	Date  2017-05-15	Check if self-employed <input type="checkbox"/>	PTIN  P00074045
Firm's name ▶ LEONARD F POLK & CO PC				Firm's EIN ▶ 23-2872380
Firm's address ▶ 650 WASHINGTON ROAD SUITE 407  PITTSBURGH, PA 15228				Phone no (412) 563-1141

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation <b>(If not paid, enter -0-)</b>	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
EDWARD B DUNLAP JR 12 GRANDVIEW CIRCLE CANONSBURG, PA 15317	TRUSTEE/PRES 1 00	0	0	0
TIMOTHY M DUNLAP 12 GRANDVIEW CIRCLE CANONSBURG, PA 15317	TRUSTEE/VP 0 50	0	0	0
THOR D DICESARE 12 GRANDVIEW CIRCLE CANONSBURG, PA 15317	SECRETARY 0 50	0	0	0
JOHN A RUDZIK 12 GRANDVIEW CIRCLE CANONSBURG, PA 15317	TRUSTEE/TRES 10 00	0	0	0
JOHN L HEISEY 12 GRANDVIEW CIRCLE CANONSBURG, PA 15317	TRUSTEE 0 50	0	0	0

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
A CHILD'S PLACE PA 1515 LOCUST STREET PITTSBURGH, PA 15219	N/A	PUBLIC	OPERATING EXPENSES	5,000
ALLEGHENY COUNTY CASA 564 FORBES AVE STE 1302 PITTSBURGH, PA 15219	N/A	PUBLIC	OPERATING EXPENSES	7,000
ANGEL'S PLACE 2538 WOODSTOCK AVENUE PITTSBURGH, PA 15218	N/A	PUBLIC	OPERATING EXPENSES	4,500
AUBERLE HOME 1101 HARTMAN STREET MCKEESPORT, PA 15132	N/A	PUBLIC	OPERATING EXPENSES	5,000
BEST OF THE BATCH FOUNDATION 2000 WEST STREET MUNHALL, PA 15120	N/A	PUBLIC	OPERATING EXPENSES	2,000
BLACKBURN CENTER PO BOX 398 GREENSBURG, PA 15601	N/A	PUBLIC	OPERATING EXPENSES	5,000
BOUNTIFUL BLESSINGS PO BOX 299 MECHANICSBURG, PA 17055	N/A	PUBLIC	OPERATING EXPENSES	5,000
CATHOLIC CHARITIES FREE HEALTH CARE 212 NINTH ST STE 301 PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000
CATHOLIC CHARITIES DIOCESE PGH 212 NINTH ST PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000
CATHOLIC HOSPICE 2605 NICKOLSON RD STE 3240 SEWICKLEY, PA 15143	N/A	PUBLIC	OPERATING EXPENSES	10,000
CHILDREN'S HOME & LEMIEUX FAMILY 5324 PENN AVENUE PITTSBURGH, PA 15224	N/A	PUBLIC	OPERATING EXPENSES	10,000
CHILDREN'S HOSPITAL OF PITTSBURGH 3420 FORBES AVE PITTSBURGH, PA 15213	N/A	PUBLIC	OPERATING EXPENSES	2,000
CHOICES PREGNANCY CENTERS 626 5TH AVENUE CORAOPOLIS, PA 15108	N/A	PUBLIC	OPERATING EXPENSES	10,000
CITY RESCUE MISSION OF NEW CASTLE 319 S CROTON AVE PO BOX 965 NEW CASTLE, PA 16103	N/A	PUBLIC	OPERATING EXPENSES	20,000
COMMUNITIES IN SCHOOLS OF PGH 6435 FRANKSTOWN AVE PITTSBURGH, PA 15206	N/A	PUBLIC	OPERATING EXPENSES	2,500
Total . . . . . ► 3a				1,494,556



