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Form **990-PF** Department of the Treasury Internal Revenue Service

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 separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

i di dalcildal yeal z	116 or tax year beginning		, and ending		
Name of foundation				A Employer identification	number
FICKS FAMILY	FOUNDATION			31-1572801	
	O box number if mail is not delivered to stre	eet address)	Room/suite	B Telephone number	
YOUR BUSINES	S MATTERS P.O. BOX 12547			216-222-7004	
City or town, state of	r province, country, and ZIP or foreign	n postal code		C if exemption application is pe	ending, check here
NORWOOD, OH	• • •	,			3. 1 11 11 11 11 11 11 11 11 11 11 11 11
G Check all that app		Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
C Oncom an unar ap	Final return	Amended return			
	Address change	Name change		Foreign organizations me check here and attach con	eting the 85% test,
H Check type of ord		exempt private foundation		1	
··	a)(1) nonexempt charitable trust	Other taxable private founda	ation	E If private foundation stat under section 507(b)(1)	
		nting method: X Cash	Accrual	1	
(from Part II, col	· —	Other (specify)		F If the foundation is in a 6 under section 507(b)(1)	
►\$		olumn (d) must be on cash I	basis)		(B), oncor nore
	of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted not	(d) Disbursements
(The total of	f amounts in columns (b), (c), and (d) may not equal the amounts in column (a))	expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
1 Contributi	ons, gifts, grants, etc., received	168271.			
2 Check ▶	if the foundation is not required to attach Sch. B				
3 Interest on a	avings and temporary nents				
4 Dividends	and interest from securities	10837.	10837		SEE STATEMENT 1
5a Gross ren	S			<u> </u>	
b Net rental in	come or (loss)				
6a Net gain or	loss) from sale of assets not on line 10	-27309.		סבו	FIVED
b Gross sales assets on li 7 Capital gair					<u></u>
7 Capital gair	net income (from Part IV, line 2)	,	0.	4-	2 = 2017 IOI 0
8 Net short-	term capital gain			TAM 6	11/7/11/19/
9 Income m	odifications		` ,		J <u>E</u>
10a Gross sales	less returns ces		, ,	OCI	TEN UT
b Less Cost			^	:	
c Gross pro	fit or (loss)				
11 Other inco	me				
12 Total. Ad	flines 1 through 11	151799.	10837.	. 0.	
13 Compensat	on of officers, directors, trustees, etc	0.	0.	0.	0.
14 Other emp	loyee salaries and wages		-		
	lans, employee benefits				
16a Legal fees					
16a Legal fees	g fees STMT 2	1750.	0.	0.	1750.
c Other pro	essional fees STMT 3	6656.	0.	0.	998.
T - 1	•				
18 Taxes	STMT 4	145.	0.	0.	145.
19 Depreciati	on and depletion				
20 Occupano					
21 Travel. co	nferences, and meetings				
· 	nd publications				
23 Other exp	•	305.	0.	. 0.	305.
24 Total one	rating and administrative				
<u> </u>	. Add lines 13 through 23	8856.	0	. 0.	3198.
وا 25 Contribut	ons, gifts, grants paid	60000.			60000.
1	enses and disbursements.				
	24 and 25	68856.	0.	٥.	63198.
	ne 26 from line 12;				İ
	evenue over expenses and disbursements	82943.			{
	tment income (if negative, enter -0-)		10837		
1	net income (if negative, enter -0-)			0.	
	HA For Paperwork Reduction Act No	tice, see instructions.	<u> </u>	•	Form 990-PF (2016)



