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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491135024077

OMB No 1545-0052

2016

Return of Private Foundation

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

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

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginning 01-01-2	016 , a	nd er	nding 12-31-	2016	
		Indation EN FAMILY FOUNDATION			' '	entification numbe	r
					26-1629635		
		d street (or P O box number if mail is not delivered to street address RDEN CIRCLE	s) Room/suite		B Telephone nu	mber (see instructioi	ns)
					(513) 821-1436		
		n, state or province, country, and ZIP or foreign postal code I, OH 452152025			C If exemption	application is pendin	g, check here
G Cł	neck al	Il that apply 🔲 Initial return 🔲 Initial return of a	a former public charity	,	D 1. Foreign or	ganızatıons, check he	ere . \square
		☐ Final return ☐ Amended return	١			ganizations meeting	
		\square Address change \square Name change]	k here and attach co	—
H C	neck ty	/pe of organization $oxedsymbol{oxtime}$ Section 501(c)(3) exempt private	foundation			ındatıon status was t n 507(b)(1)(A), chec	
	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxabl	e private foundation				
of	year <i>(f</i>	ket value of all assets at end from Part II, col (c), \$ 242,162 J Accounting method Other (specify) (Part I, column (d) mus	✓ Cash ☐ Accru	ual		ition is in a 60-montl n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total		Τ			(d) Disbursements
		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	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	(0			
	2	Check ► ✓ If the foundation is not required to attach					
	_	Sch B					
	3 4	Interest on savings and temporary cash investments Dividends and interest from securities	8,092	2	8,092		
	5a	Gross rents	0,092	-	0,032		
	ь	Net rental income or (loss)		+			
e	6a	Net gain or (loss) from sale of assets not on line 10	140,921	1			
3	ь	Gross sales price for all assets on line 6a		+			
Revenue	_	182,34	8	+	110.021		
ш	7 8	Capital gain net income (from Part IV, line 2)		+	140,921		
	9	Income modifications		+			
	10a	Gross sales less returns and allowances		+			
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	149,014	4	149,014		
	13	Compensation of officers, directors, trustees, etc	(0	0		0
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits		1			
ens	16a	Legal fees (attach schedule)	46.1				_
and Administrative Expenses	b	Accounting fees (attach schedule)	1,275		1,275		0
Ve	_ c	Other professional fees (attach schedule)	150	<u> </u>	150		0
rati	17	Interest	100		100		0
JI St	18 19	Taxes (attach schedule) (see instructions)	100	`	100		-
Ē	20	Occupancy		+			
Ad	21	Travel, conferences, and meetings	3,986	6	3,986		0
<u>n</u>	22	Printing and publications			-,		
	23	Other expenses (attach schedule)	295	5	295		0
atır	24	Total operating and administrative expenses.		+			
Operating		Add lines 13 through 23	5,806	6	5,806		0
0	25	Contributions, gifts, grants paid	41,903	3			41,903
	26	Total expenses and disbursements. Add lines 24 and 25	47,709	9	5,806		41,903
	27	Subtract line 26 from line 12		1	*		
	a	Excess of revenue over expenses and disbursements	101,305	5			
	ь	Net investment income (If negative, enter -0-)		+	143,208		
	С	Adjusted net income(if negative, enter -0-)		1	·		
For	Paper	work Reduction Act Notice, see instructions.	1		Cat No 11289×	For	m 990-PF (2016)

222.679

223,663

223,663

223,663

223,663

2 3

4

5

6

258,593 101,305

359,898

136,235

223,663 Form **990-PF** (2016)

258,593

258,593

258,593

241,178

242,162

Less allowance for doubtful accounts ▶ 5 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) ▶ ____ 7 Less allowance for doubtful accounts ▶ 8 Assets Investments—U S and state government obligations (attach schedule) 10a 150,364 b C

Investments—land, buildings, and equipment basis ▶ 11 Less accumulated depreciation (attach schedule) 12 107,324 13 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶ Other assets (describe > _ 15 Total assets (to be completed by all filers—see the 16 instructions Also, see page 1, item I) 258.593

Accounts payable and accrued expenses

Foundations that follow SFAS 117, check here

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

Foundations that do not follow SFAS 117, check here ▶

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

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Other liabilities (describe -_

Temporarily restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶ .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize)

Permanently restricted . . .