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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY HUMAN SERVICES 2525 LIBERTY AVENUE PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	7,500
DHS DONATION FUND ONE SMITHFIELD ST PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000
EARLY LEARNING INSTITUTE 2510 BALDWICK ROAD PITTSBURGH, PA 15205	N/A	PUBLIC	OPERATING EXPENSES	5,000
EAST END COOPERATIVE MINISTRY 6140 STATION STREET PITTSBURGH, PA 15206	N/A	PUBLIC	OPERATING EXPENSES	5,000
EASTER SEALS 233 SOUTH WACKER DR STE 2400 CHICAGO, IL 60606	N/A	PUBLIC	OPERATING EXPENSES	1,000
ECHO-WASHINGTON HEALTH SYS 410 N MAIN ST WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	5,000
EIGHTH AVENUE PLACE 811 WEST ST PO BOX 161 HOMESTEAD, PA 15120	N/A	PUBLIC	OPERATING EXPENSES	2,500
EMMANUEL UNITED PRESBYTERIAN CHURCH 480 PA-519 EIGHTY FOUR, PA 15330	N/A	PUBLIC	OPERATING EXPENSES	500
FAITH IN ACTION 69 EAST BEAU STREET WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	5,000
FAMILY GUIDANCE 913 WESTERN AVENUE PITTSBURGH, PA 15233	N/A	PUBLIC	OPERATING EXPENSES	5,000
FAMILY HOSPICE AND PALLIATIVE CARE 50 MOFFET STREET PITTSBURGH, PA 15243	N/A	PUBLIC	OPERATING EXPENSES	5,000
FAMILY HOUSE 5001 BAUM BLVD STE 545 PITTSBURGH, PA 15213	N/A	PUBLIC	OPERATING EXPENSES	5,000
FAMILY PROMISE OF SOUTHWESTERN PA 297 EAST BEAU STREET WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	10,000
FAMILY SERVICES 3230 WILLIAM PITT WAY PITTSBURGH, PA 15238	N/A	PUBLIC	OPERATING EXPENSES	5,000
FIRST LOVE CHRISTIAN ACADEMY 150 SUNSET BLVD WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	9,500
<b>Total . . . . . ►</b>				1,494,556
<b>3a</b>				

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOCUS ON RENEWAL 701 CHARTIERS AVENUE MCKEES ROCKS, PA 15136	N/A	PUBLIC	OPERATING EXPENSES	10,000
GENESIS OF PITTSBURGH 550 CALIFORNIA AVENUE PITTSBURGH, PA 15202	N/A	PUBLIC	OPERATING EXPENSES	10,000
GIRLS HOPE 1005 BEAVER GRADE RD STE 103 CORAOPOLIS, PA 15108	N/A	PUBLIC	OPERATING EXPENSES	5,000
GREATER PGH COMMUNITY FOOD BANK 1 NORTH LINDEN STREET DUQUESNE, PA 15110	N/A	PUBLIC	OPERATING EXPENSES	5,000
GREATER WASHINGTON CNTY FOOD BANK 909 NATIONAL PIKE WEST BROWNSVILLE, PA 15417	N/A	PUBLIC	OPERATING EXPENSES	25,000
HEARTH 3724 MOUNT ROYAL BLVD GLENSHAW, PA 15116	N/A	PUBLIC	OPERATING EXPENSES	13,000
HOLY FAMILY 19 MAY AVENUE MCKEES ROCKS, PA 15136	N/A	PUBLIC	SNAP PROGRAM	1,500
HOLY FAMILY FOUNDATION 8235 OHIO RIVER BLVD PITTSBURGH, PA 15202	N/A	PUBLIC	OPERATING EXPENSES	3,000
HOMELESS CHILDREN'S EDUCATION FUND 2020 SMALLMAN STREET PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000
HOPE GROWS 183 SHAFER ROAD MOON TOWNSHIP, PA 15108	N/A	PUBLIC	OPERATING EXPENSES	10,000
JEREMIAH'S PLACE 6435 FRANKSTOWN AVENUE PITTSBURGH, PA 15206	N/A	PUBLIC	OPERATING EXPENSES	3,500
JOHN PAUL PLAZA 1005 HERRON AVENUE PITTSBURGH, PA 15219	N/A	PUBLIC	OPERATING EXPENSES	5,000
JUBILEE SOUP KITCHEN 2005 WYANDOTTE STREET PITTSBURGH, PA 15219	N/A	PUBLIC	OPERATING EXPENSES	15,000
KIDS VOICE 437 GRANT ST STE 700 PITTSBURGH, PA 15219	N/A	PUBLIC	OPERATING EXPENSES	2,500
KLEB'S KIDS 317 WOODSIDE DRIVE HARRISBURG, NC 28075	N/A	PUBLIC	OPERATING EXPENSES	1,000
<b>Total . . . . .</b> ► <b>3a</b>				1,494,556

