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2016

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury

Form 990-PF

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 Inspection

J W	of fou				-2016					
		ndation I & MARY STRAKER CHARITABLE FDN		A Employer id	lentification numbe	r				
		N HOLDREN		31-1396841	31-1396841					
		street (or P O box number if mail is not delivered to street address) TARY ROAD	Room/suite	B Telephone nu	ımber (see ınstructio	ns)				
				(740) 453-222	0					
		, state or province, country, and ZIP or foreign postal code , OH 43701		C If exemption	application is pendin	g, check here				
G Che	eck all	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity	D 1. Foreign of	rganizations, check h	ere . \square				
		☐ Final return ☐ Amended return			rganizations meeting					
		\square Address change \square Name change			ck here and attach co	· —				
I Che	eck ty	pe of organization $lacksquare$ Section 501(c)(3) exempt private	foundation		undation status was t on 507(b)(1)(A), chec					
□ se	ection	4947(a)(1) nonexempt charitable trust Other taxable	private foundation							
		rom Part II col (c)	☐ Cash ☑ Accru		ation is in a 60-montl on 507(b)(1)(B), chec					
line	16)▶	\$ 2,972,517	be on cash basis)							
Par	t I	Analysis of Revenue and Expenses (The total	(-) P		1	(d) Disbursements				
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investment income	(c) Adjusted net	for charitable purposes				
		equal the amounts in column (a) (see instructions))	books			(cash basis only)				
	1	Contributions, gifts, grants, etc , received (attach schedule)	80,000							
	2	Check ▶ ☐ If the foundation is not required to attach								
		Sch B								
	3	Interest on savings and temporary cash investments	153							
	4	Dividends and interest from securities	24,791	24,791						
	5a b	Gross rents								
<u>e</u>	Б 6а	Net gain or (loss) from sale of assets not on line 10	39,909							
<u> </u>	b		·							
Revenue	7	Gross sales price for all assets on line 6a 59,943 Capital gain net income (from Part IV, line 2)		39,909						
<u>.</u>	8	Net short-term capital gain		,						
	9	Income modifications								
:	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)	10,969	10,969						
	12	Total. Add lines 1 through 11	155,822	75,822						
	13	Compensation of officers, directors, trustees, etc	25,000	C)	12,500				
	14	Other employee salaries and wages								
es	15	Pension plans, employee benefits	5,321	C		2,661				
en l	16a	Legal fees (attach schedule)	31,040			31,040				
and Administrative Expenses	b	Accounting fees (attach schedule)	5,550	C)	5,550				
- Ke	С	Other professional fees (attach schedule)								
la t i	17 10	Interest	00-1 2.550			1 400				
<u> </u>	18	Taxes (attach schedule) (see instructions)	3,558	C		1,409				
<u> </u>	19	Depreciation (attach schedule) and depletion	6,759			0				
A C	20	Occupancy	11,441	C						
ַ בַ	21 22	Travel, conferences, and meetings	3,764		1	3,764				
6 g	23	Other expenses (attach schedule)	18,336	10,482		0				
=	24	Total operating and administrative expenses.								
ا <u>ه</u> ز		Add lines 13 through 23	110,769	10,482		56,924				
ŏ	25	Contributions, gifts, grants paid	41,090		1	41,090				
	26	Total expenses and disbursements. Add lines 24 and								
\dashv	27	Subtract line 26 from line 12	151,859	10,482	!	98,014				
	27 a	Subtract line 26 from line 12 Excess of revenue over expenses and	3,963							
		disbursements	3,303							
	b	Net investment income (if negative, enter -0-)		65,340						
	С	Adjusted net income(If negative, enter -0-)								

2,441,059

-442,004

1,999,055

1,999,055

2,441,059

-438,041

2,003,018

2,003,018

2

3

4

5

6

1,999,055

2,003,018

2,003,018 Form 990-PF (2016)

3,963

n

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that 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

