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EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

Form **990-PF**

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.lrs.gov/form990pf. OMB No 1545-0052

For calendar year 2016 or tax year beginning , and ending Name of foundation A Employer identification number ICF FOUNDATION JOHN D. ONG 34-1826821 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 9 AURORA STREET (330) 655-3831 City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here HUDSON, OH 44236 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization; E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust — Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 2,338,294. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements or charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income N/A 21,300. Contributions, gifts, grants, etc., received 2 Check If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 67,246. 67,246. STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 3.455. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 425,629. 3,455. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain OGDF 9 Income modifications 10a Gross sales less return and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 664. 0. STATEMENT 92,665. 70,701. 12 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 4,000. STMT 3 0 2,000. **b** Accounting fees 17,058. STMT 4 17,058. 0. c Other professional fees 17 Interest STMT 5 1,168. 1,168 0. 18 Taxes 19 Depreciation and depletion 16,200. 0. 8,100. 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 6 9,239. 0. 4,722. 23 Other expenses 24 Total operating and administrative 47,665. 18,226 14,822. expenses. Add lines 13 through 23 110,432. 110,432. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 158,097. 18,226 125,254. Add lines 24 and 25 27 Subtract line 26 from line 12: -65,432 & Excess of revenue over expenses and disbursements 52,475. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-) Form 990-PF (2016) 623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Г	Part II Balance Sheets Attached schedules and amounts in the description		Beginning of year	End of year			
Ľ	art	cotumn should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	1,340.	708.	708.		
	2	Savings and temporary cash investments	45,653.	23,162.	23,162.		
		Accounts receivable >					
		Less; allowance for doubtful accounts		-			
	4	Pledges receivable ▶	 				
	`	Less; allowance for doubtful accounts		į	-		
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	ľ	disqualified persons		Į.			
	7	Other notes and loans receivable					
	'	Less: allowance for doubtful accounts		1			
Ľ٨	8	Inventories for sale or use	 				
Assets	9	Prepaid expenses and deferred charges					
Ass	1	Investments - U.S. and state government obligations					
		Investments - corporate stock STMT 7	583,537.	590,112.	767,016.		
		Investments - corporate bonds	303,337.	350,112.	707,010.		
	١	_	 				
	11	Investments - land, buildings, and equipment, basis					
	40	Less accumulated depreciation	 				
	1	Investments - mortgage loans Investments - other STMT 8	1,515,655.	1,466,771.	1,547,408.		
	13		1,515,655.	1,400,771.	1,347,400.		
	14	Land, buildings, and equipment; basis	i i		-		
		Less accumulated depreciation					
		Other assets (describe	ļ				
	16	Total assets (to be completed by all filers - see the	2 146 105	2 000 752	2 220 204		
_	-	instructions. Also, see page 1, item I)	2,146,185.	2,080,753.	2,338,294.		
	17	Accounts payable and accrued expenses					
	18	Grants payable	 				
es	19	Deferred revenue					
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable					
_	22	Other liabilities (describe					
	ļ						
_	23	Total liabilities (add lines 17 through 22)	0.	0.			
	İ	Foundations that follow SFAS 117, check here		}			
ທ	ļ	and complete lines 24 through 26 and lines 30 and 31.		Į.			
ances	24						
=		Temporarily restricted					
Ä	26	Permanently restricted					
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here					
F	1	and complete lines 27 through 31.		_ \			
S	27	Capital stock, trust principal, or current funds	0.	0.			
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Ä	29	Retained earnings, accumulated income, endowment, or other funds	2,146,185.	2,080,753.			
Z	30	Total net assets or fund balances	2,146,185.	2,080,753.			
_	31	Total liabilities and net assets/fund balances	2,146,185.	2,080,753.			
Г	art	Analysis of Changes in Net Assets or Fund B	lalances				
느	<u> </u>						
		net assets or fund balances at beginning of year - Part II, column (a), line	30	- -			
	•	st agree with end-of-year figure reported on prior year's return)		_1	2,146,185.		
2	Ente	r amount from Part I, line 27a		2	-65,432.		
3	Othe	r increases not included in line 2 (itemize)		3	0.		
		lines 1, 2, and 3		4	2,080,753.		
5	Decr	eases not included in line 2 (itemize)		5	0.		
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	2,080,753.		
					Form 990-PF (2016)		