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

17

18

19 20

21

22

23

24

25

28

29

31

Part III

2

3

4

Liabilities

Balances

Fund 26

ō

Assets 27

Net 30 (a)

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

7 Add lines 5 and 6

instructions

List and describe to 2-story brick ware	cquired rchase onation	Date acquired (mo , day, yr)	Date sold (mo , day, yr)		
1a See Additional Data Table	e				
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sa		Gain o	h) r (loss)) minus (g)
a See Additional Data Table	e				
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation on 12/31,	/69	(1)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col(i) over col(j), if ar		Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a See Additional Data Table	e				
b					
С					
d					
e					
If gain, also enter in Pa in Part I, line 8	or (net capital loss) gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0-	}	3 come	140,921
For optional use by domestic p	rivate foundations subject to the sec	tion 4940(a) tax on net investm	ent income	≘)	
f "Yes," the foundation does no	eave this part blank e section 4942 tax on the distributa ot qualify under section 4940(e) Do nount in each column for each year,	not complete this part			es 🗹 No
(a)	•	_		(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse		Distribution rat (col (b) divided by c	ol (c))
2015	24,391	139,			0 175181
2014	20,447	112,			0 182525
2013	17,089	102,	_		0 166218
2012	11,991	110,			0 108681
2011	12,225	96,			0 127174
2 Total of line 1, column (o	·				0 759779
number of years the four	ofor the 5-year base period—divide idation has been in existence if less	than 5 years	. 3		0 151956
	ncharitable-use assets for 2016 fron	n Part X, line 5	. 4		254,810
5 Multiply line 4 by line 3			. 5		38.720

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

1,432

40,152

41,903

6 7

8

5a During the year did the foundation pay or incur any amount to

Page **6**

	(1) Carry on propaganda, or otherw(2) Influence the outcome of any sp	pecific public election (see sect	cion 4955), or to carry	☐ Yes ✓	No		
	on, directly or indirectly, any void (3) Provide a grant to an individual	=		· · Yes 🛂	No		
	(4) Provide a grant to an individual	**		∐ Yes ⊻	No		
	ın section 4945(d)(4)(A)? (see ii		· •		No		
	(5) Provide for any purpose other th						
	educational purposes, or for the			∟ Yes 💌	No		
D	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a					ь	
	Organizations relying on a current n	• •	•	•		-	
С	If the answer is "Yes" to question 5a						
	tax because it maintained expenditu			· · □ Yes □	No		
	If "Yes," attach the statement requir	red by Regulations section 53	4945-5(d)	□ les □	10		
6а	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premit	ıms on			
	a personal benefit contract?			· 🗌 Yes 🗸			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?	6	ь	No
7 _	If "Yes" to 6b, file Form 8870	- 4b - 5-, , , d-4, , , , , , , , , , , , , , , , , , ,					
7a h	At any time during the tax year, was If yes, did the foundation receive an			∟ tes 💌		ь	
		Officers, Directors, Trust					
Pa	and Contractors	incers, Directors, Trust	ices, roundation ric	magers, mgmy raid Er	прюус	-3,	
1	List all officers, directors, trustee	es, foundation managers an	nd 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		pense ac her allow	
See /	Additional Data Table	(B) devoted to position		compensation			
2	Compensation of five highest-pai	d employees (other than th	hose included on line 1	L—see instructions). If no	ne, ente	r "NONE	."
Na	(a) ame and address of each employee pa more than \$50,000	Title, and average hours per week	(c) Compensation	Contributions to employee benefit plans and deferred		ense acc er allowa	,
IONI	· '	(-,		(d) compensation			
ION	<u> </u>						
	I number of allers are also as						_
ota	I number of other employees paid over	er \$50,000			Fa 4	000 PF	(2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highland Contractors (continued)	y Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, e	nter "NONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<u> </u>
T-1-1	
Total number of others receiving over \$50,000 for professional services	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the nu	umber of Evpanses
organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A	0
2	
3	
4	
Part TV P. Summary of Program Polated Investments (see instructions)	
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
1 N/A	0
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0
	Form 990-PF (2016)

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

b

2

3

4

5

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

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

1a

1b

2

За 3b

4

5

41,903

41.903

1.432

40.471

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Page 9

11.309

11.309

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Form 9	90-PF	(2	016
Par	t XIII		

c From 2013. . .