Form 990FP 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
LEMOYNE COMMUNITY CENTER 200 FORREST AVE PO BOX 1241 WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	10,000
LIGHT OF LIFE MISSION 913 WESTERN AVENUE PITTSBURGH, PA 15233	N/A	PUBLIC	OPERATING EXPENSES	10,000
LITTLE SISTERS OF THE POOR 1028 BENTON AVENUE PITTSBURGH, PA 15212	N/A	PUBLIC	OPERATING EXPENSES	25,000
MCGUIRE MEMORIAL FOUNDATION 2119 MERCER RD PO BOX 48 NEW BRIGHTON, PA 15066	N/A	PUBLIC	OPERATING EXPENSES	1,500
MEALS ON WHEELS - PETERS TWP 245 E MCMURRAY ROAD MCMURRAY, PA 15317	N/A	PUBLIC	OPERATING EXPENSES	120,000
METRO PITTSBURGH YOUTH FOR CHRIST 6314 LIBRARY ROAD SOUTH PARK, PA 15129	N/A	PUBLIC	OPERATING EXPENSES	2,500
MICHAEL'S PLACE 501 NORTH NEGLEY DRIVE PITTSBURGH, PA 15206	N/A	PUBLIC	OPERATING EXPENSES	10,000
MS SOCIETY 1501 REEDSDALE ST STE 105 PITTSBURGH, PA 15233	N/A	PUBLIC	UTILITY ASSIST	1,000
NAZARETH HOUSING SERVICES 301 NAZARETH WAY PITTSBURGH, PA 15229	N/A	PUBLIC	OPERATING EXPENSES	10,000
NETWORK OF HOPE 2326 DUNCAN AVENUE ALLISON PARK, PA 15101	N/A	PUBLIC	OPERATING EXPENSES	1,000
NHS HUMAN SERVICES FOUNDATION 1996 EWINGS MILL ROAD CORAOPOLIS, PA 15108	N/A	PUBLIC	OPERATING EXPENSES	2,000
NHSALLEGHENY VALLEY SCHOOL 1996 EWINGS MILL ROAD CORAOPOLIS, PA 15108	N/A	PUBLIC	OPERATING EXPENSES	7,000
NOAH ANGELICI HOPE FOUNDATION 262 SCOTT LANE VENETIA, PA 15367	N/A	PUBLIC	OPERATING EXPENSES	5,000
NORTH HILLS COMMUNITY OUTREACH 1975 FERGUSON ROAD ALLISON PARK, PA 15101	N/A	PUBLIC	OPERATING EXPENSES	15,000
NORTH SIDE CHRISTIAN HEALTH CENTER 816 MIDDLE STREET PITTSBURGH, PA 15212	N/A	PUBLIC	OPERATING EXPENSES	5,000
Total . . . . . ►				1,494,556
3a				