		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	188388.	177098.	177098.
	3	Accounts receivable	_		
	l	Less; allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts	1		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		-	
		disqualified persons	[
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts	1 1		
S.	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			_
Ä	10a	Investments - U.S. and state government obligations		····	
		Investments - corporate stock	 		
		Investments - corporate bonds			
	Ι	Investments - land, buildings, and equipment basis			<u>-</u>
		Less accumulated depreciation	1		
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	392445.	485630	542750.
		Land, buildings, and equipment; basis			
	``	Less accumulated depreciation	1	•	я
	15	Other assets (describe	 		
		Total assets (to be completed by all filers - see the			
	``	instructions. Also, see page 1, item I)	580833.	662728	719848.
	17	Accounts payable and accrued expenses	300033.	- 002720.	713040.
	18	Grants payable	-		•
.	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable	<u> </u>		\$ 4
<u></u>		Other liabilities (describe)	-		
		other habitates (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	-	Foundations that follow SFAS 117, check here	<u> </u>		
		and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted	[
alances		Temporarily restricted			
	i .	Permanently restricted			
Fund B	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
6	27	Capital stock, trust principal, or current funds	580833.	662728.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Assets		Retained earnings, accumulated income, endowment, or other funds	0.		
Net A	29 30	Total net assets or fund balances	580833,	662728.	
Ž	30	יטיפו ווכן פססכנס טו ועווע שפופוונפס	300033.	002/28.	
	24	Total liabilities and net assets/fund halaness	E00022	660730	
_	31	Total liabilities and net assets/fund balances	580833.	662728.	
P	art	Analysis of Changes in Net Assets or Fund B	Balances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	st agree with end-of-year figure reported on prior year's return)		11	580833.
2	Ente	amount from Part I, line 27a		2	82943.
3	Othe	r increases not included in line 2 (itemize) POUNDING		3	4.
		lines 1, 2, and 3		4	663780.
5	Decr	eases not included in line 2 (itemize) CARRYING VALUE ADJUST	MENT ON SALE	5	1052.
6	Tota.	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	662728.
					222 2

Part	IV Capital Gains	and Lo	osses for Tax on In	vestmen	t Income						
			ınd(s) of property sold (e.g. or common stock, 200 shs			(b) D	How a - Puro - Don	liase	(c) Date acq (mo., day,		(d) Date sold (mo., day, yr.)
1a 40	0 KINDER MORGAN INC		. ,			<u> </u>		P 0	1/15/15		04/11/16
b 21	21.449 PRUDENTIAL J	ENNI SO	N 20/20 FOCUS FUND					P 0	2/21/14		04/11/16
c 30	0 SOUTHWEST AIRLINE	s co						P 1	0/23/15		09/12/16
d 50	0 TRINITY INDUSTRIE	S INC						P 0	6/11/15		04/11/16
e 50	0 WISDOMTREE INDIA	EARNIN	GS FUND					P 0	1/15/15		12/02/16
	(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain (e) plus (f)		
a	7139.			-	164	92.					-9353.
b	31737.				399	47.	_				-8210.
C	11217.				135	90.					-2373.
d	9341.				150	60.					-5719.
e	9951.				116	05.					-1654.
Cor	nplete only for assets showin	ig gain in	column (h) and owned by t	he foundatior	on 12/31/69				Gains (Col.		
(i)) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				k), but not Losses (fro		
a											-9353.
b											-8210.
C											-2373,
_d								_			-5719.
_ e											-1654.
2 Capr	tal gain net income or (net ca	pıtal loss	If gain, also enter If (loss), enter -0-			}	2				-27309.
If ga	short-term capital gain or (los in, also enter in Part I, line 8,			d (6):		}	_				
Part	ss), enter -0- in Part I, line 8	nder S	ection 4940(e) for	Dodugoo	Toy on Not	41	3	nont Inco		N/A	
L								Hent mcc	ine		
	ional use by domestic private			940(a) tax on	i net investment ind	come	2.)				
II Sectio	n 4940(d)(2) applies, leave th	iis part vi	dilk.								
Was the	foundation liable for the sect	tion 4942	tax on the distributable amo	ount of any ye	ear in the base peri	od?					Yes X No
	the foundation does not qual										
1 Ente	er the appropriate amount in e	each colu	mn for each year; see the in	structions be	fore making any er	ntries	i.				
	(a) Base period years		(b)			(c)				Distrib	(d) oution ratio
Calen	dar year (or tax yéar beginnii	ng in)	Adjusted qualifying distr		Net value of nor	nchar	ritable-		(co	l. (b) div	ided by col. (c))
	2015			62684.				464239			.135025
	2014			63476.				316590	<u> </u>		.200499
	2013			62461.				246758,	<u> </u>		.253127
	2012			61730.				164389			.375512
	2011			166177.	<u> </u>			92922	ļ <u> </u>		<u>1.</u> 788349
2 Tota	l of line 1, column (d)								2		2,752512
3 Aver	age distribution ratio for the 5	5-year bas	se period - divide the total o	n line 2 by 5,	or by the number	of ye	ars				
the f	oundation has been in exister	nce if less	than 5 years						3		.550502
4 Enter	r the net value of noncharitab	le-use as:	sets for 2016 from Part X, lı	ne 5					4		580662.
5 Multi	ply line 4 by line 3								5		319656.
6 Enter	r 1% of net investment incom	ie (1% of	Part I, line 27b)						6		108.
7 Add	lines 5 and 6								7		319764.
8 Enter	qualifying distributions from	ı Part XII,	line 4						8		63198.
If line	e 8 is equal to or greater than			1b, and comp	lete that part using	g a 19	% tax	rate.	<u> </u>		