(a) List and desc	ribe the k	osses for Tax on In and(s) of property sold (e.g.	., real estate,	Income	T(B)F	How ac	quired	(c) Date a		(d) Date sold
		or common stock, 200 shs	s. MLC Co.)		D	- Dona	tion	(mo., da	ay, yr.)	(mo., day, yr.)
1a PUBLICLY TRADE					_		P			
b PUBLICLY TRADE					 		P			
c CAPITAL GAINS	DIVI	DENDS			₩					
<u>d</u>					├-					
<u>e</u>	(4)	Depresention allowed	(a) Cod	t ar ather basis	Ь-г			(b) C	un or (loos	<u> </u>
(e) Gross sales price	L	Depreciation allowed (or allowable)		st or other basis expense of sale		_	,		ain or (loss (f) minus	(g)
a 86,819. b 338,353.				85,67			_		<u> </u>	1,141.
AFF				336,49	'6 +					1,857. 457.
d 45/.										437.
e				-	\dashv					
Complete only for assets showing	no dain in	column (h) and owned by t	the foundation	on 12/31/69	ᆉ		(1)	Gaine (C	ol. (h) gain	minue
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i)		!		(k), but n	ot less tha (from col.	n -0-) or
<u>a</u>					\dashv					1,141.
b					寸					1,857.
C					\dashv					457.
d										
е										
2 Capital gain net income or (net ca	apıtal loss	If gain, also enter If (loss), enter -0-	ın Part I, line - ın Part I, line	7 7	}	2				3,455.
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	•	ined in sections 1222(5) an			7					
If (loss), enter -0- in Part I, line 8	Column (<i>u).</i>			71	3			N/A	
Part V Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inc	ome		
(For optional use by domestic private	e foundati	ons subject to the section 4	1940(a) tax on	net investment in	come	3.)				
If section 4940(d)(2) applies, leave to Was the foundation liable for the sectif "Yes," the foundation does not quate the appropriate amount in	tion 4942 lify under	tax on the distributable am section 4940(e). Do not co	mplete this pa	rt.				_		Yes X No
(a) Base period years		(b) Adjusted qualifying dis		Net value of no	(c)		ise assets		Distri	(d) oution ratio yided by col. (c))
Calendar year (or tax year beginni 2015	ng m)		3,133.	701 12125 51 110			7,287		(cor. (o) un	• 057315
2013			$\frac{3,133}{6,976}$				4,988			.045783
2013			8,027.				9,537			.090864
2012			7,247.				1,662			.054340
2011			5,654.				5,596			.048563
2 Total of line 1, column (d)			<u>.</u>					2		.296865
3 Average distribution ratio for the the foundation has been in existe	•	•	on line 2 by 5,	or by the number	of ye	ars		3		.059373
4 Enter the net value of noncharitat	ole-use as	sets for 2016 from Part X,	line 5					4		2,341,683.
5 Multiply line 4 by line 3								5		139,033.
6 Enter 1% of net investment incon	ne (1% of	Part I, line 27b)						6		525.
7 Add lines 5 and 6		•						7		139,558.
8 Enter qualifying distributions from	n Part XII.	, line 4						8	_	125,254.
If line 8 is equal to or greater than See the Part VI instructions.			1b, and comp	lete that part usir	ng a 1º	% tax r	ate.	ــــــــــــــــــــــــــــــــــــــ		<u></u>

ICF FOUNDATION

Form 990-PF (2016) JOHN D. ONG Part VI Excise Tax Based on Investment Income	(Section 4040(a) 4040(b) 4040(a) or	34-182		ectio	Page 4
1a Exempt operating foundations described in section 4940(d)(2), check l		T T			
• • •	n copy of letter if necessary-see instructions)	1 1			
Date of ruling or determination letter: (attact b Domestic foundations that meet the section 4940(e) requirements in P.		111		1 N	5Ò.
of Part I, line 27b	art v, thete and enter 176				30.
·	gapizations agter 49/ of Port L line 12 and (h)	1 1			
 c All other domestic foundations enter 2% of line 27b. Exempt foreign or 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable 		2			0.
2 Tax under section 511 (domestic section 494/(a)(1) trusts and taxable 3 Add lines 1 and 2	Touridations only. Others enter -0-)	3		1 0	50.
	o foundations only Others onter ()	4		<u> </u>	30.
	•	5		1 0	50.
	ir less, eitter -0-	3		<u> </u>	50.
6 Credits/Payments:	6a 4,319	1 1			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a 4,319	4			
b Exempt foreign organizations - tax withheld at source		-			
c Tax paid with application for extension of time to file (Form 8868)	60	-			
d Backup withholding erroneously withheld	6d	┥ . !		1 2	19.
7 Total credits and payments. Add lines 6a through 6d	d Form 0000 is attached	7		4 ,3	19.
8 Enter any penalty for underpayment of estimated tax. Check here		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount	-	9		2 2	69.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the	3,269 ⋅ Refunded ►	10		<u>3,2</u>	
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	3,209 • Retunded ▶	11			0.
Part VII-A Statements Regarding Activities				Vaa	Na
1a During the tax year, did the foundation attempt to influence any nationa	il, state, or local legislation or did it participate or interven	e in	1	Yes	
any political campaign?		١.٥	1a	<u> </u>	X
b Did it spend more than \$100 during the year (either directly or indirectly		•	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description	n of the activities and copies of any materials publi	shed or			,
distributed by the foundation in connection with the activities					ر م
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955					
(1) On the foundation. ▶ \$ 0 . (2) On the		<u>.</u>	1		
e Enter the reimbursement (if any) paid by the foundation during the yea	r for political expenditure tax imposed on foundation				
managers. ► \$					
2 Has the foundation engaged in any activities that have not previously b	een reported to the IRS?		2		X
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the I		or			
bylaws, or other similar instruments? If "Yes," attach a conformed	copy of the changes		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or	more during the year?		4a_		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contrac	•		5		X
If "Yes," attach the statement required by General Instruction 7					
6 Are the requirements of section 508(e) (relating to sections 4941 through	igh 4945) satisfied either:		1 1		
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 sta	te law	1		
remain in the governing instrument?			6	Х	
7 Did the foundation have at least \$5,000 in assets at any time during the	e year? If "Yes," complete Part II, col. (c), and Part X	ν	7	X	L
8a Enter the states to which the foundation reports or with which it is regi	stered (see instructions) 🕨				l
OH					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of F	, , ,				1
of each state as required by General Instruction G? If "No," attach	•		8b	_X_	<u></u>
9 Is the foundation claiming status as a private operating foundation with	nin the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar]
year 2016 or the taxable year beginning in 2016 (see instructions for P	· · · · · · · · · · · · · · · · · · ·		9	L	<u>X</u>
10 Did any persons become substantial contributors during the tax year?	ff "Yes," attach a schedule listing their names and addresses		10		X
——————————————————————————————————————			orm QQf)_DE	/20161