20

21 22

23

24

25

28

29

30

31

Part III

2 3

Balances

Fund 26

5

Assets 27

Net

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) -

instructions

	(a) the kınd(s) of property sold (e g , re shouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table	2				
b					
с					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
a See Additional Data Table	` '			() / (, (3)
b					
С					
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		(k) s of col (ı)	Gains (Col (col (k), but not	h) gain minus less than -0-) or
<u> </u>	as of 12/31/69	over co	l (j), if any	Losses (fr	om col (h))
a See Additional Data Table	9				
b					
С					
d					
е					
	or (net capital loss) Jain or (loss) as defined in sections : rt I, line 8, column (c) (see instructions :		·	3	39,909
Part V Qualification U	Inder Section 4940(e) for Re	duced Tax on Net	Investment In	come	
if section 4940(d)(2) applies, le Was the foundation liable for th	e section 4942 tax on the distributal	ble amount of any year	r in the base period?	·	es 🗹 No
·	ot qualify under section 4940(e) Do nount in each column for each year,			•	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rat (col (b) divided by c	
2015	157,957		2,138,567	•	0 073861
2014	152,233		2,311,586		0 065857
2013	101,801		2,132,057		0 047748
2012	101,283		1,904,432		0 053183
2011	95,311		1,816,511		0 052469
2 Total of line 1, column (d	d)		2		0 293118
number of years the four	for the 5-year base period—divide dation has been in existence if less	than 5 years 🔒 🐍	´ ´ <u>3</u>		0 058624
	ncharitable-use assets for 2016 from	•	4		1,963,683
5 Multiply line 4 by line 3	(10) (5)		5		115,119
	ent income (1% of Part I, line 27b)		6		653
			7		115,772
	ons from Part XII, line 4 , . . eater than line 7, check the box in Pa			l g a 1% tax rate Se	98,014 e the Part VI

	If "Yes," attach the statement requir	ed b	y Regulations section 53	4945-5(d)					
6 a	Did the foundation, during the year,	rece	eive any funds, directly or	indirectly, to pay premiu	ims on				
	a personal benefit contract?				· 🗌 Yes 🗸				
b	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal bei	nefit contract?	NO	6b		No
	If "Yes" to 6b, file Form 8870					Ī			
7a	At any time during the tax year, was	the	foundation a party to a p	rohibited tax shelter tran	nsaction? Yes				
b	If yes, did the foundation receive an				∟ Yes 💌	No	7b		
	Information About O		· · · · · · · · · · · · · · · · · · ·		nagers, Highly Paid Er	nplov	vees.		
Pa	and Contractors		,,		g, g ,		, ,		
1	List all officers, directors, trustee	s. f	oundation managers an	d their compensation	(see instructions).				
	List all officers, affectors, trastee	<i>5</i> ,			(d)				
	(a) Name and address		Title, and average hours per week	(c) Compensation (If not paid, enter	Contributions to employee			se acc	
	(a) mame and address	(b) devoted to position	-0-)	benefit plans and deferred	(e)	other	allowa	nces
	Addıtıonal Data Table		-	-	compensation	1			
see	Additional Data Table								
2	Compensation of five highest-pai	d er	nployees (other than th	ose included on line 1		ne, er	nter "l	NONE.	
	(a)		Title, and average		Contributions to				
Na	ame and address of each employee pa	ıd	hours per week	(c) Compensation	employee benefit plans and deferred			e acco allowar	
	more than \$50,000		(b) devoted to position		(d) compensation	(0)		anomai	1000
NON	E								
			1						
			1						
			1						
Tota	I number of other employees paid over	r¢	50,000	1					
OLA	in number of other employees paid over	н фС		· · · · · · · · ·		Г	004)-PF (2016
						For	пээ	,-PF	/U15

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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	uced, etc	
1		
		
2		
2		
2		
3		
		
4		
4		
Part IX-B Summary of Program-Related Investments (see	<u> </u>	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	Amount
1		
2		+
2		
All other program-related investments. See instructions		
all other program-related investments. See instructions		
<u> </u>		
Total. Add lines 1 through 3		▶ 0
		Form 990-PF (2016)

1a

1b

2

За 3h

4

5

98,014

98.014

98.014

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Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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

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

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

1

2

3

4

5

Page 9

94.951

94.951

Form **990-PF** (2016)

FORM 990-PF (2016)									
Part XIII	Undistribu								

e From 2015.

XII, line 4 🕨 \$

indicated below:

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 required—see instructions). d Applied to 2016 distributable amount. . .

