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2016

OMB No 1545-0052

Return of Private Foundation

Form 990-PF Department of the Treasury Internal Revenue Service

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

or	caler	ndar year 2016, or tax year beginning 01-01-20)16 , ar	ıd er	iding 12-31-	2016	
	e of fou FOUNI	indation			A Employer Ide	entification numbe	er
1*11	FOUND	JA110N			31-1195114		
		d street (or P O box number if mail is not delivered to street address) NDUSKY STREET No L	Room/suite		B Telephone nu	mber (see ınstructio	ns)
_	OII SAI	ADOSKI STREET NO E			(419) 872-7300)	
		, state or province, country, and ZIP or foreign postal code G, OH 43551	•		C If exemption	application is pendir	ng, check here
							- ▶ ∟
CI	neck al		former public charity		-	ganızatıons, check h	▶ ∟
		☐ Final return ☐ Amended return				rganizations meeting k here and attach co	
1 (a a al c tru	Address change ☐ Name change pe of organization ☑ Section 501(c)(3) exempt private in	foundation			undation status was	
_	•	1 4947(a)(1) nonexempt charitable trust Other taxable			under sectio	n 507(b)(1)(A), che	ck here
			☑ Cash ☐ Accru	al	F If the founda	ation is in a 60-mont	h termination
		from Part II, col (c), St. 198,464			under section	n 507(b)(1)(B), ched	ck here 🕨 🗀
,,,,,	10)	(Part I, column (d) must	be on cash basıs)				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes
	1	Contributions, gifts, grants, etc , received (attach	1				(cash basis only
	*	schedule)					
	2	Check \blacktriangleright $lacksquare$ if the foundation is not required to attach					
	3	Sch B Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	4,132		4,132		
	5a	Gross rents					
	ь	Net rental income or (loss)					
ĸ	6a	Net gain or (loss) from sale of assets not on line 10	24,646				
Revenue	b	Gross sales price for all assets on line 6a 204,740					
ž	7	Capital gain net income (from Part IV, line 2)			24,646		
	8	Net short-term capital gain					
	10a	Gross sales less returns and allowances					
	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	28,778		28,778		
	13	Compensation of officers, directors, trustees, etc	0		0		
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits					
ē	16a b	Accounting fees (attach schedule)	9 1,650		0		
Ĕ	°	Other professional fees (attach schedule)	1,168		1,168		
Operating and Administrative Expenses	17	Interest	-/-90		-,-30		
tra t	18	Taxes (attach schedule) (see instructions)	236		3		
<u>=</u>	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
D D	21	Travel, conferences, and meetings					
E	22	Printing and publications					
Ē	23	Other expenses (attach schedule)	568		0		
erat	24	Total operating and administrative expenses.	3.533		a a		
ă	25	Add lines 13 through 23	3,622 61,301		1,171		61,30
	26	Total expenses and disbursements. Add lines 24 and	01,301				01,30
		25	64,923		1,171		61,30
	27	Subtract line 26 from line 12			· · · · ·		
	a	Excess of revenue over expenses and disbursements	-36,145				
	ь	Net investment income (If negative, enter -0-)			27,607		
	С	Adjusted net income(If negative, enter -0-)					