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
OPERATION BACKPACK PO BOX 91 PRESTO, PA 15142	N/A	PUBLIC	OPERATING EXPENSES	1,000
OUR LADY OF THE ANGELS FOOD PANTRY 225 37TH STREET PITTSBURGH, PA 15201	N/A	PUBLIC	OPERATING EXPENSES	2,500
OUTDOOR ODYSSEY 450 BOY SCOUT ROAD BOSWELL, PA 15531	N/A	PUBLIC	OPERATING EXPENSES	10,000
PA WOMEN WORK 650 SMITHFIELD ST STE 520 PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	1,000
PENNIES FROM HEAVEN 4401 PENN AVE FL 3 PITTSBURGH, PA 15224	N/A	PUBLIC	OPERATING EXPENSES	5,000
PITTSBURGH HIRES VETERANS 1333 BANKSVILLE ROAD PITTSBURGH, PA 15216	N/A	PUBLIC	OPERATING EXPENSES	10,000
PLYMOUTH UNITED METHODIST CHURCH 970 PLYMOUTH ROAD ASHTABULA, OH 44004	N/A	PUBLIC	OPERATING EXPENSES	1,000
PREGNANCY RESOURCE CTR - JONESBORO 1000 S CARAWAY STE 112 JONESBORO, AR 72401	N/A	PUBLIC	OPERATING EXPENSES	5,000
PREGNANCY RESOURCE CENTER OF SH 101 DRAKE ROAD STE A PITTSBURGH, PA 15241	N/A	PUBLIC	OPERATING EXPENSES	15,000
SALVATION ARMY 700 NORTH BELL AVE PO BOX 742 CARNEGIE, PA 15106	N/A	PUBLIC	PROJECT BUNDLE UP	2,500
RED DOOR - ST MARYS PITTSBURGH 202 STANWIX STREET PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000
RONALD MCDONALD HOUSE OF PGH 451 44TH STREET PITTSBURGH, PA 15201	N/A	PUBLIC	OPERATING EXPENSES	5,000
SACRED HEART CONFERENCE 508 WEST PHILADELPHIA RD JONESBORO, AR 72401	N/A	PUBLIC	OPERATING EXPENSES	5,000
SCHOOL SISTERS OF ST FRANCIS 934 FOREST AVENUE PITTSBURGH, PA 15202	N/A	PUBLIC	OPERATING EXPENSES	5,000
SHEPHERD'S HEART FELLOWSHIP 13 PRIDE STREET PITTSBURGH, PA 15219	N/A	PUBLIC	OPERATING EXPENSES	7,500
Total . . . . . ►				1,494,556
3a				

Form 990FP 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)					
a Paid during the year					
SISTER'S PLACE 418 MITCHELL AVENUE CLAIRTON, PA 15025	N/A	PUBLIC	OPERATING EXPENSES	6,000	
SISTERS OF ST FRANCIS 146 HAWTHORNE ROAD PITTSBURGH, PA 15209	N/A	PUBLIC	OPERATING EXPENSES	10,000	
SISTERS OF ST JOSEPH 1020 STATE STREET BADEN, PA 15005	N/A	PUBLIC	OPERATING EXPENSES	5,000	
SOUTH HILLS INTERFAITH MINISTRIES 5301 PARK AVENUE BETHEL PARK, PA 15102	N/A	PUBLIC	OPERATING EXPENSES	20,000	
SOUTHWINDS 2101 GREENTREE RD STE A201 PITTSBURGH, PA 15220	N/A	PUBLIC	OPERATING EXPENSES	20,000	
ST THOMAS MORE PARISH 126 FORT COUCH ROAD PITTSBURGH, PA 15241	N/A	PUBLIC	OPERATING EXPENSES	276,000	
ST VINCENT DE PAUL SOCIETY 219 WEST LINCOLN AVENUE MCDONALD, PA 15057	N/A	PUBLIC	OPERATING EXPENSES	324,039	
ST VINCENT DE PAUL SOCIETY 1243 N FRANKLIN STREET PITTSBURGH, PA 15233	N/A	PUBLIC	OPERATING EXPENSES	1,000	
STO-ROX NEIGHBORHOOD HEALTH COUNCIL 710 THOMPSON AVENUE MCKEES ROCKS, PA 15136	N/A	PUBLIC	OPERATING EXPENSES	7,500	
THE 412 YOUTH ZONE-AUBERLE 304 WOOD ST 6TH FL PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000	
THE CHILDREN'S INSTITUTE 1405 SHADY AVENUE PITTSBURGH, PA 15217	N/A	PUBLIC	OPERATING EXPENSES	5,000	
THE EDUCATIONAL PARTNERSHIP 281 CORLISS DRIVE PITTSBURGH, PA 15220	N/A	PUBLIC	OPERATING EXPENSES	74,517	
THE INTERSECTION 115 7TH STREET MCKEESPORT, PA 15132	N/A	PUBLIC	OPERATING EXPENSES	10,000	
THE SALVATION ARMY 700 NORTH BELL AVE PO BOX 742 CARNEGIE, PA 15106	N/A	PUBLIC	OPERATING EXPENSES	5,000	
THE VETERANS BREAKFAST CLUB 200 MAGNOLIA PLACE PITTSBURGH, PA 15228	N/A	PUBLIC	OPERATING EXPENSES	5,000	
Total . . . . . ►				1,494,556	
3a					