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

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

9 Excess distributions carryover to 2017.

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. .

e Excess from 2016. .

d Excess from 2015.

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

same amount must be shown in column (a))

orr	n 990-PF (20	16)								
P	Part XIII Undistributed Income (see instructions)									
								(a) Corpus	(b) Years prior to 2015	(c) 2015
1	Distributable	e an	nou	nt f	or 2	2016 1	rom Part XI, line 7			
2	Undistributed income, if any, as of the end of 2016						of the end of 2016			
а	Enter amount for 2015 only.					ıly.				
b	Total for pri	or y	ear	s	21	o	, 20, 20		0	
3	Excess distr	but	ions	ca	rry	over,	ıf any, to 2016			
а	From 2011.									
b	From 2012.									
С	From 2013.									
d	From 2014.						29,303	3		

52,179

29.303

52.179

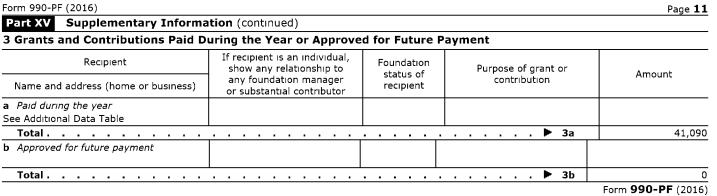
3.063

81,482

3.063

84,545

84,545



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Part XVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated	Unrelated bu	usiness 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 agencies2 Membership dues and assessments	+				
3 Interest on savings and temporary cash investments			14	153	
4 Dividends and interest from securities			14	24,791	
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	211110	9,452	14	1,517	
8 Gain or (loss) from sales of assets other than			18	39,909	
inventory9 Net income or (loss) from special events			16	35,505	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		9,452		66,370	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations			1	3	75,822
Part XVI-B Relationship of Activities to the		ment of Exem	pt Purposes		
Line No. Explain below how each activity for which the accomplishment of the foundation's explain the instructions (
				Ear	rm 990-PF (2016)

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Pari	: XVII	Information Re Exempt Organi		ransf	fers To a	and Transact	tion	s and	Relatio	nships With No	ncharit	able		
1 Did	I the or of the	ganization directly or in Code (other than section	directly enga n 501(c)(3) o	ge in a	any of the zations) o	following with or in section 527	any 7, rel	other o	rganizatio political	in described in secti organizations?	ion 501		Yes	No
a Tra	nsfers	from the reporting foun	dation to a n	oncha	rıtable ex	empt organizati	on o	f						
(1) Cash											1a(1)		No
(2) Othe	rassets										1a(2)		No
b Oth	ner trar	nsactions												
(1) Sales	s of assets to a nonchar	itable exemp	t orga	nızatıon.							1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization												1b(2)		No
(3) Rental of facilities, equipment, or other assets												1b(3)		No
(4) Reimbursement arrangements												1b(4)		No
(5) Loans or loan guarantees												1b(5)		No
(6) Performance of services or membership or fundraising solicitations.											•	1b(6)		No
${f c}$ Sharing of facilities, equipment, mailing lists, other assets, or paid employees											•	1c		No
of in	d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements													
(4)	110	(b) Amount involved	(C) Name of	HOHERE	arreadic exc	mpt organization		(u) De	3CHPCIOH OF	cransiers, cransactions	s, and sna	ing arra	ngemen	
							_							
							-							
	_						+							
							+							
							+							
							1							
		ndation directly or indire in section 501(c) of the									[Yes	☑ N	0
		complete the following s	·			· // //								
	,	(a) Name of organization			(1	b) Type of organiz	zation	ı		(c) Description	n of relatio	nship		
	T													
Sign	of n	ler penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co							than taxpayer) is b	ased on	all infoi	mation	of
Here		*****				2017-07-24		*	*****		May the If with the p			
	7	Signature of officer or t	rustee			Date		_ / 7	Title		(see instr	· —		
		Print/Type preparer's	Print/Type preparer's name Pr			nature		Date		Check if self	PTIN			
Paid		NOBLE B SNOWIII	NOBLE B SNOWIIICPA				2017-06-30 employ		employed ▶ □	P00744829		1029		
Prep	arer Only		SON SHANNO	N & S	NOW INC	:					Firm's E	IN ▶31	-08298	79
JJE	Jilly		N WEST LOC	UST S	TREET									
			WARK, OH								Phone n	o (740) 345-6	5611
		1												