199,231

199.231

199,231

163,086

163,086

163.086 163,086

2

3

4

5

6

199,231

-36,145

163,086

163,086

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0

198,464

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis -

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

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

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

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

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

12

13

14

15 16

17 18

19

20 21

22

23

24

25

26

28 29

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Net 30

Part IV Capital Gains	and Losses for Tax on Inves	tment Income				r age 5
	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(mo	(c) acquired , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED SECU	20:	16-01-01	2016-06-30			
b PUBLICLY TRADED SECU	RITIES		Р	20:	15-01-01	2016-06-30
c CORPORATE BONDS			Р	20:	15-01-01	2016-06-30
d CORPORATE BONDS			Р	20:	16-01-01	2016-06-30
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basıs ense of sale		(h) Gain or (loss) (e) plus (f) minus (g)	
a	59,203		58,7	_		424
	75,531		48,9			26,554
c	15,000		47,2	247		-2,247
d	25,006		25,0	091		-85
e						
Complete only for asset	s showing gain in column (h) and ov	vned by the foundation	on 12/31/69			1)
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col(ı) (յ), ıf any		(k), but not	h) gain minus less than -0-) or om col (h))
a						424
b						26,554
с						-2,247
d						-85
e						
-	gain or (loss) as defined in sections art I, line 8, column (c) (see instruct	ions) If (loss), enter -0	·	3		24,646
Part V Qualification	Under Section 4940(e) for R	educed Tax on Net	Investment	Income		
(For optional use by domestic p	private foundations subject to the se	ection 4940(a) tax on ne	t investment ind	come)		
If "Yes," the foundation does n	eave this part blank ne section 4942 tax on the distributa ot qualify under section 4940(e) Do nount in each column for each year,	not complete this part	·		☐ Y	es 🔽 No
(a)	l	, see mstructions before	: making any em	liles	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions				Distribution rat b) divided by c	ol (c))
2015 2014	60,726 28,468		287,463 306,730			0 211248 0 092811
2014	28,468		306,730			0 178410
2013	56,508		359,582			0 157149
2011	101,379		408,085			0 248426
2 Total of line 1, column (2		0 888044
3 Average distribution ration number of years the four 4 Enter the net value of no	o for the 5-year base period—divide indation has been in existence if less incharitable-use assets for 2016 from	the total on line 2 by 5, than 5 years	, or by the	3 4		0 177609 242,016
5 Multiply line 4 by line 3				5		42,984
	ent income (1% of Part I, line 27b)			6		276
				7		43,260
	ions from Part XII, line 4 ,			8		61,301
If line 8 is equal to or gr instructions	eater than line 7, check the box in P	art VI, line 1b, and com	iplete that part i	using a 1%		
					Fo	orm 990-PF (2016)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (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		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form 990-PF (2016)

1a

1b

2

За 3b

4

5

61,301

61.301

61,025

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276

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

Page 9

11.825

11.825

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0

Form 990-PF (2	016
Part XIII	Ī

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

XII, line 4 🕨 \$

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. c From 2013. . .

81,573 **d** From 2014.

56,508 42.872 e From 2015.

13,596 46.979 f Total of lines 3a through e. 4 Qualifying distributions for 2016 from Part

(a)

Corpus

241,528

49,476

81,573

209,431

0

(b)

Years prior to 2015

(c)

2015

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

> 56.508 42,872

> 13.596

46.979

49,476

indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 291.004 **b** Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed

f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017

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

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by

section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . . 9 Excess distributions carryover to 2017.

Subtract lines 7 and 8 from line 6a

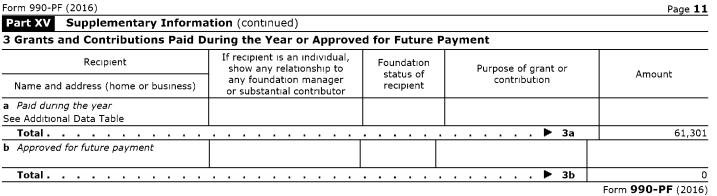
10 Analysis of line 9 a Excess from 2012. .

b Excess from 2013. .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .



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Part XVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a b					
c					
d					
e f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
4 Dividends and interest from securities			14	4,132	
5 Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
Inventory			18	24,646	
9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
d					
e 12 Subtotal Add columns (b), (d), and (e)		0		20.770	
13 Total. Add line 12, columns (b), (d), and (e)				28,778 3	0 28,778
(See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the				·	
Explain below how each activity for which the accomplishment of the foundation's explainstructions)	ıncome ıs reporte	d ın column (e) o	f Part XVI-A contribi		
				Fo	rm 990-PF (2016)