Form **990-PF** (2016)

	ICF FOONDATION				
	m 990-PF (2016)JOHN D. ONG	34-1826	<u>821</u>		Page 5
Ρ	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				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had adviso	y privileges?			
	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	
	Website address ► N/A				
14		10. ► 330-65			
	Located at ▶ 9 AURORA STREET, SUITE 2, HUDSON, OH	ZIP+4 ▶44	<u> 236</u>		
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	▶ 15	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	
	securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		ĺ		
_	foreign country 🕨		<u> </u>		
P	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.		<u> </u>	Yes	No
1	a During the year did the foundation (either directly or indirectly):		1		1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes 🛣 No	1	1	Ì
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	. ==	ĺ		
	a disqualified person?	Yes 🛣 No	1]	Ì
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			i
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes 🛣 No	l		
	(5) Transfer any income or assets to a disqualified person (or make any of either available		ĺ		
	for the benefit or use of a disqualified person)?	Yes 🗓 No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		l		
	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 🗶 No	ļ	,	ļ
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	/-	ĺ		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here				
	c 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?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundati	on			
	defined in section 4942(j)(3) or 4942(j)(5)):				
	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) begin		 	. !	
	before 2016?	Yes 🗶 No	İ		
	If "Yes," list the years \(\), , , , , b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorporation).		}		
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorvaluation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and at		ĺ	i	
	statement - see instructions.)	N/A	2b	1	i
	c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	,	<u> </u>	-	
					•
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		İ		
J	during the year?	Yes 🛣 No			
	b if "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons		1		1
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7))				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedul		İ		
	Form 4720, to determine if the foundation had excess business holdings in 2016.)	N/A	3ь		ŀ
A	la Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	44, 44	4a		X
	b Did the foundation mivest during the year any amount in a manner that would jeopardize its charitable purjuent in a prior year (but after December 31, 1969) that could jeopardize its charitable purjuent.	oose that	├~~		
	2 3.5 and tourise that only involved in a prior your touristion boothing of, 1000, that obtain joopardize its character purp	, ago that	I	i	Ī

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

Part VII-B	Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)			
5a During the	year did the foundation pay or incur any amount to:						
(1) Carry o	n propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No	1	ı	
(2) Influen	ce the outcome of any specific public election (see section 4955); c	or to carry on, directly or indire			- 1	}	
any vo	ter registration drive?			es X No	ı		
(3) Provide	e a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	- 1	}	
(4) Provide	e a grant to an organization other than a charitable, etc., organizatio	n described in section			- 1		
4945(0	I)(4)(A)? (see instructions)		Y	es 🛣 No	}		
(5) Provide	e for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			- 1	- 1	
the pre	vention of cruelty to children or animals?		Y	es 🗶 No	Ì		
•	er is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	•	in Regulations	/-	- [- 1	
	1945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b		,
•	ns relying on a current notice regarding disaster assistance check h				ı	- 1	
	er is "Yes" to question 5a(4), does the foundation claim exemption f		_	\	1	- 1	
•	responsibility for the grant?		I/A	es L No	ı		
•	tach the statement required by Regulations section 53 494	• •		1	1	1	
	ndation, during the year, receive any funds, directly or indirectly, to	pay premiums on	,	(ড]	ı	İ	1
•	penefit contract?		Y	es 🛣 No			~ ·
	ndation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		-	6b	\dashv	<u> </u>
	6b, file Form 8870	halter transaction?		es X No	1	- 1	
-	during the tax year, was the foundation a party to a prohibited tax s the foundation receive any proceeds or have any net income attribu		т.	N/A	7b	\dashv	
Part VIII	Information About Officers, Directors, Trust		nagers Highl		/U	—	
	Paid Employees, and Contractors	ccs, i ouridation wa	magers, riigin	y			
1 List all office	ers, directors, trustees, foundation managers and their	compensation.					
		(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(6	e) Exper count, o	nșe
	(a) Name and address	to position	(If not paid, enter -0-)	and deterred compensation	acc	illowanc	es
)		
SEE STAT	PEMENT 9		0.	0.	Щ.		<u>o.</u>
]		}	Ì		
					ĺ		
					—		
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		Ì		ì	Ì		
			 		├		
		Ì			Ì		
2 Compensa	tion of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "	<u> </u>	<u> </u>		
				(d) Contributions to	T (e	e) Exper	nse
(a) Nan	ne and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	acc	count, o	ther
NO	DNE	dovoted to position	 	compensation	╁─ਁ		
		1					
	 			 	 		