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·P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see	nstru	ıctio	ns)
18	a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1				
1	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1	<u> </u>			217.
	of Part I, line 27b					
(c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	1				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				217.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	T			217.
6	Credits/Payments:					
	a 2016 estimated tax payments and 2015 overpayment credited to 2016	ĺ				
1	b Exempt foreign organizations - tax withheld at source 6b					
(c Tax paid with application for extension of time to file (Form 8868)					
(d Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments. Add lines 6a through 6d	7	[·			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	1			217.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶	11	1		-	
Pa	art VII-A Statements Regarding Activities			-		
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in			Yes	No
	any political campaign?			1a		х
ı	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition			1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ied oi	r			
	distributed by the foundation in connection with the activities					
(c Did the foundation file Form 1120-POL for this year?			1c		х
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					3
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.					
•	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	_	Х
	b If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		х
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
_	remain in the governing instrument?			6	Х	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV			7	Х	<u> </u>
_						
88	a Enter the states to which the foundation reports or with which it is registered (see instructions)					
	ОН					
t	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	х	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar			ļ	
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9_		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		х

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-	Pa	art VII-A Statements Regarding Activities (continued)			
				Yes	No
	11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		i	
		section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
	12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges	2		
		If "Yes," attach statement (see instructions)	12		x
	13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	x	<u> </u>
		Website address ► N/A	<u> </u>		<u> </u>
	14	The books are in care of ► MARIYA A TOPOLYANSKAYA, PNC BANK Telephone no. ►216-	222-7004		
			▶ 44114-3	404	
	15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		_	-
		and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
	16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
		securities, or other financial account in a foreign country?	16	1.00	x
		See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	··•	1	
		foreign country			
ſ	Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
		File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
	1a	a During the year did the foundation (either directly or indirectly):		1.00	1
		(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No		
		(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
		a disqualified person?	No		
		(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
		(5) Transfer any income or assets to a disqualified person (or make any of either available	""	1	
		for the benefit or use of a disqualified person)?	No		ļ.
		(6) Agree to pay money or property to a government official? (Exception, Check "No"	NU		
		if the foundation agreed to make a grant to or to employ the official for a period after			
		termination of government service, if terminating within 90 days.) Yes X	No		
	h	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	NU		
		section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 46	-	
		Organizations relying on a current notice regarding disaster assistance check here	A 1b	+	
	,	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	·	before the first day of the tax year beginning in 2016?	.	1	x
	2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c	 	
	-	defined in section 4942(j)(3) or 4942(j)(5)):			
	a	a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
		before 2016? Yes X	No		
		If "Yes," list the years ▶	NO		
	h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	İ		
	٠	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	İ		
		statement - see instructions.)	.		-
	c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	A 2b	┼	
	3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	-	during the year? Yes X	No		
	h	o If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after	140		
	J	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
			ł		
		of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)	, ,		
	40	Form 4720, to determine if the foundation had excess business holdings in 2016) 1. Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	_ -		-
		Did the foundation mivest outling the year any amount in a manner that would jeopardize its charitable purpose that be purpose that the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4a	-	х
	U	had not been removed from leopardy before the first day of the tax year beginning in 2016?	1	1	_v
		nas not pour comotos nom poparay poloro are mot aay of are tax year Deallillia III ZU IU'	ι ΔΩ		