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) Date sold How acquired Date acquired P-Purchase (mo, day, yr) (mo, day, yr) D-Donation CHUBB LTD 2016-01-15 2016-02-05 CHUBB LTD 2016-01-15 ONEOK PSHIP-DIST>BASIS 2016-12-31 ENTERPRISE PRODUCT-DIST>BASIS 2016-12-31 TC PIPELINE-DIST>BASIS 2016-12-31 HUNTINGTON CAP GAIN DIVIDEND 2016-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 82 81 49.969 19,573 30,396 2,133 2,133 3,943 380 3,563 1,076 1,076 2,740 2,740 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 (i) **(1)** Losses (from col (h)) (i) as of 12/31/69 (k) over col (1), if any 30,396 2,133 3,563 1,076 2,740

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter hours per week Contributions to (e) other allowances -0-) employee benefit plans (b) devoted to position and deferred compensation SUSAN STRAKER HOLDREN PRESIDENT & 25,000 0 TREASURER 1762 GERARD CIRCLE 20 00 ZANESVILLE, OH 43701 JOHN W STRAKER SR DIRECTOR 0 0 0.00 1854 NORWOOD BLVD ZANESVILLE, OH 43701 MARY H STRAKER DIRECTOR 0 0.00 1854 NORWOOD BLVD ZANESVILLE, OH 43701 JANE STRAKER DIRECTOR 0 0 0.00 883 CARDINAL POINTE COVE SANFORD, FL 32771 ANNE PLOSSER 0 DIRECTOR 0.00 4027 MONTEVALLO ROAD BIRMINGHAM, AL 35213 SAM HENDERSON DIRECTOR 0 0 00 5806 CORAL SPRINGS CT KATY, TX 77494 LAURA BREWER DIRECTOR 0 0 0.00 2642 DAVIS ST RALEIGH, NC 27608 JORDAN STRAKER DIRECTOR 0 0 00 1164 ACOMA ST 376 DENVER, CO 80210 WILLIAM PLOSSER DIRECTOR 0 0 00 242 WINDOVER ROAD MEMPHIS, TN 38111 WILLIAM E STRAKER 0 DIRECTOR 0 00 4030 WINCHESTER RD WINSTONSALEM, NC 27106 JOHN STRAKER JR DIRECTOR 0 0 00 3465 NORTH PINES WAY WILSON, WY 83014

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

A LITTLE HELP 228 CLAYTON ST SUITE 202 DENVER, CO 80206	N/A	EXEMPT	GENERAL OPERATIONS	2,000
a Paid during the year				
Name and address (home or business)	or substantial contributor	recipient		

DENVER, CO 80206				
CHRIST'S TABLE 28 6TH ST ZANESVILLE, OH 43701	N/A	EXEMPT	GENERAL OPERATIONS	2,000
ZANE STATE FOUNDATION 1555 NEWARK ROAD	N/A	EXEMPT	BUILD STEM CENTER	25,000

CHRIST'S TABLE 28 6TH ST ZANESVILLE, OH 43701	N/A	EXEMPT	GENERAL OPERATIONS	2,000
ZANE STATE FOUNDATION 1555 NEWARK ROAD ZANESVILLE, OH 43701	N/A	EXEMPT	BUILD STEM CENTER	25,000
Y BRIDGE ARTS FESTIVAL CO MUSKINGUM COUNTY COMMUNITY FOUNDATION 534 PUTNAM AVE	N/A	EXEMPT	SPONSOR ANNUAL ART SHOW	3,000

2ANE STATE FOUNDATION 1555 NEWARK ROAD ZANESVILLE, OH 43701	N/A	EXEMPT	BOILD SIEW CENIER	25,00
Y BRIDGE ARTS FESTIVAL CO MUSKINGUM COUNTY COMMUNITY FOUNDATION	N/A	EXEMPT	SPONSOR ANNUAL ART SHOW	3,00

1555 NEWARK ROAD ZANESVILLE, OH 43701				
Y BRIDGE ARTS FESTIVAL CO MUSKINGUM COUNTY COMMUNITY FOUNDATION 534 PUTNAM AVE	N/A	EXEMPT	SPONSOR ANNUAL ART SHOW	3,000