- 							
		 	† 	 	†		
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				t			
					L		
			<u> </u>	<u></u>			
Total number of	other employees paid over \$50,000						0
			-	Form	990	-PF (2	2016)

Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(-,),-	
	 	
	7	
		
	뒥	
		
	-	
		
		
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 statist	usal information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers prod		Expenses
1 NONE		
1 210212		†
		· 0.
2		
		†
		-
<u> </u>		
<u> </u>		4
		1
<u> </u>		
4		7
		†
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.	Amount
1 NONE		<u> </u>
		
		0.
2		
<u></u>		1
		1
All other program-related investments. See instructions.		
3 NONE		
		1
		1
		1
		1
		1 n.
Total. Add lines 1 through 3	>	0.
Teles rice in les 1 till degit o		Form 990-PF (2016)
		1 01111 000 TE (2010)

Page 8

Part X Minimum Investment Return (All domestic for	oundations must complete this pa	rt Foreign foundations, s	ee instructions.)
1 Fair market value of assets not used (or held for use) directly in carryin	g out charitable, etc., purposes:		
a Average monthly fair market value of securities		1a	2,328,249. 49,094.
b Average of monthly cash balances		1b	49,094.
c Fair market value of all other assets		1c	
d Total (add lines 1a, b, and c)		1d	2,377,343.
e Reduction claimed for blockage or other factors reported on lines 1a ar	nd		
1c (attach detailed explanation)	1e	0.	
2 Acquisition indebtedness applicable to line 1 assets		2	0.
3 Subtract line 2 from line 1d		3	2,377,343.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for g	reater amount, see instructions)	4	35,660.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Ent	ter here and on Part V, line 4	5	2,341,683.
6 Minimum investment return. Enter 5% of line 5		6	117,084.
Part XI Distributable Amount (see instructions) (Section foreign organizations check here and do not com		g foundations and certain	
1 Minimum investment return from Part X, line 6	ploto titlo parti)	11	117,084.
2a Tax on investment income for 2016 from Part VI, line 5	2a	1,050.	
b Income tax for 2016. (This does not include the tax from Part VI.)	2b		
c Add lines 2a and 2b		2c	1,050.
3 Distributable amount before adjustments. Subtract line 2c from line 1		3	1,050. 116,034.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	116,034.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter he	re and on Part XIII, line 1	7	116,034.
Part XII Qualifying Distributions (see instructions)			
1 Amounts paid (including administrative expenses) to accomplish charit			125 254
a Expenses, contributions, gifts, etc total from Part I, column (d), line 2	2 6	1a	125,254.
b Program-related investments - total from Part IX-B	and abandable at a consequence	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carryi	ng out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:	,		
a Suitability test (prior IRS approval required)		3a	
b Cash distribution test (attach the required schedule)	and V. Iran O. and Br. I. VIII. Land	3b	125 254
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on P		4	125,254.
5 Foundations that qualify under section 4940(e) for the reduced rate of the	EX UN NET INVESTMENT		^
income. Enter 1% of Part I, line 27b		5	125,254
6 Adjusted qualifying distributions. Subtract line 5 from line 4		6	
Note: The amount on line 6 will be used in Part V, column (b), in subset 4940(e) reduction of tax in those years.	equent years when calculating whether	tne roundation qualities for t	ne section

Form **990-PF** (2016)

Page 9

Part XIII Undistributed Income (see instructions) (b) (d) (c) 2015 2016 Corpus Years prior to 2015 1 Distributable amount for 2016 from Part XI. 116,034. line 7 2 Undistributed income, if any, as of the end of 2016 0. a Enter amount for 2015 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2016: a From 2011 **b** From 2012 c From 2013 24,319. dFrom 2014 21,481 e From 2015 45,800. f Total of lines 3a through e 4 Qualifying distributions for 2016 from 125,254. Part XII, line 4; ►\$ a Applied to 2015, but not more than line 2a 0 b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 116,034. d Applied to 2016 distributable amount 9.220. e Remaining amount distributed out of corpus 0. Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 55,020 & Corpus Add lines 3f, 4c, and 4e Subtract line 5 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

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 instr.

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

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

24,319.
21,481.
9,220.

Form	990-	PF	(2018
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0.

0.

55,020

0.

0

0

0.

Form 990-PF (2016) JOHN D.					326821 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2016, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found	lation is a private operati	ng foundation described		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					}
each year listed			<u> </u>		<u> </u>
b 85% of line 2a					
c Qualifying distributions from Part XII,			Ţ		
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of				ļ	
exempt activities					
e Qualifying distributions made directly		· · · · · · · · · · · · · · · · · · ·	 	 	
for active conduct of exempt activities.		1	Î .		}
Subtract line 2d from line 2c					1
3 Complete 3a, b, or c for the		<u> </u>	 		
alternative test relied upon:		Ï	}		1
a "Assets" alternative test - enter:]			
(1) Value of all assets		 	 	 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return		(
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					1
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					ì
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from			 	 	
an exempt organization					1
(4) Gross investment income			 		
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	o have contributed more	than 2% of the total con	tributions received by the	foundation before the clo	ose of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	section 507(d)(2).)			
SEE STATEMENT 10					
b List any managers of the foundation wh			(or an equally large portion	on of the ownership of a p	partnership or
other entity) of which the foundation ha	s a 10% or greater intere	ST.			
NONE					····
2 Information Regarding Contribut		•	_		
			organizations and does r		
the foundation makes gifts, grants, etc.					0 0.
a The name, address, and telephone num			lications should be addres	ssed:	
M. KATHERINE C. ONG-	-			_	
			ON, OH 44236	5	
b The form in which applications should to SEE ATTACHED APPLICA		•	should include:		
c Any submission deadlines:					
JUNE 30 OF EACH APPL			lunda at	th an foot	
d Any restrictions or limitations on award: YES, SEE ATTACHED AP			s, KINOS OF INSTITUTIONS, OF (otner factors;	
IEG, DEE ATTACHED AF	I DICKLION C	CTDENTHES			