Form 990-PF (2016) FICKS FAMILY FOUNDATION			31-1572801			Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)			
5a During the year did the foundation pay or incur any amount to:	<u> </u>					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	s X No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,						
any voter registration drive?	s X No					
(3) Provide a grant to an individual for travel, study, or other similar purposes	Ye	s X No				
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					İ
4945(d)(4)(A)? (see instructions)		Ye	s X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or	for		l		
the prevention of cruelty to children or animals?		Ye	s X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un-	der the exceptions described	ın Regulations				
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b		
Organizations relying on a current notice regarding disaster assistance check h	nere					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined				
expenditure responsibility for the grant?	N	/A 🔲 Ye	s 🔲 No			
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			l		
a personal benefit contract?		Y6	s X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	•	×
If "Yes" to 6b, file Form 8870			Ī			<u> </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	s X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	<i>'</i>			
Paid Employees, and Contractors	<u> </u>					
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) 0		. F	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	ac	e) Exp :count,	ense other
1-7	to position	enter -0-)	compensation		allowai	nces
SEE STATEMENT 7			_			
SEE STATEMENT /		0.	0 .	-		<u> </u>
				1		
				1		
				<u> </u>		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "				
	(b) Title, and average	enter HOHL.	(d) Contributions to	1 (e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	aè	count,	other
NONE	devoted to position	-	compensation	- -	allowar	1062
NOTE:						
				├		
		 		├-	_	
		 		\vdash		
				1		
		 		\vdash		
Total number of other employees gaid over \$50,000						

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly	y	Page /
Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
	I	(a) Companyation
(a) Name and address of each person paid more than \$50,000 (b) Type of serv	ice	(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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	E	xpenses
		
1 N/A		
2		
3		
4		
Part IX-R Cummon, of Drogram Polated Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	- 1	Amount
1 N/A	- 	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		
- Total Common Company		990-PF (2016)

Form 990-PF (2016)

31-1572801

Part X Minimum Investment Return (All do	mestic foundations must complete this part. Foreign foundations, se	e instructions)
1 Fair market value of assets not used (or held for use) directly	in carrying out charitable, etc., purposes:	
a Average monthly fair market value of securities	1a	366581.
b Average of monthly cash balances	1b	222924.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	589505.
e Reduction claimed for blockage or other factors reported on li	nes 1a and	
1c (attach detailed explanation)	1e 0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	589505.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line	e 3 (for greater amount, see instructions)	8843.
5 Net value of noncharitable-use assets. Subtract line 4 from I	ine 3. Enter here and on Part V, line 4	580662.
6 Minimum investment return. Enter 5% of line 5	6	29033.
	s) (Section 4942(j)(3) and (j)(5) private operating foundations and certain	
	not complete this part.)	
1 Minimum investment return from Part X, line 6	1	29033.
2a Tax on investment income for 2016 from Part VI, line 5	2a 217.	
b Income tax for 2016. (This does not include the tax from Part	VI.) <u>2b</u>	
c Add lines 2a and 2b	2c	217.
3 Distributable amount before adjustments. Subtract line 2c from		28816.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	28816.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5.	Enter here and on Part XIII, line 1	28816.
Part XII Qualifying Distributions (see instruction		
1 Amounts paid (including administrative expenses) to accompl		63198.
a Expenses, contributions, gifts, etc total from Part I, column	* · · · · · · · · · · · · · · · · · · ·	03198.
b Program-related investments - total from Part IX-B	un carrying out charitable, etc., purposes 2	
2 Amounts paid to acquire assets used (or held for use) directly	, , , , , , , , , , , , , , , , , , , ,	
3 Amounts set aside for specific charitable projects that satisfy t	i i	
Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	63198.
4 Qualifying distributions. Add lines 1a through 3b. Enter here	· · · · · · · · · · · · · · · · · · ·	03198.
5 Foundations that qualify under section 4940(e) for the reduced	l f	^
income. Enter 1% of Part I, line 27b	5 6	63198.
6 Adjusted qualifying distributions. Subtract line 5 from line 4		
4940(e) reduction of tax in those years.	, in subsequent years when calculating whether the foundation qualifies for th	e secuon