MUSKINGUM COUNTY COMMUNITY FOUNDATION 534 PUTNAM AVE ZANESVILLE, OH 43701			ST S	3,000
ME FINE FOUNDATION	N/A	EXEMPT	GENERAL FUND	2,000

FOUNDATION 534 PUTNAM AVE ZANESVILLE, OH 43701				
ME FINE FOUNDATION 610 BRASWELL RD	N/A	EXEMPT	GENERAL FUND	2,000

534 PUTNAM AVE ZANESVILLE, OH 43701				
ME FINE FOUNDATION 610 BRASWELL RD	N/A	EXEMPT	GENERAL FUND	2,00

ME FINE FOUNDATION 610 BRASWELL RD SMITHFIELD, NC 27577	N/A	EXEMPT	GENERAL FUND	2,0
Total				41,090

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 THE WELLHOUSE 8121 PARKWAY DR N/A EXEMPT **GENERAL FUND** 1,000 LEEDS, AL 35094 CENECIS EQUINDATION NI/A EVEMBT CENEDAL ELIND EAA

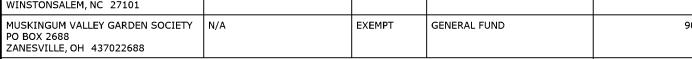
1135 MAPLE AVE ZANESVILLE, OH 43701	IN/A	EXEMPT	GENERAL FUND	500
MUSKINGUM COUNTY COMMUNITY FOUNDATION (MCCF) 534 PUTNAM AVE ZANESVILLE, OH 43701	N/A	EXEMPT	GENERAL FUND	500
HOPE HELPS INC 149 EAST BROADWAY OVIEDO, FL 32765	N/A	EXEMPT	GENERAL FUND	1,000

HOPE HELPS INC 149 EAST BROADWAY OVIEDO, FL 32765	N/A	EXEMPT	GENERAL FUND	1,000
SERVICE OVER SELF 2505 POPLAR AVE MEMPHIS, TN 381123715	N/A	EXEMPT	GENERAL FUND	2,000

			1	
SERVICE OVER SELF 2505 POPLAR AVE MEMPHIS, TN 381123715	N/A	EXEMPT	GENERAL FUND	2,
			_	

Total . 41,090 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, 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 WINSTON-SALEM FOUNDATION N/A EXEMPT GENERAL FUND 2,000 751 W FOURTH ST SUITE 200 WINSTONSALEM, NC 27101 N/A EXEMPT GENERAL FUND 90



Total

41,090

За

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491205001107								
TY 2016 Accounting Fe	es Sch	edule			_			
Name: J WILLIAM & MARY STRAKER CHARITABLE FDN								
		C/O SOS	AN HOLDREN					
	EIN:	31-1396	841					
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
ACCOUNTING		5,550	0		5,550			

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Note: To capture the full content of this document, please select landscape mode (11" $ imes$ 8.5") when printing.								
TY 2016 Depreciation Scheduk								
Name:	WILLIAM & MARY STRAKER CHARITABLE FDN							
	C/O SUSAN HOLDREN							

EIN: 31-1396841									
Description of Property	Date Acquired	Cost or Other Basıs	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND	2013-09-27	73,300		L		0	0		
BUILDING	2013-09-27	146,700	8,621	SL	39 000000000000	3,762	0		
IMPROVEMENTS	2013-09-27	60,830	3,575	SL	39 000000000000	1,560	0		
IMPROVEMENTS	2014-02-20	38,418	1,847	SL	39 000000000000	985	0		
APPLE COMPUTER & PRINTER	2015-02-20	1,411	282	200DB	5 000000000000	452	0		