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

			Exempt Organi	zations											
			ization directly or in le (other than sectio									on 501		Yes	No
а	Transfe	rs fror	n the reporting foun	dation to a n	oncha	ırıtable ex	empt organizat	ion (of			Ī			
	(1) Ca	ash										. [1a(1)		No
	(2) Otl) Other assets										1a(2)		No	
b	Other tr	transactions													
) Sales of assets to a noncharitable exempt organization										1b(1)		No	
	(2) Pu	ırchase	es of assets from a n	oncharitable	exem	pt organiz	ration						1b(2)		No
	(3) Re	ental of	f facılıtıes, equipmer	nt, or other a	ssets.								1b(3)		No
	(4) Re	eımbur	sement arrangemen	ts									1b(4)		No
	(5) Lo	ans or	loan guarantees.					•				.	1b(5)		No
	(6) Per	forma	nce of services or m	embership or	fund	raising sol	icitations	•				.	1b(6)		No
	_		ilities, equipment, n			· ·							1 c		No
			to any of the above other assets, or ser												
			otner assets, or ser ction or sharing arra										=		
	,			,			,		3 ,		,				
(a)	Line No	(b) Amount involved	(c) Name of	noncha	arıtable exe	mpt organization	_	(d) Descript	tion of	transfers, transactions	, and shar	ıng arrar	ngemen	its
								_							
								+							
								+							
		-						+							
								+							
								+							
								+							
								+							
2a	Is the fo	oundat	tion directly or indire	ectly affiliated	d with	, or relate	d to, one or me	ore t	ax-exempt o	organı	zations	_	_	_	
	describe	ed in s	ection 501(c) of the	Code (other	than	section 50	01(c)(3)) or in :	secti	on 527?			∟	Yes	✓ N	0
b	If "Yes,'	" com	olete the following so	chedule		_									
		(a) Name of organization	n		(1	כ) Type of organı	zatio	n		(c) Description	of relation	nship		
	111	Inder n	enalties of perjury,	I declare that	t I hav	Ve evamin	ed this return	ınclı	udina accom	nanvu	na echedulee and et	tatement	c and t	o the	hect
			nowledge and belief												
Sig	ın 🗆 w	hich p	reparer has any kno	wledge							_				
	re	***	***				2017-09-09		****	**		May the IR			
		Siar	nature of officer or ti	rustee			Date		— P 			with the pr (see instr)	· —		
		Jigi	lature or officer of the	usiee .			Date		7 11616			(see Instri)/ <u>V</u> Y	es 🗆 N	10
		P	rınt/Type preparer's	name	Prep	arer's Sıgr	nature		Date			PTIN			
						J					Check if self-		P00054	N81	
		CATHERINE A SHEETS					2017.00	00	employed ▶ 📙	'	00054	001			
Pa	id		CATHERINE A SHEETS				20			2017-09-09					
Pr	epare	er ြ	rm's name ▶ PLAN	ITE & MORAN	l PLLC	<u> </u>			I			F 1 ==	N F 30	10577	
Us	e On											Fırm's EI	N ►38-	13579	751
		Fi	rm's address 🕨 34	34 Granite C	ırcle										
			To	ledo OH 43	61711	160						Phone no	(419)	843-6	6000
Toledo, OH 436171160															

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	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
1000 FRIENDS OF FLORIDA PO BOX 5948 TALLAHASSEE, FL 32314			CHARITABLE CONTRIBUTIONS	300				
AUGSBURG COLLEGE 2211 RIVERSIDE AVENUE SOUTH MINNEAPOLIS, MN 55454			CHARITABLE CONTRIBUTIONS	2,500				
BARBARA BUSH FOUNDATION 516 NORTH ADAMS STREET TALLAHASSEE, FL 32301			CHARITABLE CONTRIBUTIONS	100				
BOYS & GIRLS CLUB OF MARTIN COUNTY PO BOX 910 HOBE SOUND, FL 33475			CHARITABLE CONTRIBUTIONS	1,000				
CATO INSTITUTE 1000 MASSACHUSETTS AVE NW WASHINGTON, DC 20001			CHARITABLE CONTRIBUTIONS	100				

Total . . 3a 61,301

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 COMMEMORATIVE AIR FORCE CHARITABLE CONTRIBUTIONS

100

250

1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

MERRIFIELD, VA 22116			
EVANS SCHOLARS FOUNDATION ONE BRIAR ROAD		CHARITABLE CONTRIBUTIONS	

DO BOY 1380

3a

NE BRIAR ROAD OLF, IL 60029			
LORIDA ATLANTIC UNIVERSITY 77 GLADES ROAD		CHARITABLE CONTRIBUTIONS	

FLORIDA ATLANTIC UNIVERSITY 777 GLADES ROAD BOCA RATON, FL 33431		CHARITABLE CONTRIBUTIONS	
CORT MEICS ASSOCIATION DO DOV 3		CHARTTARIE CONTRIBUTIONS	

