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Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

► 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.

2016 Open to Public Inspection

For	calen	dar year 2016 or tax year beginning	, 2016	, and	ending		, 20
		undation				r Identification numbe	r
Cas	stele Fa	amily Foundation				34-1836479	
		d street (or P.O. box number if mail is not delivered to street address)	Room/	'sulte	B Telephon	e number (see instructi	ons)
161	03 Lak	e Avenue				216-221-6358	
		n, state or province, country, and ZIP or foreign postal code	······································		C If exempt	ion application is pendi	ng, check here ▶
Lai	ewood	I, OH 44107					,
			of a former public	charity	D 1. Foreign	organizations, check t	nere ►
		☐ Final return ☐ Amended r	•			•	_
		☐ Address change ☐ Name char	nae			n organizations meeting here and attach compu	
	Check	type of organization: Section 501(c)(3) exempt p			E If private	foundation status was t	terminated under
		in 4947(a)(1) nonexempt charitable trust Other tax		ation	section 5	07(b)(1)(A), check here	▶□
		parket value of all assets at J Accounting method					
		f year (from Part II, col. (c), Other (specify)				ndation is in a 60-month ction 507(b)(1)(B), check	
	line 16	60,599 (Part I, column (d) must be	on cash basis.)				_
	art i	Analysis of Revenue and Expenses (The total of					(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	ır	come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	475,000			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	2	Check ► ☐ if the foundation is not required to attach Sch. B	773,000				
	3	Interest on savings and temporary cash investments	187		187		
	4	Dividends and interest from securities	167		107	<u> </u>	
	5a	Gross rents					
	b	Net rental income or (loss)		تكافر			
ക	6a	Net gain or (loss) from sale of assets not on line 10					
Ž	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)					
Re	8	Net short-term capital gain					
_	9	Income modifications					
	10a	Gross sales less returns and allowances					7
	ь	Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)				<u></u>	1770
	11	Other income (attach schedule)	ļ				
	12	Total. Add lines 1 through 11	475,187		187		
	13	Compensation of officers directors, trustees, etc.	475,107		107		*
ses	14	Other employee salaries and wages V					
Expenses	15	Pension plans, employee benefits					
ğ	16a	Logal food (attach aghadula)		-			
	b	Accounting fees (attach schedule) 7 2017					
<u>8</u>	C	Other professional fees (attach schedule)	4,000				4,000
Operating and Administrative	17	Interest OGDEN. UT	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1,350
ist	18	Taxes (attach schedule) (see instructions)	<u> </u>				
Ë	19	Depreciation (attach schedule) and depletion					
þ	20	Occupancy					
۲	21	Travel, conferences, and meetings					
ĭ	22	Printing and publications					
<u> </u>	23	Other expenses (attach schedule)	899				899
Ë	24	Total operating and administrative expenses.					
ž]	Add lines 13 through 23	4,899]	4,899
ğ	25	Contributions, gifts, grants paid	429,500			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	429,500
O	26	Total expenses and disbursements. Add lines 24 and 25	434,399				434,399
	27	Subtract line 26 from line 12:					13
	а	Excess of revenue over expenses and disbursements	40,788		,	77.	<i>7.</i>
	Ь	Net investment income (if negative, enter -0-)			187		Š
		Adjusted net income (if negative, enter -0-)					

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	year	
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash-non-interest-bearing	19,812	60,600	60,600	
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ► Pledges receivable ►			·	
	4	Pledges receivable ►			440	
		Piedges receivable ► Less: allowance for doubtful accounts ►				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
,ts	8	Inventories for sale or use		 		
Assets	9	Prepaid expenses and deferred charges				
Ä	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	investments—corporate stock (attach schedule)				
	C	Investments—corporate bonds (attach schedule)				
	11	Investments-land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis ▶			一种	
		Less: accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)				
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item l)	19,812	60,600	60,600	
	17	Accounts payable and accrued expenses		-		
S	18	Grants payable			-	
Liabilities	19	Deferred revenue			3 5	
<u>ड</u>	20	Loans from officers, directors, trustees, and other disqualified persons				
Ë	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe >)				
	23	Total liabilities (add lines 17 through 22)			15. Y	
Balances		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.				
ă	24	Unrestricted				
ā	25	Temporarily restricted				
	26	Permanently restricted	<u> </u>			
Š		Foundations that do not follow SFAS 117, check here ▶ □				
F		and complete lines 27 through 31.	'			
0	27	Capital stock, trust principal, or current funds				
ė	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
155	29	Retained earnings, accumulated income, endowment, or other funds	19,812	60,600		
Net Assets or Fund	30	Total net assets or fund balances (see instructions)	19,812	60,600		
ž	31	Total liabilities and net assets/fund balances (see				
Da		instructions)	19,812	60,600		
_	rt III	al net assets or fund balances at beginning of year—Part II, colu		st agree with	1	
•		i-of-year figure reported on prior year's return)			19,812	
2		er amount from Part I, line 27a			40,788	
3					40,788	
4		I lines 1, 2, and 3		4	60,600	
_				· · · · · · · · · · · · · · · · · · ·	00,800	
E	Total	creases not included in line 2 (itemize) > al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b). li	ne 30 6	60,600	
_			,-//	1	Form 990-PF (2016)	