TY 2016 Investments Corporate Stock Schedule

Name: J WILLIAM & MARY STRAKER CHARITABLE FDN

C/O SUSAN HOLDREN

EIN: 31-1396841

Name of Stock	End of Year Book Value	End of Year Fair Market Value	
AMERICAN EXPRESS	11,535	9,630	
BRISTOL-MYERS SQUIBB CO	17,268	36,817	
CANADIAN NATL RAILWAY COM	13,432	41,114	
CHUBB LIMITED	25,660	30,520	
CVS HEALTH CORPORATION	19,879	22,884	
DEERE & CO	14,651	28,851	
EMERSON ELECTRIC CO	25,947	34,286	
NEXTERA ENERGY	23,188	54,354	
GENERAL DYNAMICS CORP	9,392	21,583	
GENERAL MILLS INC	19,321	42,004	
JOHNSON & JOHNSON INC	16,919	29,379	
KINDER MORGAN INC - HB	91,086	45,417	
MCDONALDS CORP	5,530	10,955	
MERCK & CO	10,099	23,725	
METLIFE	11,413	12,395	
MICROSOFT CORP	13,438	27,342	
NIKE INC	12,293	38,631	
ORACLE CORPORATIONS	7,420	14,803	
PEPSICO INC	29,987	50,222	
PPG INDUSTRIES	7,182	20,847	
QUALCOMM INC	14,900	12,714	
TEXAS INSTRUMENTS	7,551	20,067	
THE KROGER COMPANY	19,958	37,271	
TRAVELERS COS INC	18,197	45,908	
VERIZON COMMUNICATIONS	8,021	12,277	
KINDER MORGAN INC - ML	130,513	62,130	
ASTRAZENECA - ML	3,943	3,142	
CENTURY LINK - ML	4,015	3,091	
COCA COLA - ML	4,002	3,731	
GENERAL ELECTRIC	3,983	3,950	

Name of Stock	End of Year Book Value	End of Year Fair Market Value
METLIFE - ML	4,090	5,389

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TY 2016 Investments Governr	TY 2016 Investments Government Obligations Schedule					
Name:	J WILLIAM & N	AARY STRAKER CHARITABLE FDN				
	C/O SUSAN HO	OLDREN				
EIN:	31-1396841					
US Government Securities - End of Year Book Value:		88,913				
US Government Securities - End of Year Fair Market Value:		88,913				
State & Local Government Securities - End of Year Book Value:		0				
State & Local Government Securities - End of Year Fair Market Value:		0				

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TY 2016 Investments - Other Schedule

Name: J WILLIAM & MARY STRAKER CHARITABLE FDN

C/O SUSAN HOLDREN

EIN: 31-139684			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ARTISAN INTERNATIONAL VALUE FUND-INVESTOR CLASS	AT COST	146,790	132,697
BUCKEYE PARTNERS LP	AT COST	9,436	66,160
ENERGY TRANSFER PARTNERS	AT COST	5,130	71,620
FEDERATED INTERNATIONAL LEADERS FUND	AT COST	50,552	47,403
ISHARES CORE S&P MID-CAP ETF	AT COST	83,544	103,007
ISHARES CORE S&P SMALL-CAP ETF	AT COST	87,472	114,417
MAGELLAN MIDSTREAM PARTNERS LP	AT COST	29,600	302,520
PLAINS ALL AMERICAN PIPELINE LP	AT COST	13,326	129,160
TC PIPELINES LP	AT COST	0	117,680
ENTERPRISE PRODUCTS	AT COST	0	67,059
ONEOK PARTNERS	AT COST	0	43,010

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data -	DLN: 93491205001107
TY 2016 Land, Etc. Schedule			
I		I WILLIAM & MAR C/O SUSAN HOLD	Y STRAKER CHARITABLE FDN

C/O	SUSAN

	EIN: 31-1396841		
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value
LAND	73,300	0	73,30

BUILDING

IMPROVEMENTS IMPROVEMENTS

APPLE COMPUTER & PRINTER

146,700

60,830

38,418

1,411

JEDREN		
Accumulated Depreciation		Book Valu
	0	73,

12,383

5,135

2,832 734

ook Value	End of Year Fair Market Value
73,300	
134,317	
55,695	
35,586	

677

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	N: 93491205001107
TY 2016 Legal Fees Schedule	1			
	e: J WILLIAM & MARY STRAKER CHARITABLE FDN C/O SUSAN HOLDREN 1: 31-1396841			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	31,040	0		31,040

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491205001107
TV 2016 Other Assets Schedule	.	