XII, line 4 > \$

d From 2014.

e From 2015.

0-PF (20	016)
XIII	Undistributed Income (see instructions)

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. **b** Total for prior years

Excess distributions carryover, if any, to 2016 From 2011. **b** From 2012.

7,419 6,490 (a)

Corpus

58,132

30.594 0

88.726

7.419

81.307

(b)

Years prior to 2015

(c)

2015

11.948 14,846 17,429

f Total of lines 3a through e.

4 Qualifying distributions for 2016 from Part

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

6.490 11,948

14.846

17,429

30.594

same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below:

required—see instructions). d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

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

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

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. .

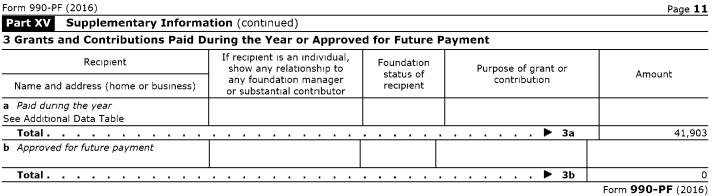
b Excess from 2013. .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not



er gross	amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function incom (See instruction:
a						
g Fees a	and contracts from government agencies rship dues and assessments.					
ınvest	st on savings and temporary cash ments			14	1	
	ds and interest from securities			14	8,092	
	tal income or (loss) from real estate financed property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
	r (loss) from sales of assets other than					
ınvent	ory			18	140,921	
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
	evenue a					
d						
d e Subtota Total. A worksh	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio	ns)		13	149,014	
d e Subtota Total. / worksh	Add columns (b), (d), and (e)	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
d e Subtota Total. / worksh rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
d e Subtota Total. / worksh rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
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d e Subtota Total. / worksh rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
d e Subtota Total. / e worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
d e Subtota Total. / worksh rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
d e Subtota Total. / worksh rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
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d e Subtota Total. / e worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
d e Subtota Total. / e worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
d e Subtota Total. / e worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain.	ins) le Accomplishi Income is reporte	ment of Exempled in column (e) of	ot Purposes Part XVI-A contribut	ed importantly to	
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Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII	Exempt Organia	zations							
		directly engage i				tion described in section al organizations?	501	Yes	No
a Transfers f	from the reporting foun	dation to a nonch	naritable exe	empt organizatio	n of				
(1) Cash.							1a(1)		No
(2) Other	assets						1a(2)		No
b Other tran	sactions								
	of assets to a nonchari		•				. 1b(1)		No
(2) Purch	ases of assets from a n	oncharitable exe	mpt organiz	ation			. 1b(2)		No
` '	al of facilities, equipmen	•					. 1b(3)		No
	bursement arrangemen						1b(4)		No
	or loan guarantees.						1b(5)		No
• •		•	_				1b(6)		No
_							1c		No
						always show the fair mai ved less than fair market			
						sets, or services received			
(a) Line No	(b) Amount involved	(c) Name of none	haritable even	nnt organization I	(d) Description	of transfers, transactions, ar	nd charing arra	ngomon	ntc.
(a) Line No	(b) Amount involved	(C) Name of Hono	mantable exem	iipt organization	(d) Description	or transfers, transactions, ar	iu silaring arra	ngemen	LS
	ndation directly or indire	•		*				□	
	in section 501(c) of the	·	n section 50	1(c)(3)) or in sec	ction 527?		. ∐Yes	✓ N	0
b If "Yes," co	omplete the following so		1 0	> =	1	(-) D			
	(a) Name of organization	on	()) Type of organizat	ion	(c) Description of	relationship		
						ying schedules and state			
	y knowledge and belief h preparer has any kno		ct, and comp	olete Declaration	of preparer (other	er than taxpayer) is base	ed on all info	rmation	ı of
Jigii	******	Wieuge		2017-05-12	\ *****	May	the IRS discu	ss this r	eturn
Here 1				2017-05-12			the preparer		
 	Signature of officer or ti	rustee	ĺ	Date	Title	(see	e instr)? 🗹 🕻	es 🗆 N	10
I	Print/Type preserve	name D	narer's Cir-	ature	D-+				
	Print/Type preparer's	manne Pre	parer's Sign	iatui e	Date	Check if self-			
	IVUDT MARDTV CDA				2017-05-12	employed ▶ □	P00226	5317	
Paid	KURT MARTY CPA								
Preparer	Firm's name ► MOW	/RY MARTY BAIN	CONSULTIN	IGIIC	1				
Use Only			COMPORTIN			Firi	m's EIN ▶47	-18274	169
,		40 GLENDALE-M	ILFORD RD S	STE 130					
		NCINNATI OH 4	15242			Pho	one no (513) 873-	1284
	1	CINCINNATI, OH 45242							