BOCA RATON, FL 33431			
FORT MEIGS ASSOCIATION PO BOX 3 PERRYSBURG, OH 43552		CHARITABLE CONTRIBUTIONS	

FORT MEIGS ASSOCIATION PO BOX 3 PERRYSBURG, OH 43552		CHARITABLE CONTRIBUTIONS	200
FREEDOM INSTITUTE 515 MADISON AVENUE		CHARITABLE CONTRIBUTIONS	2,000

PERRISBURG, UH 43552			
FREEDOM INSTITUTE 515 MADISON AVENUE NEW YORK, NY 10022		CHARITABLE CONTRIBUTIONS	2,

Total		 	61.301
515 MADISON AVENUE NEW YORK, NY 10022			
LKEEDOM INSTITUTE	i '	CHARITABLE CONTRIBUTIONS	i Z

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	ger recipient		
a Paid during the year				
FUND FOR AMERICAN STUDIES 1706 NEW HAMPSHIRE AVENUE NW WASHINGTON, DC 20009			CHARITABLE CONTRIBUTIONS	250
GEORGE W BUSH PRESIDENTIAL CENTER PO BOX 560887 DALLAS, TX 75356			CHARITABLE CONTRIBUTIONS	50
GUARDIANS OF MARTIN COUNTY PO BOX 1488 HOBE SOUND, FL 33475			CHARITABLE CONTRIBUTIONS	100
HARBOR INC PO BOX 112 HARBOR SPRINGS, MI 49740			CHARITABLE CONTRIBUTIONS	100
HAYES PRESIDENTIAL CENTER SPIEGEL GROVE			CHARITABLE CONTRIBUTIONS	2,500

FREMONT, OH 43420

Total . . 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, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HAZELDEN BETTY FORD FOUNDATION CHARITABLE CONTRIBUTIONS 5,000 1375 ST ANTHONY AVE SUITE 200 ST PAUL, MN 55104 HENRY FORD CHARITABLE CONTRIBUTIONS 5,000 20900 OAKWOOD BOULEVARD

DEARBORN, MI 48124			
HILLSDALE COLLEGE 33 EAST COLLEGE STREET HILLSDALE, MI 49242		CHARITABLE CONTRIBUTIONS	100
HOBE SOUND COMMUNITY CHEST PO BOX 511 HOBE SOUND, FL 33475		CHARITABLE CONTRIBUTIONS	5,000
IMAGINATION STATION		CHARITABLE CONTRIBUTIONS	1,000

HOBE SOUND COMMUNITY CHEST PO BOX 511 HOBE SOUND, FL 33475		CHARITABLE CONTRIBUTIONS	5,0
IMAGINATION STATION 1 DISCOVERY WAY		CHARITABLE CONTRIBUTIONS	1,0

TOLEDO, OH 43604 Total . 61,301

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Amount Recipient show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year INSTITUTE FOR ETHNO MEDICINE CHARITABLE CONTRIBUTIONS 6,000 3214 NORTH UNIVERSITY AVENUE 316 PROVO. UT 84604 100 JUNIOR ACHIEVEMENT OF CHARITABLE CONTRIBUTIONS NORTHWESTERN OHIO 2239 CHEYENNE BOULEVARD TOLEDO, OH 43614

,			
JUPITER ISLAND MEDICAL CLINIC 100 ESTRADA SQUARE HOBE SOUND, FL 33455		CHARITABLE CONTRIBUTIONS	3,500
JUPITER MEDICAL CENTER FOUNDATION 1210 SOUTH OLD DIXIE HIGHWAY JUPITER, FL 33458		CHARITABLE CONTRIBUTIONS	3,000
LEADERSHIP INSTITUTE		CHARITABLE CONTRIBUTIONS	100