Part	V Capital Gains and	Losses for Tax on Investm	ent Income				
		e kind(s) of property sold (e.g., real estate se; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation		acquired day, yr.)	(d) Date sold (mo., day, yr)
1a							
b							
<u> </u>							
<u>d</u>					-		
е_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale			n or (loss) (f) minus (g)
а							·····
b					_		· · · · · · · · · · · · · · · · · · ·
С							
d						•	
е	Complete only for assets sho	owing gain in column (h) and owned	by the foundati	on on 12/31/69	 		
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	cess of col. (I) col. (j), if any		ol. (k), but no	l. (h) gain minus t less than -0-) or from col (h))
а							
b							
С							
ď							
е					ļ		
2	Capital gain net income o		also enter in , enter -0- in l		2		
3	If gain, also enter in Part	in or (loss) as defined in sections I, line 8, column (c) (see instructions III (see instructions)	ctions). If (los	ss), enter -0- in)	3		
Part		ler Section 4940(e) for Redu				ne	
Was t		re this part blank. section 4942 tax on the distribut qualify under section 4940(e). D			base pe	riod?	☐ Yes 🗸 No
1		ount in each column for each ye			aking ar	nv entries.	
	(a) Base period years andar year (or tax year beginning in	(b) Adjusted qualitum distribution		(c) e of noncharitable-use a		Dis	(d) stribution ratio divided by col (c))
Oale	2015		4,992		20.029	(001 (0)	4.7
	2014		0,394	······	36,344		2.8
	2013	9	4,907		34,151		2.8
	2012	10	6,075	•	17,361		6.1
	2011	5	1,738		13,724		3.8
2	•)	ide the total c	on line 2 by 5, or by	the _	3	20.
4	Enter the net value of nor	ncharitable-use assets for 2016 f	irom Part X, li	ne5		4	127,39
5	Multiply line 4 by line 3					5	509,56
6	Enter 1% of net investme	ent income (1% of Part I, line 27t	o)			6	
7	Add lines 5 and 6					7	509,56
8		ons from Part XII, line 4 ater than line 7, check the box i				8 rt using a	434,39 1% tax rate. See th

art \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstructio	ons)		
1a	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)				
b					
	here ► ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
3	Add lines 1 and 2		4		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		4		
6	Credits/Payments:				
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 99 99		É		
b	Exempt foreign organizations—tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) . 6c Backup withholding erroneously withheld				
_d	Later the second control of the second contr				
7 8	Total credits and payments. Add lines 6a through 6d	9	9		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10	9	5		
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ 95 Refunded ▶ 11		1		
Part	VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Ye	s No		
	participate or intervene in any political campaign?	1a	1		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b	1		
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
_	Did the foundation file Form 1120-POL for this year?	1c			
c d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
•	(1) On the foundation. ► \$ (2) On foundation managers. ► \$,		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
^	on foundation managers. > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a	1		
4a h	If "Yes." has it filed a tax return on Form 990-T for this year?	4b	 		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	1,		
•	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 1			
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 1			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶		1		
	OHIO				
b	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 ✓			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"				
10	complete Part XIV	9	 '		
10	names and addresses	10	1		
		1 10 1			