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation P&G 139 SHARES D 2016-02-02 2015-06-12 D P&G 1,750 SHARES 2015-06-12 2016-05-11 Р VANGUARD SHORT TERM BON ETF 2011-01-21 2016-04-13 VANGUARD SHORT TERM BON ETF Р 2012-04-24 2016-04-13 VANGUARD SHORT TERM BON ETF Ρ 2013-02-04 2016-04-13 Ρ VANGUARD SHORT TERM BON ETF 2013-04-04 2016-08-09 Р VANGUARD SHORT TERM BON ETF 2014-05-06 2016-08-09 Р CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (f) (g) plus expense of sale (h) (e) plus (f) minus (g) 11,043 948 10.095 143,482 11,935 131,547 3.975 4,033 -58 9.938 10.245 -307 1,988 2,041 -53 8,738 8,980 -242 3,177 3.245 -68 7 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (k) over col (j), if any (j) as of 12/31/69 10,095 131,547 -58 -307 -53 -242 -68 7

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, (e) other allowances hours per week not paid, enter Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation MARY R JENSEN PRESIDENT/DIRECTOR 1.00 1244 GARDEN CIRCLE CINCINNATI, OH 452152025 J MICHAEL JENSEN SECRETARY/TREASURER/DIRECT 1 00 1244 GARDEN CIRCLE CINCINNATI, OH 452152025 KATHRYN K 1ENSEN DIRECTOR 0 10 1244 GARDEN CIRCLE CINCINNATI, OH 452152025 CASSANDRA L JENSEN DIRECTOR 0 10 1316 SOUTH 9TH STREET ST LOUIS, MO 63104 J PATRICK JENSEN DIRECTOR 0 10 1244 GARDEN CIRCLE CINCINNATI, OH 452152025 SUSAN M JENSEN DIRECTOR

0 10

1718 S 9TH STREET APT 1C ST LOUIS, MO 63104

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

MARY R JENSEN

J MICHAEL JENSEN

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **BIG BROTHERS BIG SISTERS** NONE 501(C)(3) TO PROVIDE SUPPORT FOR 62 10831 OLD MILL ROAD SUITE 400 YOUTH OMAHA, NE 68154 CINCINNATI ART MUSEUM NONE PROMOTION OF THE FINE ARTS 150 501(C)(3) 953 EDEN PARK DRIVE CINCINNATI, OH 452021557 CINCINNATI CHILDREN'S HOME NONE 501(C)(3) TO SUPPORT HOMELESS 500 5050 MADISON RD CHILDREN IN CINCINNATI CINCINNATI, OH 45227 NONE 550 501(C)(3) TO SUPPORT THE EFFORT TO CLEAN LAKE ALLIANCE VERX PLAZA 150 E GILMAN ST 2600 MAINTAIN THE LAKES IN THE REGION MADISON, WI 53703 IMPACT 100 WOMEN TOGETHER NONE 501(C)(3) PROMOTION OF CHARITABLE 1,100 CHANGING LIVES **ENDEAVORS** 4010 EXECUTIVE PARK DRIVE CINCINNATI, OH 45241 JUVENILE DIABETES RELIEF FUND FUND NONE 501(C)(3) TO SUPPORT MEDICAL 7,500 A CURE - HARRISBURG RESEARCH FOR JUVENILE 717 MARKET ST STE 108 **DIABETES** LEMOYNE, PA 17043 JUVENILE DIABETES RELIEF FUND GALA NONE 501(C)(3) TO SUPPORT MEDICAL 2,220 AUCTION OVER VALUE RESEARCH FOR JUVENILE 8050 HOSBROOK RD STE 314 **DIABETES** CINCINNATI, OH 45236 NONE TO SUPPORT MEDICAL JUVENILE DIABETES RELIEF FUND GALA 501(C)(3) 3,900 SPONSOR RESEARCH FOR JUVENILE 8050 HOSBROOK RD STE 314 DIABETES CINCINNATI, OH 45236 JUVENILE DIABETES RELIEF FUND WALK NONE 501(C)(3) TO SUPPORT MEDICAL 250 DONATION - HARRISBURG RESEARCH FOR JUVENILE 717 MARKET ST STE 108 **DIABETES** LEMOYNE, PA 17043 JUVENILE DIABETES RELIEF FUND NONE TO SUPPORT MEDICAL 115 501(C)(3) 8041 HOSBROOK ROAD RESEARCH FOR JUVENILE CINCINNATI, OH 45236 DIABETES MADISON MUSEUM OF CONTEMPORARY NONE TO SUPPORT CONTEMPORARY 65 501(C)(3) ART ART 227 STATE STREET MADISON, WI 53703 MEDICAL STUDENTS FOR CHOICE NONE 501(C)(3) **EDUCATIONAL ENDEAVORS** 20 PO BOX 40935 PHILADELPHIA, PA 19107 MISCELLANEOUS CHARITIES NONE TO SUPPORT CHARITABLE 101 501(C)(3) VARIOUS LOCATIONS **ENDEAVORS** CINCINNATI, OH 45202 NONE TO SUPPORT MEDICAL 1,000 NATIONAL PSORIASIS FOUNDATION 501(C)(3) 6600 SW 92ND AVE SUITE 300 RESEARCH FOR PSORIASIS AND PORTLAND, OR 97223 **PSORIASIS ARTHRITIS**