1101 NORTH HIGHLAND STREET

ARLINGTON, VA 22201

Total . 3a

61,301

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MALTZ JUPITER THEATRE 1001 EAST INDIANTOWN ROAD JUPITER, FL 33477			CHARITABLE CONTRIBUTIONS	1,001
MARTIN MEMORIAL FOUNDATION PO BOX 9010 STUART, FL 34995			CHARITABLE CONTRIBUTIONS	1,000
MCLAREN NORTHERN MICHIGAN FOUNDATION 360 CONNABLE AVENUE PETOSKEY, MI 49770			CHARITABLE CONTRIBUTIONS	1,000
MEDIA RESEARCH CENTER 325 S PATRICK STREET ALEXANDRIA, VA 22314			CHARITABLE CONTRIBUTIONS	100
MEMORIAL SLOAN-KETTERING PO BOX 5028 HAGERSTOWN, MD 21741			CHARITABLE CONTRIBUTIONS	200

Total . .

3а

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 REAGAN RANCH PO BOX 2699 CHARITABLE CONTRIBUTIONS 50 SANTA BARBARA, CA 93120 SALVATION ARMY OF MARTIN COUNTY CHARITABLE CONTRIBUTIONS 100 PO BOX 718

STUART, FL 34995			
ST CHRISTOPHER CATHOLIC CHURCH 12001 SE FEDERAL HIGHWAY HOBE SOUND, FL 33455		CHARITABLE CONTRIBUTIONS	5,000
TOLEDO MUSEUM OF ART PO BOX 1013 TOLEDO, OH 43697		CHARITABLE CONTRIBUTIONS	11,000
	The state of the s		

HOBE SOUND, FL 33455			
TOLEDO MUSEUM OF ART PO BOX 1013 TOLEDO, OH 43697		CHARITABLE CONTRIBUTIONS	11,0
UNITED WAY OF GREATER TOLEDO		CHARITABLE CONTRIBUTIONS	2,00

TOLEDO MUSEUM OF ART PO BOX 1013 TOLEDO, OH 43697		CHARITABLE CONTRIBUTIONS	11,
UNITED WAY OF GREATER TOLEDO		CHARITABLE CONTRIBUTIONS	2,

TOLEDO, OH 43697			,
UNITED WAY OF GREATER TOLEDO 424 JACKSON STREET		CHARITABLE CONTRIBUTIONS	2,
TOLEDO OLL 43604			

UNITED WAY OF GREATER TOLEDO 424 JACKSON STREET TOLEDO, OH 43604		CHARITABLE CONTRIBUTIONS	2,000

424 JACKSON STREET TOLEDO, OH 43604		,
Total	 	 61,301

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)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

3а

a Paid during the year			
UNIVERSITY OF PITTSBURGH UPMC CANCER PAVILLION 5150 CENTRE AVENUE SUITE 1B PITTSBURGH PA 15332		CHARITABLE CONTRIBUTIONS	500

Total. 61,301

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491297002127						
TY 2016 Accounting Fees Schedule						
	Name:	MB FOUN	NDATION			
	EIN: 31-1195114					
Catagony	Amo		Net Investment	Adjusted Not	Disbursements	
Category	Aillo	unt	Income	Adjusted Net Income	for Charitable	
					Purposes	
ACCOUNTING FEES		1,650	0		0	

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TV 2046 Investments Comparate Bands Cabadula								
TY 2016 Investments Corporate Bonds Schedule								
Name: 1	MB FOUNDATION							

EIN: 31-1195114				
Name of Bond	End of Year Book Value	End of Year Fair Market Value		
CORPORATE BONDS	100,573	100,738		

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TY 2016 Investments Corporate Stock Schedule							
Name:	MB FOUNDATION						

EIN: 31-1195114				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
COMMON STOCK	59,452	94,665		

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TY 2016 Other Expenses Schedule						
- -						
Name:	MB FOUNDATIO	N				
EIN:	31-1195114					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
STATE OF OHIO FILING FEE	100	0		0		
BANK CHARGES	210	0		0		
MISCELLANEOUS	258	0		0		

Category	Amount	Net Investment	Adjusted Net	Dishursements			
EIN: 31-1195114							
Name: MB FOUNDATION							
TY 2016 Other Professional Fees Schedule							
efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491297002127			

EIM: 21-1132114						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

1,168

MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DL	N: 93491297002127		
TY 2016 Taxes Schedule						
Nam	e: MB FOUNDA	TION				
EI	N: 31-1195114					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES	3	3		0		

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FEDERAL TAXES