Part	VII-A Statements	Regarding Activities (continued)			
				Yes	No
11		rear, did the foundation, directly or indirectly, own a controlled entity within the			
	•	(13)? If "Yes," attach schedule (see instructions)	11		✓
12		a distribution to a donor advised fund over which the foundation or a disqualified			
	•	eges? If "Yes," attach statement (see instructions)	12		✓
13	Did the foundation comply	with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ▶				
14	The books are in care of 1		-221-		
			107-1	247	<u></u>
15		mpt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		. 1	▶ ⊔
		ax-exempt interest received or accrued during the year			
16		lar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
		other financial account in a foreign country?	16		<u> </u>
	the foreign country	xceptions and filling requirements for FinoEN Form 114. If tes, enter the name of	,		j
		700 M . D . D	<u></u>		
Part		Regarding Activities for Which Form 4720 May Be Required		Van	
		m is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	•	undation (either directly or indirectly): exchange, or leasing of property with a disqualified person?	- t	, 1 4 K	
		exchange, or leasing of property with a disqualified person? Yes			!
	disqualified person?	· · · · · · · · · · · · · · · · · · ·	[* \ \!]	٠,	(
	· · · · · · · · · · · · · · · · · · ·	es, or facilities to (or accept them from) a disqualified person? Yes	·		
	- · ·	· · · · · · · · · · · · · · · · · · ·			
		or pay or reimburse the expenses of, a disqualified person?	- ,1		,
	the benefit or use of a		7	,	Ì
		or property to a government official? (Exception. Check "No" if the			ì
	foundation agreed to	make a grant to or to employ the official for a period after	7¢	`# -	
		ment service, if terminating within 90 days.) Yes 🗸 No	'		
b	=	a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			}
		a current notice regarding disaster assistance (see instructions)?	1b		1
	Organizations relying on a	a current notice regarding disaster assistance check here			
C		e in a prior year in any of the acts described in 1a, other than excepted acts, that	٠		
	were not corrected before	the first day of the tax year beginning in 2016?	10		1
2	Taxes on failure to distrib	oute income (section 4942) (does not apply for years the foundation was a private	<i>-</i>		,
	· ·	ned in section 4942(j)(3) or 4942(j)(5)):		,) ;
а		16, did the foundation have any undistributed income (lines 6d and	•	.,,	
		s) beginning before 2016?	, , ;	- 11	
	If "Yes," list the years ▶	20, 20, 20, 20	-		
þ		in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
		ation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			ا ر - ا
	•	No" and attach statement—see instructions.)	2b	 -	/
C		n 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1		
2-	▶ 20 , 20 , 20	nore than a 2% direct or indirect interest in any business enterprise]	-] ;
3a		nore than a 2% direct or indirect interest in any business enterprise ar?			
_				1	
b		ess business holdings in 2016 as a result of (1) any purchase by the foundation or			ļ
		May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the tion 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
		tion 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of first phase holding period? (Use Schedule C, Form 4720, to determine if the	ĺ	[
		usiness holdings in 2016.)	3b		j
4a		during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	17
b		any investment in a prior year (but after December 31, 1969) that could jeopardize its		—	
		d not been removed from Jeopardy before the first day of the tax year beginning in 2016?	4b		1

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Part	VILLE Statements Regarding Activities	for W	hich Form	4720 I	иау Ве К	equire	d (contii	nued)		
5a	During the year did the foundation pay or incur a	-		· · · · ·						
	(1) Carry on propaganda, or otherwise attempt t		•	•	٠,	•	☐ Yes	✓ No		
	(2) Influence the outcome of any specific public directly or indirectly, any voter registration dr		•			-	п.,			
							☐ Yes ☐ Yes	☑ No		
	(3) Provide a grant to an individual for travel, stu(4) Provide a grant to an organization other than						∐ Yes	☑ No		
	• •			_			☐ Yes	☑ No		
	(5) Provide for any purpose other than religious						_			
	purposes, or for the prevention of cruelty to						☐Yes	✓ No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ibed in		
	Regulations section 53.4945 or in a current notice	_	_			uctions)	?		5b	
С	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to	_				 tha tay		▶□		S
C	because it maintained expenditure responsibility						Yes	□No		
	If "Yes," attach the statement required by Regula		-				00			i i
6a	Did the foundation, during the year, receive any					emiums				
	on a personal benefit contract?						☐ Yes	✓ No		
b	Did the foundation, during the year, pay premiun	ns, dire	ctly or indired	tly, on	a personal	benefit	contract	? .	6b	
- -	If "Yes" to 6b, file Form 8870.		محفاط ما مسمد م	مام درمة ا	-lt t	n		[Z] Na		
	At any time during the tax year, was the foundation of "Yes," did the foundation receive any proceeds						Yes	. [√] No n?	7b	
	VIII Information About Officers, Direct									 es.
	and Contractors	•	<u></u>							
1	List all officers, directors, trustees, foundation									
	(a) Name and address	hou	e, and average rs per week	i (lf n	mpensation ot pald,	emplo	Contribution yee benefit	plans	(e) Expens	e account,
		devot	ed to position	en	ter -0-)	and defe	rred compe	nsation		
								-		
	SEE ATACHED									
										