501(C)(3)

SUPPORT PUBLIC SPACES

50

41,903

OLBRICH GARDEN 3330 ATWOOD AVE

MADISON, WI 53704

Total . 3a NONE

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year OUT OF THE DARKNESS SUICIDE NONE 501(C)(3) TO SUPPORT THOSE COMBATING 200 SUICIDE PREVENTION 440 FIRST STREET NW SUITE 300 WASHINGTON, DC 20001 PLANNED PARENTHOOD NONE TO PROMOTE WOMEN'S HEALTH 500 501(C)(3) 4251 FOREST PARK AVE **ISSUES** ST LOUIS, MO 63108 ST LOUIS CHILDREN'S HOSPITAL NONE TO SUPPORT CHILDRENS 2,500 501(C)(3) **FOUNDATION** HEALTH RESEARCH ONE CHILDRENS PLACE ST LOUIS, MO 63110 NONE SUPPORT OF RELIGIOUS 400 ST JAMES OF THE VALLEY CATHOLIC 501(C)(3) CHURCH **ENDEAVORS** 411 SPRINGFIELD PIKE CINCINNATI, OH 45215 NONE 501(C)(3) 145 TOYS FOR TOTSYMCA OF GTR TO PROVIDE GIFTS FOR NEEDY CINCINNATI CHILDREN AT CHRISTMAS TIME 1425B LINN STREET CINCINNATI, OH 45214 UNIVERSITY OF NEBRASKA NONE 501(C)(3) PROMOTION OF UNIVERSITY 500 **FOUNDATION EDUCATION AND LEARNING** 000 500 METHODIST CHURCH **ENDEAVORS 80E MCMICKEN AVE** CINCINNATI, OH 45202 501(C)(3) WISCONSIN HISTORICAL SOCIETY NONE PRESERVATION OF HISTORY 250 816 STATE STREET MADISON, WI 537260050 WISCONSIN PUBLIC RADIO NONE 501(C)(3) SUPPORT PUBLIC 25 821 UNIVERSITY AVE BROADCASTING MADISON, WI 53706 NONE 50 WYOMING FIRE ASSOCIATION 501(C)(3) PROMOTION OF COMMUNITY **600 GROVE AVENUE** FIRE PROTECTION CINCINNATI, OH 45215 WYOMING POLICE ASSOCIATION NONE 501(C)(3) PROMOTION OF COMMUNITY 50 POLICE PROTECTION 800 OAK AVENUE CINCINNATI, OH 45215 WYOMING SCHOOL FOUNDATION NONE 501(C)(3) EDUCATIONAL ENDEAVORS 1,050 420 SPRINGFIELD PIKE

501(C)(3)

EDUCATIONAL ENDEAVORS FOR

YOUTH

150

41,903

1010 LINCOLN MALL 300 LINCOLN, NE 68508				
UNIVERSITY OF WISCONSIN 1848 UNIVERSITY AVE MADISON, WI 537264090	NONE	501(C)(3)	EDUCATIONAL ENDEAVORS	1,0
WESLEY CHAPEL MISSION - UNITED	NONE	501(C)(3)	SUPPORT OF RELIGIOUS	17,5

CINCINNATI, OH 45215 WYOMING YOUTH SERVICES

CINCINNATI, OH 45215

800 OAK AVENUE

Total .