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE WATCHFUL SHEPHERD 1061 WATERDAM PLAZA DR STE 204 MCMURRAY, PA 15317	N/A	PUBLIC	OPERATING EXPENSES	5,000
TRAVELERS AID 343 BOULEVARD OF THE ALLI PITTSBURGH, PA 15222	N/A	PUBLIC	MOBILE MOMS PROGRAM	5,000
WARD HOME 2275 SWALLOW HILL RD BLDG 800 PITTSBURGH, PA 15220	N/A	PUBLIC	OPERATING EXPENSES	1,000
WASHINGTON CHRISTIAN OUTREACH 119 HIGHLAND AVENUE WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	46,000
WASHINGTON CITY MISSION 382 WEST CHESTNUT ST STE 108 WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	30,000
WASHINGTON COUNTY ADVISORY BOARD 1061 WATERDAM PLAZA DR STE 204 MCMURRAY, PA 15317	N/A	PUBLIC	OPERATING EXPENSES	1,000
WASHINGTON COUNTY CASA 30 EAST BEAU STREET WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	5,000
WASHINGTON CTY HABITAT FOR HUMANITY 1001 EAST MAIDEN STREET WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	1,000
WASHINGTON COUNTY LITERACY COUNCIL 351 MONTGOMERY AVE PO BOX 1584 WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	2,500
WASHINGTON WOMEN'S SHELTER INC 308 E MAIDEN STREET WASHINGTON, PA 15301	N/A	PUBLIC	OPERATING EXPENSES	5,000
WOMEN'S CHOICE NETWORK PO BOX 15034 PITTSBURGH, PA 15237	N/A	PUBLIC	OPERATING EXPENSES	10,000
WOMENS CENTER & SHELTER OF PGH PO BOX 9024 PITTSBURGH, PA 15224	N/A	PUBLIC	OPERATING EXPENSES	5,000
WORKING ORDERVOLUNTEERS OF AMERICA 1650 MAIN STREET SHARPSBURG, PA 15215	N/A	PUBLIC	OPERATING EXPENSES	5,000
YWCA 305 WOOD STREET PITTSBURGH, PA 15222	N/A	PUBLIC	OPERATING EXPENSES	5,000
Total . . . . . ► 3a				1,494,556

**TY 2016 Accounting Fees Schedule****Name:** CENTIMARK FOUNDATION**EIN:** 20-8911858

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
TAX PREPARATION FEE	2,750			

**TY 2016 Other Expenses Schedule****Name:** CENTIMARK FOUNDATION**EIN:** 20-8911858**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK SERVICE CHARGES	63			



<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF</b> ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.</b>	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> CENTIMARK FOUNDATION	<b>Employer identification number</b> 20-8911858

**Organization type** (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ 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.

☐ 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, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> CENTIMARK FOUNDATION	<b>Employer identification number</b> 20-8911858
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<b>Part I</b> <b>Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CENTIMARK CORPORATION 12 GRANDVIEW CIRCLE CANONSBURG, PA15317	\$ 1,550,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

Employer identification number

20-8911858

Part II	Noncash Property
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[illegible]

<b>Name of organization</b> CENTIMARK FOUNDATION	<b>Employer identification number</b> 20-8911858
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<b>Part III</b>	<b>Exclusively</b> religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	