Name: J WILLIAM & MARY STRAKER CHARITABLE FDN

C/O SUSAN HOLDREN

EIN: 31-1396841

Other Assets Schedule					
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value		
DEPOSITS	461	302	302		
RECONCILING ADJUSTMENT - HUNTINGTON PSHIP	495	308	308		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491205001107
TY 2016 Other Expenses Schedule				
Name:	J WILLIAM & MA	ARY STRAKER CH	ARITABLE FDN	
	C/O SUSAN HO	LDREN		
EIN:	31-1396841			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	10,277	10,277		0
FOREIGN TAXES	205	205		0
STATE FILING FEE	200	0		0
INSURANCE	3,484	0		0
MISCELLANEOUS	1,334	0		0

136 2,700

OFFICE SUPPLIES

DUES & MEMBERSHIPS

efile GRAPHIC print - DO NOT I	PROCESS As Filed Da	ta - DLN: 93491205001107		
TV 2016 Other Income Schedule				

Name: J WILLIAM & MARY STRAKER CHARITABLE FDN

C/O SUSAN HOLDREN

EIN: 31-1396841

Other Income Schedule				
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income	
INCOME FROM PARTNERSHIPS	9,452	9,452	9,452	
RENTAL INCOME	1,500	1,500	1,500	
LITIGATION PROCEEDS	17	17	17	

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491205001107	
TY 2016 Taxes Schedule					
Name: J WILLIAM & MARY STRAKER CHARITABLE FDN C/O SUSAN HOLDREN EIN: 31-1396841					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
PAYROLL	1,913	0		957	
WORKERS COMP	904	0		452	
REAL ESTATE TAXES	77	0		0	
FEDERAL EXCISE TAX	664	0		0	

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491205001107						
Schedule B (Form 990, 990-EZ,	Schedu	ule of Contributors		OMB No 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	0-PF) ment of the Treasury ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at					
Name of the organizat J WILLIAM & MARY STRA			Employer id	lentification number		
C/O SUSAN HOLDREN			31-1396841			
Organization type (che	ck one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) of	organization				
	4947(a)(1) nonexempt char	ritable trust not treated as a private found	dation			
	☐ 527 political organization					
Form 990-PF	✓ 501(c)(3) exempt private for	☑ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private fo	undation				
V	•	PF that received, during the year, contrib omplete Parts I and II See instructions f	_	•		
Special Rules						
under sections to under sections to under sections to the under sections at the under sections to the under se	09(a)(1) and 170(b)(1)(A)(vı), that che	g Form 990 or 990-EZ that met the $33^{1}3^{6}$ scked Schedule A (Form 990 or 990-EZ), al contributions of the greater of (1) \$5,00 plete Parts I and II	Part II, line 13,	16a, or 16b, and that		
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
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 lf 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						
990-EZ, or 990-PF), bu	it must answer "No" on Part IV, line 2	Rule and/or the Special Rules does not file, of its Form 990, or check the box on linut it does not meet the filing requirements	e H of its			
For Paperwork Reduction of for Form 990, 990-EZ, or 99	Act Notice, see the Instructions 0-PF	Cat No 30613X Sche	dule B (Form 990	, 990-EZ, or 990-PF) (2016)		

Name of organi I WILLIAM & MAF C/O SUSAN HOLI	RY STRAKER CHARITABLE FDN	Employer identification 31-1396841	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if ac	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN W STRAKER TRUST		Person 🗸
	1854 NORWOOD BLVD	\$ 80,000	Noncash
	ZANESVILLE, OH43701		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_			Person
		\$	Payroll Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
	-		Payroll
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
•			Payroll
		<u> </u>	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_			Person
			Payroll
			(Complete Part II for noncash
(a)	(b)	(c)	contributions) (d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
	-		Payroll
		*	Noncash
			(Complete Part II for noncash contributions)
		Schedule B (Fr	orm 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3
	n RAKER CHARITABLE FDN		ification number
C/O SUSAN HOLDREN Part II	Noncash Property	31-13	96841
raren	(see instructions) Use duplicate copies of Part II if additional space is needed	(c)	
(a) No.from Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4
C/O SUSAN HOLDRE	STRAKER CHARITABLE FDN		Employer identification number 31-1396841
than \$1, organiz the year	,000 for the year from any one contributor	r. Complete columns (a) through exclusively religious, charictions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4	: Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gıft	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)