Part XIII Undistributed Income (see instructions)

1 Destrobables amount for 2016 from Part XI, Inte 7 2 Undestributed receive, if early, use of the end of 2016 a Einter amount for 2015 only b Total for principal growth of the 2015 only b Total for principal growth of the 2015 only b Total for principal growth of the 2015 only b Total for principal growth of 2015 only b Total for principal growth of 2016 from 2011 16.15.77. From 2012 5.35.13. From 2013 5.92.70. From 2015 4.479.36. From 2015 3.96.17. Frotal of lines 33 through € 35.29.3. 4 Qualifying distributions for 2016 from Part XI, line €, ₱ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
2. Undershould record, of any, and the end of 2016 a. Enter amount for 2015 only b. Total for proxy years: 0. 3. Excess distributions carryover, if any, to 2016: a From 2011 161577. b From 2012 50 35513. c From 2013 50 2270. d From 2014 47936. c From 2015 6 From 2015 6 From 2016 7 Total to I lines 3a through e 7 Total to I li	·				2010
a Enter amount for 2015 only					28816.
3 Excess distributions carryover, if any, to 2016; a From 2011 161577. b From 2012 53513. c From 2013 50270. d From 2015 150270. •					
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3 Excess distributions carryover, if any, to 20 (is a From 2011 16.15.77). b From 2012 5.351.3. c From 2013 50.27.0. d From 2014 4793.6. e From 2015 39.6.17. f Total of lines 3a through e 35.21.3. 4 Qualitying distributions for 20 16 from Part XII, in et .; P. S. and Applied to 2015, but not more than line 2a bApplied 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 distributible amount effermaning amount distributed out of corpus (Election required - see instructions) d Applied to 2016 distributible amount effermaning amount distributed out of corpus (Election required - see instructions) d Applied to 2016 distributible amount effermaning amount distributed out of corpus (Election required - see instructions) d Applied to 2016 distributible amount effermaning amount distributed out of corpus (Election required - see instructions) d Applied to 2016 distributible amount effective and the stock of the series amount distributed income. In a see in a set indicated below: a Corpus Add test of see and such as distributed income. Subtract line 4 b from line 25. c Either the amount of prior years' undistributed income for 2015. Subtract line 4 and 5 from line 2. This amount must be distributed income for 2016. Subtract line 4 after mine 2.4 Tasable amount - see instructions d and offer mine 6.5 Tasable amount must be distributed income for 2016. Subtract line 4 after mine 2.4 This amount must be distributed income for 2016. Subtract lines 4 and 5 from line 1.5 This amount must be distributed income for 2016. Subtract lines 4 and 5 from line 1.5 This amount must be distributed income for 2016. Subtract lines 4 and 5 from line 1.5 This amount must be distributed income for 2016. Subtract lines 4 and 5 from line 1.5 This amount must be distributed in 2017 Amounts treated as distributions out of corpus and the corpus of the corpus of the corpus of the corpus of the corpus of the corpus of the corp	b rotal for prior years:				
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6 From 2013		-			
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e From 2015 39617. f Total of lines 3a brough e 4 Qualifying distributions for 2016 from Part XII, line 4 ► \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		4			
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4 Qualifying distributions for 2016 from Part XII, line 4: PS 63198. 4 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 derebutions carryover applied to 2016 1 Enter the net total of each column as indicated below: a Corpus Act lines 3 4, e., and 4e Subtract line 5 b Prior years' undistributed income for which a notice of deticineny list 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 d Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. 1 Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. 1 Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. 1 Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. 2 Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. 3 Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. 4 Indistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. 5 Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr. 5 Undistributed income for 2016. Subtract line 4a from line 5a. Instructions 6 Undistributed income for 2016. Subtract line 4a from line 1a. This amount must be distributed income for 2016. Subtract line 4a from line in 2a. Taxable amount - see instructions 5 Undistributed income for 2016. Subtract line 4a. Taxable amount - see instructions 6 Undistributed income for 2016. Subtract line 5a. Taxable amount - see instructions 7 Undistributed income for 2016. Subtract line 5a. Taxable amount - see instructions 8 Undistributed income for 2016. Subtract line 5a. Taxable amount - see instruc		∸			
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		225718.			
	Analysis of line 9:				
a excess from 2012 53513.	a Excess from 2012 53513	.			
b Excess from 2013 50270.	b Excess from 2013 50270	.1			
c Excess from 2014 47936.	c Excess from 2014 47936	.]			
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an exempt organization 4) Gross investment income t XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: Ist any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax lear (but only if they have contributed more than \$5,000). (See section 507(d)(2).) Ist any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: STATEMENT 8 The form in which applications should be submitted and information and materials they should include:						
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STATEMENT 8 The form in which applications should be submitted and information and materials they should include:					`	d.
The form in which applications should be submitted and information and materials they should include:	The name, address, and telephone numbe	er or e-mail address of tl	he person to whom appl	cations should be addre	essed:	
The form in which applications should be submitted and information and materials they should include:						
	STATEMENT 8					
Any submission deadlines:	The form in which applications should be	submitted and informat	ion and materials they sl	nould include:		 _
Any submission deadlines:						
	Any submission deadlines:					
	Any restrictions or limitations on awards,	such as by geographica	l areas, charitable fields	kinds of institutions or	other factors	