3a

NONE

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data -		DI	N: 93491135024077			
TY 2016 Accounting Fe	ees Sche	dule						
		THE JENSEN 26-1629635	FAMILY FOUND	PATION				
Category	Amo	ount Ne	et Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

1,275

1,275

MOWRY, MARTY & BAIN CONSULTING, LLC

DLN: 93491135024077

Name: THE JENSEN FAMILY FOUNDATION **EIN:** 26-1629635

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

PROCTER & GAMBLE COMPANY, 1889 SHARES

Name of Stock	End of Year Book Value	End of Year Fair Market Value
· · · · · · · · · · · · · · · · · · ·		l

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135024077

TY 2016 Investments - Other Schedule

Name: THE JENSEN FAMILY FOUNDATION

FTN: 26-1629635

EIN: 26-1629635				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
FIRST TRUST VALUE LINE DIV INDX FUND, 1000 SHARES	AT COST	26,220	28,030	
FT PREF SECURITY & INC ETF, 1000 SHARES	AT COST	19,144	18,990	
GUGGENHEIM S&P PURE VALUE ETF, 500 SHARES	AT COST	25,699	28,795	
ISHARES CORE US AGGREGATE, 275 SHARES	AT COST	30,796	29,717	
ISHARES IBOXX \$ INVT GRADE	AT COST	36,987	37,498	
VANGUARD BD INDEX FD INC SHORT TERM BOND ETF, 120 SHARES	AT COST	9,735	9,534	
VANGUARD BD INDEX FD INC SHORT TERM BOND ETF, 125 SHARES	AT COST	0	0	
VANGUARD BD INDEX FD INC SHORT TERM BOND ETF, 135 SHARES	AT COST	0	0	
VANGUARD BD INDEX FD INC SHORT TERM BOND ETF, 50 SHARES	AT COST	0	0	
VANGUARD SHORT TERM INVESTMENT GRADE FUND, 722.476 SHARES	AT COST	7,906	7,839	
VANGUARD TOTAL BOND MKT FUND, 500 SHARES	AT COST	41,880	40,395	
WISDOMTREE EQUITY INCOME FUND, INC., 600 SHARES	AT COST	24,312	40,380	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135024077				
TY 2016 Other Decreases Schedule						
Name:	THE JENSEN FAMILY FOUNDATION					
EIN:	26-1629635					
De	escription	Amount				
INVESTMENT ASSETS BOOK VALUE ADJU	JSTMENT	136,235				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491135024077		
TY 2016 Other Expenses Schedule						
Name:	THE JENSEN FA	MILY FOUNDATIO	N			
EIN:	26-1629635					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ANNUAL MEETING DINNER	295	295		0		

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491135024077		
TY 2016 Other Professional Fees Schedule						
Nai	Name: THE JENSEN FAMILY FOUNDATION					
=	IN: 26-1629635	•				
	:IN: 20-1029033					
Category	Amount	Net Investment	Adjusted Net	Disbursements		
		Income	Income	for Charitable		
				Purposes		
<u> </u>				 		
UBS FINANCIAL SERVICES INC ANNUAL FEE	150	150		0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135024077			
TY 2016 Substantial Contributors Schedule					
Name: THE JENSEN FAMILY FOUNDATION EIN: 26-1629635					
Name		Address			
MARY R JENSEN		1244 GARDEN CIRCLE CINCINNATI, OH 452152025			
J MICHAEL JENSEN		1244 GARDEN CIRCLE CINCINNATI, OH 452152025			

efile GRAPHIC print - DO NOT PROCESS As Filed Data -			DLI	N: 93491135024077		
TY 2016 Taxes Schedule						
Name: THE JENSEN FAMILY FOUNDATION EIN: 26-1629635						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
OHIO REGISTRATION FEES	100	100		0		