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor a Paid during the year EPISCOPAL DIOCESE OF OHIO NONE ÞС SUPPORT OF THE 2230 EUCLID AVENUE PLANTING FOR TOMORROW CLEVELAND, OH 44115 GROWING IN FAITH TODAY CAMPAIGN 27,500. FORT LIGONIER ASSOCIATION NONE SUPPORT OF THE 200 SOUTH MARKET STREET FORTIFYING OUR FUTURE 2,500. LIGONIER, PA 15658 CAMPAIGN FOUNDATION FOR APPALACHIAN OHIO NONE PC SUPPORT OF THE 35 PUBLIC SQUARE LEADERSHIP 100 NELSONVILLE, OH 45764 CAMPAIGN 8,000. FRIENDS OF FLIGHT 93 NATIONAL NONE SUPPORT OF THE FLIGHT MEMORIAL 93 ANNUAL 9/11 PO BOX 911 MEMORIAL SERVICE SHANKSVILLE, PA 15560 5,000. FRIENDS OF LAVENHAM CHURCH NONE Ьc GENERAL SUPPORT 25 THE GLEBE, SUDBURY RD LAVENHAM, SUFFOLK, UNITED KINGDOM CO10 9SN 1,432. SEE CONTINUATION SHEET(S) 110,432. Total ➤ 3a **b** Approved for future payment SAINT LOUIS UNIVERSITY NONE PC SUPPORT OF THE WALTER 1 N. GRAND BLVD J. ONG CENTER FOR ST. LOUIS, MO 63103 DIGITAL HUMANITIES 150,000. NONE WESTERN RESERVE ACADEMY PC SUPPORT A MAINTENANCE 115 COLLEGE STREET ENDOWMENT FOR THE ONG HUDSON, OH 44236 LIBRARY 150,000. **▶** 3b 300,000. Total Form **990-PF** (2016)

ICF FOUNDATION

Form 990-PF (2016)

JOHN D. ONG

Part XVI-A An	alysis of Income	-Producing Activ	ities
---------------	------------------	------------------	-------

Calculation and the second and the s	Unrelated	business income	Exclud	ded by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Allibolit	
å	<u> </u>		\vdash		
b	<u> </u>				
·			╀		
ď	 				
e					
·					
g Fees and contracts from government agencies	\vdash				
2 Membership dues and assessments	\vdash		1		
3 Interest on savings and temporary cash	1 1				
investments			1 4		
4 Dividends and interest from securities	\longrightarrow		14	67,246.	
5 Net rental income or (loss) from real estate:	 				
a Debt-financed property			 		
b Not debt-financed property			\vdash		
6 Net rental income or (loss) from personal	!!				
property	ļ		1 2		
7 Other investment income	<u> </u>		01	664.	
8 Gain or (loss) from sales of assets other	1 1		امدا		
than inventory			18	3,455.	
9 Net income or (loss) from special events	\vdash		\longrightarrow		
10 Gross profit or (loss) from sales of inventory			$ldsymbol{\sqcup}$		
11 Other revenue:	l l		امما		
a NONDIVIDEND DISTRIBUTION			14		
b					
c			1		
d			igspace		
e					
12 Subtotal. Add columns (b), (d), and (e)	<u></u>	0.		71,365.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	71,365
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Accor	mplishment of Ex	kempt	t Purposes	
Line No. Explain below how each activity for which incom			contrib	uted importantly to the accomp	olishment of
the foundation's exempt purposes (other than b	y providing fund	is for such purposes).			
<u> </u>					
I					

Form **990-PF** (2016)

623621 11-23-16

Form 990-PF (2	016) JOHN	D. ONG				34-182	<u>6821</u>	Pa	ige 13
Part XVII			sfers To a	and Transactions a	ind Relations	ships With Noncha	ritabl	е	
	Exempt Organ			_ 				157	
	-			g with any other organization		tion 501(c) of		Yes	No
				7, relating to political organ	izations?		1		
	from the reporting found	nation to a noncharital	pie exempt ori	ganization or;			140/41	ł	v
(1) Cash (2) Other							1a(1)		X
b Other tran							14(2)	\vdash	
	of assets to a noncharita	able exempt organizat	non				16(1)		х
	hases of assets from a no						1b(2)	-	X
	al of facilities, equipment,	•					1b(3)	-	X
(4) Reimi	bursement arrangements	5					1b(4)		Х
(5) Loans	s or loan guarantees						1b(5)		X
(6) Perfo	rmance of services or m	embership or fundrais	sıng solicitatio	ns			1b(6)		X
-	f facilities, equipment, ma						_1c		X
						market value of the goods,		sets,	
				ed less than fair market valu	e in any transactio	n or sharing arrangement, s	how in		
	1) the value of the goods,			a avampt organization	(4) -	 			
(a)Line no	(b) Amount involved	(c) Name of	N/A	exempt organization	(u) Description	on of transfers, transactions, and	snaring a	rangeme	nts
		 			 				_
		 			+				
		 			1				
	_ _	 							
		ļ			_				
		-			<u> </u>				
		 				_ 			
		 			 				