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
CHILDRENS HOSPITAL MEDICAL CENTER	NONE	PUBLIC	GENERAL SUPPORT	
3333 BURNET AVENUE, MLC 9002				
CINCINNATI, OH 45229-3039				60000.
	<u> </u>			
		l		
				1
		<u> </u>		
		l		
<u></u>		<u> </u>		
Total			<u>▶ 3a</u>	60000.
b Approved for future payment				
		1		
NONE		į		
		1		
	 			
]		
	 	<u> </u>	 	
		[
Total	<u> </u>	L 	<u></u> 3b	0.
, 3141			► 30	

Part XVI-A Analysis of Income-Producing Activities

1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	(e) Related or exempt function income
a			_		
h					
					
·			+		
d			_		
<u> </u>			+		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14		10837.
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					
8 Gain or (loss) from sales of assets other than inventory			18	-27309.	·
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:				_	
a					
b					
c		·			
d					
e		<u> </u>			
12 Subtotal. Add columns (b), (d), and (e))	-27309.	10837.
13 Total. Add line 12, columns (b), (d), and (e)				13	-16472.
(See worksheet in line 13 instructions to verify calculations.)		<u> </u>			

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

Line No.	the foundation's exempt purposes (other than by providing funds for such purposes).
4	THE ACTIVITIES ABOVE FOR WHICH INCOME IS REPORTED HAVE THE SOLE
	PURPOSE OF PROVIDING FUNDS FOR THE EXEMPT PURPOSES DESIGNATED IN
	THE GOVERNING INSTRUMENT OF THE TRUST
8	THE ACTIVITIES ABOVE FOR WHICH INCOME/LOSS IS REPORTED HAVE THE SOLE
	PURPOSE OF PROVIDING FUNDS FOR THE EXEMPT PURPOSES DESIGNATED IN
	THE GOVERNING INSTRUMENT OF THE TRUST

Part XVII		egarding Tran	sfers To a	and Transactions a	nd Relations	hins With Nonchar		age 10
	Exempt Organ		31013 10 6		ina melations	imps with Noncha	itable	
1 Did the or	<u>_</u>		of the followin	ig with any other organization	on described in sect	non 501(c) of	Yes	No
				27, relating to political organi				1
	from the reporting founda				neation o			
(1) Cash			DIO OXOITIPE OF	gamzation of,			1a(1)	x
(2) Other								$+\frac{x}{x}$
• •							1a(2)	 ^-
b Other tran		ble avamet areasum					45/45	
	of assets to a noncharita						1b(1)	X
• •	nases of assets from a no	•	rganization				1b(2)	X
• •	il of facilities, equipment,						1b(3)	X
• •	bursement arrangements						1b(4)	X
• •	s or loan guarantees						1b(5)	X
• •	rmance of services or me	•	-				1b(6)	X
•	f facilities, equipment, ma						1c	x
				edule. Column (b) should alv				
				ed less than fair market valu	ie in any transaction	n or sharing arrangement, s	how in	
<u>_</u>	I) the value of the goods,							
(a)Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Descriptio	n of transfers, transactions, and s	sharing arrangerr	nents
			N/A	<u> </u>		·	<u></u>	
						_	-	
							·	
							-	
					"	-		
			_					
						<u> </u>		
								