		 		 -	 	 			
						-			
2a Is the four	ndation directly or indirec	ctly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
	501(c) of the Code (other			• -			Yes	X	□No
b If "Yes," co	omplete the following sch	nedule.							
	(a) Name of or	ganization		(b) Type of organization		(c) Description of relations	hip		
	N/A								
									
					·				
Under	penalties of perjury, I declare	that I have examined thi	s return, includir	L ig accompanying schedules and	statements, and to th	e best of my knowledge			
Sign and be	elief, it is true, correct, and co	emplete Declaration of pro	eparer (other tha	n taxpayer) is based on all inforn	nation of which prepar	er nas any knowledge reti	y the IRS urn with thown below	ne prepar	er
Here	Matheme	U. Ung- Xa	nderii	11/15/2017	SECRE		Yes		
Sigr	nature of officer or truste	e 0		Date	Title				
	Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check if PTIN			
	RAYMOND MO	CCARTHY,	122	me CPA	11/14/2017	self- employed			
Paid	CPA						1058		
Preparer Use Only	Firm's name ► HPM	1 PARTNERS	LLC	•		Firm's EIN ► 27-1	TROS	31	
OSE OINS	Firm's address ▶ 5 (י סד. זמווס	O CITT	ጥፑ ጋንሰለ		 			
	1 a andiess > 3 (A LODDIC D	A' BOT	4/VV					

CLEVELAND, OH 44113

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	contribution	Amount
	or substantial contributor	recipient		
OHIO HISTORY CONNECTION	NONE	PC	SUPPORT OF THE QUAKER	
800 E. 17TH AVENUE			MEETING HOUSE	
COLUMBUS, OH 43211			 	25,00
OLD TRAIL SCHOOL	NONE	₽C	SUPPORT OF THE FACULTY	
PO BOX 827			FUND	
BATH, OH 44210				2,50
SAINT LUKE'S PARISH	NONE	₽C	SUPPORT OF SAINT	
1864 POST ROAD			LUKE'S PARISH	
DARIEN, CT 06820		<u></u>	MINISTRIES	1,25
SMITH COLLEGE	NONE	₽C	SUPPORT FOR LIBRARY	
33 ELM STREET			RENOVATION	0.50
NORTHAMPTON, MA 01063	 			2,50
ST. MICHAEL'S OF THE VALLEY EPISCOPAL	NONE	P C	SUPPORT FOR RENOVATION	
CHURCH			OF ORGAN	
PO BOX 336		ł		
LIGONIER, PA 15658				23,50
THE HOTCHKISS SCHOOL	none	₽C	SUPPORT OF THE	
11 INTERLAKEN ROAD			HOTCHKISS FUND	
LAKEVILLE, CT 06039	 			1,25
UNIVERSITY HOSPITALS RAINBOW BABIES &	NONE	PC	SUPPORT FOR THE	
CHILDREN'S HOSPITAL			PEDIATRIC	
11100 EUCLID AVENUE			OPHTHALMOLOGY FUND	
CLEVELAND, OH 44106			<u> </u>	10,00
Tabellana		<u> </u>		
Total from continuation sheets				66,00

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

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.lrs.gov/form990.

OMB No 1545-0047

2016

Employer identification number Name of the organization ICF FOUNDATION JOHN D. ONG 34-1826821 Organization type (check one) Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (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 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 J 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 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)

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).

Name of organization ICF FOUNDATION JOHN D. ONG

Employer identification number

34-1826821

Part I	Contributors (See instructions) Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN & MARY ONG 9 AURORA STREET, SUITE 2 HUDSON, OH 44236	\$21,300.	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.)
623452 10-1	8-16	Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

ICF FOUNDATION JOHN D. ONG

Employer identification number

34-1826821

Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed.

		<u>`</u>	
(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
i		\$	
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	000 000 F7 or 000 BF\ /2016

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SEC	URITIES S	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE		
GOLDMAN SACHS #020-52751-1 GOLDMAN SACHS	16,591.		0. 16,59	1. 16,591.	
#020-55459-8	51,112.	45	7. 50,65	5. 50,655.	
TO PART I, LINE 4	67,703.	45	7. 67,24	6. 67,246.	
FORM 990-PF		OTHER I	NCOME	ç	STATEMENT 2
DESCRIPTION			(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GOLDMAN SACHS #020- NONDIVIDEND DISTRIB INSURANCE PREMIUM R	UTIONS		651. 13.		
TOTAL TO FORM 990-P	F, PART I,	LINE 11	664.	0.	
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
TAX RETURN PREPARAT	ION FEES	4,000.	0	•	2,000.
TO FORM 990-PF, PG	 1, LN 16B	4,000.	0	•	2,000.