_								
2a Is the four	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described		-	
	501(c) of the Code (other	•	-				Yes X	□ No
	omplete the following sch	• •	(-77					
	(a) Name of org			(b) Type of organization	Γ	(c) Description of relationsh	1ip	
	N/A	 -				<u> </u>		
		<u></u>						
					_			
	 -							
	• /			·				
Under	penalties of parjury I declare	that I have examined this	s, neturn includir	n faxpayer) is based on all inform	statements, and to the	best of my knowledge		
Sign and be	elief, it is true correct, and con	nplete Déclaration of pro	eparer (other tha	n faxpayer) is based on all inform	nation of which prepare		the IHS discuss rn with the prepa	arer
Here	x ////////////////////////////////////		7////	1 1 5/8/17	PRESIDEN	• •	Yes Ves	No
Sign	ature of officer of trustee		//	Date	Trtle	<u> </u>		
	Print Type preparer's na		Preparer's s		Date	Check X if PTIN		
]			•]	self- employed		
Paid	FREDERICK G. DA	VISON EA	PREDERICE	G. DAVISON, EA	05/05/17		39059	
Preparer	Firm's name ► YOUR			. C. DATIDON, BR	75/05/1/	Firm's EIN ▶ 20-0310		—
Use Only	I am s name > 100k					1 1111 3 EIIV - 20-0310		
,	Firm's address ▶ P.O	BOX 12547				 		
	į	WOOD, OH 4521:	2-0547			Phone no. 513-631-	8299	
	1					11 HORE NO. 313-031-		

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

2016

FICKS FAMILY FOUNDATION 31-1572801 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

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

religious, charitable, etc., contributions totaling \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of or	ganization	1	ployer identification number 31 – 1572801
Part I	Contributors (See instructions). Use duplicate copies of Part		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PICKS CHARITABLE LEAD UNITRUST PNC BANK 201 E. PIPTH STREET CINCINNATI, OH 45202-4182	\$\$	Person X 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 Noncash (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 Noncash (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 Noncash (Complete Part II for noncash contributions.)

Employer identification number

FICKS FAMILY FOUNDATION

31-1572801

Noncash Property (See instructions) Use duplicate copies of Part	Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed							
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received						
	— ^{\$}							
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received						
	_							
	 \$							
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received						
	-							
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received						
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	\$							
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received						
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	 \$							
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received						
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me of orga	(Form 990, 990-EZ, or 990-PF) (2016) Inization			Employer identification number			
CKS FAM	ILY FOUNDATION			31-1572801			
art III		tributions to organizations describe	in section 50'	(c)(7), (8), or (10) that total more than \$1,000			
	completing Part III, enter the total of exclusively religiou	us, charitable, etc., contributions of \$1,000 c	less for the year	(Enter this into once) > \$			
) No.	Use duplicate copies of Part III if addition	lai space is needed.					
rom art I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
			_				
}_							
		(e) Transfer of gi					
}	Transferee's name, address, and ZIP + 4			onship of transferor to transferee			
) No.	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
art I	(b) Ful pose of gift	(c) ose of grit		(a) Description of now girt is need			
			-				
-	(e) Transfer of gift						
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
1							
) No. rom art I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
1		l					
			_ _				
	(e) Transfer of gift						
-	Transferee's name, address, and 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			
-			_				
- - - -	(e) Transfer of gift						
	Transferee's name, address, a	and ZIP + 4	Relation	onship of transferor to transferee			
- 1							