PNC BANK FEES 148. 148. 0. TO FORM 990-PF, PG 1, LN 16C 17,058. 17,058. 0. FORM 990-PF TAXES STATEMENT 5 (A) EXPENSES NET INVEST- ADJUSTED PER BOOKS MENT INCOME NET INCOME PURPOSES CHARITABLE PURPOSES NET INCOME NET INCOME PURPOSES FOREIGN TAXES PAID 1,168. 1,168. 0. TO FORM 990-PF, PG 1, LN 18 1,168. 1,168. 0.	FORM 990-PF	OTHER PROFES	SIONAL FEES	S'	PATEMENT	4
Tees	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITAB	
FORM 990-PF TAXES (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABLE PER BOOKS FOREIGN TAXES PAID 1,168. 1,168. 1,168. 0. TO FORM 990-PF, PG 1, LN 18 1,168. 1,168. (C) CHARITABLE PURPOSES FORM 990-PF, PG 1, LN 18 1,168. 1,168. (A) (B) EXPENSES NET INVEST- ADJUSTED CHARITABLE PURPOSES PRINTING & COPYING PER BOOKS PRINTING & COPYING OFFICE CLEANING 900. 0. 457. OFFICE CLEANING 900. 0. 1,500. OFFICE SUPPLIES 951. 0. 4476. CHOILD FILING FEES 951. 0. 4476. OHIO FILING FEES 200. 0. 200. OTHER EXPENSES 827. 0. 414. UTILITIES 827. 0. 979.	FEES					0.
CA CB CC CD	TO FORM 990-PF, PG 1, LN 160	17,058.	17,058.			0.
EXPENSES NET INVEST ADJUSTED CHARITABLE	FORM 990-PF	TAX	ES	S	PATEMENT	 5
TO FORM 990-PF, PG 1, LN 18	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITAB	
Ca	FOREIGN TAXES PAID	1,168.	1,168.			0.
(A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABLE PRINTING & COPYING 913. 0. 457. OFFICE CLEANING 900. 0. 450. INTERNET/COMMUNICATIONS 2,999. 0. 1,500. OFFICE SUPPLIES 951. 0. 476. FEDEX 492. 0. 246. OHIO FILING FEES 200. 0. 200. OTHER ADMINISTRATIVE 827. 0. 414. EXPENSES 827. 0. 414. UTILITIES 1,957. 0. 979.	TO FORM 990-PF, PG 1, LN 18	1,168.	1,168.			0.
DESCRIPTION EXPENSES PER BOOKS NET INVEST- NET INCOME ADJUSTED PURPOSES PRINTING & COPYING 913. 0. 457. OFFICE CLEANING 900. 0. 450. INTERNET/COMMUNICATIONS 2,999. 0. 1,500. OFFICE SUPPLIES 951. 0. 476. FEDEX 492. 0. 246. OHIO FILING FEES 200. 0. 200. OTHER ADMINISTRATIVE 827. 0. 414. UTILITIES 1,957. 0. 979.	FORM 990-PF	OTHER E	XPENSES	S	PATEMENT	6
OFFICE CLEANING 900. 0. 450. INTERNET/COMMUNICATIONS 2,999. 0. 1,500. OFFICE SUPPLIES 951. 0. 476. FEDEX 492. 0. 246. OHIO FILING FEES 200. 0. 200. OTHER ADMINISTRATIVE 827. 0. 414. UTILITIES 1,957. 0. 979.	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITAB	
TO FORM 990-PF, PG 1, LN 23 9,239. 0. 4,722.	OFFICE CLEANING INTERNET/COMMUNICATIONS OFFICE SUPPLIES FEDEX OHIO FILING FEES OTHER ADMINISTRATIVE EXPENSES	900. 2,999. 951. 492. 200.	0. 0. 0. 0.		45 1,50 47 24 20	0. 6. 6.
	TO FORM 990-PF, PG 1, LN 23	9,239.	0.		4,72	2.

STATEMENT 7

FORM 990-PF

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
APPLE INC	16,768.	37,873.
BOEING COMPANY	0.	0.
PRUDENTIAL FINANCIAL INC	0.	0.
COSTCO WHOLESALE CORP	6,430.	21,935.
EXXON MOBIL CORP	24,568.	27,439.
HONEYWELL INTL INC	4,119.	15,987.
JPMORGAN CHASE & CO	14,582.	38,744.
NIKE CLASS B	5,473.	17,598.
EMC CORPORATION MASS		
	19 066	0.
GENERAL ELECTRIC CO	18,966.	31,649.
ALPHABET INC CMN CLASS A	9,508.	24,566.
AMERICAN TOWER CORP	11,282.	23,377.
DEVON ENERGY CORP	0.	0.
VIACOM INC	22,769.	16,273.
ABBOTT LABORATORIES	19,356.	24,506.
AMAZON.COM INC	8,196.	26,246.
BANK OF AMERICA CORP	0.	0.
MICROSOFT CORP	24,558.	37,595.
WAL-MART STORES INC	23,578.	23,880.
WHOLE FOODS MARKET INC	41,415.	27,192.
AMERICAN INTL GROUP INC	0.	0.
COLGATE-PALMOLIVE CO	0.	0.
FIRSTENERGY CORP	0.	0.
GAP INC	0.	0.
INTEL CORP	13,352.	18,969.
INTERCONTINENTAL EXCHANGE INC	15,783.	20,537.
MYLAN INC	0.	0.
PFIZER INC	26,305.	27,965.
VERIZON COMMUNICATIONS INC	9,990.	11,370.
E.I. DU PONT DE NEMOURS & CO CMN	10,639.	13,873.
PROCTER & GAMBLE COMPANY CMN	0.	0.
STARBUCKS CORP CMN	0.	0.
WALGREENS BOOTS ALLIANCE INC CMN	18,390.	17,628.
ALLERGAN PLC CMN	19,545.	15,541.
AMERICAN EXPRESS CO	21,799.	24,965.
CISCO SYSTEMS INC	19,839.	19,159.
CONOCOPHILLIPS CMN	20,369.	24,167.
ELI LILLY & CO CMN	18,361.	18,093.
GENERAL MOTORS CO	15,730.	15,086.
MASTERCARD INC	17,013.	20,444.
PRICELINE GROUP INC	11,507.	13,195.
SCHLUMBERGER LTD CMN	18,108.	20,099.
SHERWIN-WILLIAMS CO	14,791.	13,706.
UNION PACIFIC CORP	17,729.	23,535.
WALT DISNEY CO	15,763.	15,633.
WELLS FARGO & CO	33,531.	38,191.
TOTAL TO FORM 990-PF, PART II, LINE 10B	590,112.	767,016.

CORPORATE STOCK

FORM 990-PF (OTHER	INVESTMENTS		STAT	EMENT	8
DESCRIPTION		VALUATION METHOD	BOOK VALU		MARKE ALUE	т
ISHARES MSCI EAFE INDEX FUND		COST	288,5	 06.	361,5	05.
GS CORE FIXED INCOME FUND		COST	578,7	41.	587,8	90.
GS HIGH YIELD FLOATING RATE FD		COST	128,1	49.	126,1	70.
VANGUARD FTSE EMERGING MKTS		COST	79,8	23.	71,8	82.
ISHARES U.S. REAL ESTATE ETF		COST	51,2	21.	62,4	75.
SPDR DJ WILSHIRE INT'L REAL ESTA	ATE	COST	51,2	65	46,5	79
HARTFORD EMERGING MARKETS LOCAL		COST	31,2		4 0,5	
DEBT FUND				0.		0.
GS TACTICAL TILT IMPLEMENTATION		COST				
FUND		~~~	188,4		187,3	
EATON VANCE INCOME FUND OF BOSTO	ON	COST	100,6	46. —————	103,5	80.
TOTAL TO FORM 990-PF, PART II, I	LINE 1	13	1,466,7	71. 1 ===================================	,547,4	08.
FORM 990-PF PART VIII - LI TRUSTEES AN		NDATION MANA		STAT		9
TRUSTEES AN	ND FOU	JNDATION MANA	GERS COMPEN-	EMPLOYEE BEN PLAN	EXPEN	SE
NAME AND ADDRESS	ND FOU	TITLE AND	COMPEN- SATION	EMPLOYEE	EXPEN	SE
NAME AND ADDRESS JOHN D. ONG	ND FOU	TITLE AND AVRG HRS/WK RESIDENT/TRUS	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPEN	SE NT
NAME AND ADDRESS	ND FOU	TITLE AND	COMPEN- SATION	EMPLOYEE BEN PLAN	EXPEN	SE
NAME AND ADDRESS JOHN D. ONG 9 AURORA STREET, SUITE 2	ND FOU	TITLE AND AVRG HRS/WK RESIDENT/TRUS	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPEN	SE NT
NAME AND ADDRESS JOHN D. ONG 9 AURORA STREET, SUITE 2 HUDSON, OH 44236 MARY LEE ONG 9 AURORA STREET, SUITE 2	PF	TITLE AND AVRG HRS/WK RESIDENT/TRUS' 2.00	COMPEN- SATION TEE	EMPLOYEE BEN PLAN CONTRIB	EXPEN	SE NT
NAME AND ADDRESS JOHN D. ONG 9 AURORA STREET, SUITE 2 HUDSON, OH 44236 MARY LEE ONG 9 AURORA STREET, SUITE 2 HUDSON, OH 44236 JOHN F. H. ONG 9 AURORA STREET, SUITE 2	ND FOU	TITLE AND AVRG HRS/WK RESIDENT/TRUS' 2.00 ICE PRESIDENT 1.00 RUSTEE	COMPEN- SATION TEE 0.	EMPLOYEE BEN PLAN CONTRIB	EXPEN	0.
NAME AND ADDRESS JOHN D. ONG 9 AURORA STREET, SUITE 2 HUDSON, OH 44236 MARY LEE ONG 9 AURORA STREET, SUITE 2 HUDSON, OH 44236 JOHN F. H. ONG 9 AURORA STREET, SUITE 2 HUDSON, OH 44236 RICHARD P. B. ONG 9 AURORA STREET, SUITE 2	VI	TITLE AND AVRG HRS/WK RESIDENT/TRUS' 2.00 ICE PRESIDENT 1.00 RUSTEE 1.00	COMPENSATION TEE 0. 0.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPEN	SE NT 0.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

10

NAME OF MANAGER

JOHN D. ONG MARY LEE ONG