2	Compensation of five highest-paid employed	s (oth	er than tho	se incl	uded on li	ne 1-	see instr	uction	s). If nor	ne, enter
	"NONE."		,		,					
	(a) Name and address of each employee paid more than \$50,00	١٥.	(b) Title, and a		(c) Compe	neation	(d) Contrib employee	benefit	(e) Expens	se account,
	a) Name and address of each employee paid more than \$50,00	,,,	devoted to p	osition	(c) Compa	isation	plans and compen		other all	owances
					l					
					<u> </u>					
					{					
			 		 					
•••••	NONE				Į					
	1100,100				1					
					})	
Cotal	number of other employees paid over \$50,000 .		<u> </u>		<u> </u>	-			<u> </u>	
	Titilion of outer employees paid over 400,000 .	· · ·	<u> </u>	• • •	-: · · ·	· · · ·			Form 990	-PF (2016)

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Part VIII	Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly Paid Em	ployees,
3 Five	nighest-paid independent contractors for professional services (see	instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
			ł
	NONE		
·		· · · · · · · · · · · · · · · · · · ·	
otal numbe	er of others receiving over \$50,000 for professional services		
			<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
List the four	dation's four largest direct charitable activities during the tax year, include relevant sta	atistical information such as the number of	Evponent
	s and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1			
	NONE		
			<u></u>
2			
			
3			
, —			
4			
			}
Part IX-B	Summary of Program-Related Investments (see instruct	ions)	1
Describe the	two largest program-related investments made by the foundation during the tax year or		Amount
1			
	NONE		
2			

		· <u></u>	
	gram-related investments See instructions.		
3			
Total Add I	nes 1 through 3		
i otai. Auu l	mesturroughs		1

Form 990-PF (2016)

Part		gn lounda	tions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	129,331
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	129,331
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	129,331
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1,940
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	127,391
6	Minimum investment return. Enter 5% of line 5	6	6,369
Part		oundation	
1	Minimum investment return from Part X, line 6	1	6,369
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	4
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,365
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,365
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	6,365
		I , I. I	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	434,399
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	434,399
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	2
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	434,397
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

art	Undistributed income (see instruction	(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part XI,	Corpus	Years prior to 2015	2015	2016
_	line 7		Richard Control		6,365
2	Undistributed income, if any, as of the end of 2016:			0	ŀ
a b	Enter amount for 2015 only		0		·
3	Excess distributions carryover, if any, to 2016:				
	From 2011	1.			1
a b	From 2012	4			i
C	From 2013 93,199	ન '્રફ		· ;	-
d	From 2014 98,578	* ***			١
e	From 2015 93,991			المرساء في الأولاد الم	
f	Total of lines 3a through e	442,027		* `,	
4	Qualifying distributions for 2016 from Part XII,	112,027			
•	line 4: ► \$ 434,399	, '			ì
а	Applied to 2015, but not more than line 2a .	ļ	-	0	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)	•	0	, -	ļ
C	Treated as distributions out of corpus (Election			, ,	1
	required—see instructions)	0	4 c - 5 ' % .	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·
d	Applied to 2016 distributable amount	,	· (* - : ; * -		6,365
е	Remaining amount distributed out of corpus	428,034	-		ĺ
5	Excess distributions carryover applied to 2016	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:	-			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	870,061			,
b	Prior years' undistributed income. Subtract line 4b from line 2b		0	- ,	;
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e	Undistributed income for 2015. Subtract line		, ,		
•	4a from line 2a. Taxable amount-see		1:		
	instructions	•		0	
f	Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017.				
-	distributed in 2017		 		0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)			,	
8	Excess distributions carryover from 2011 not				
	applied on line 5 or line 7 (see instructions) .	51,052	2		
9	Excess distributions carryover to 2017.				
	Subtract lines 7 and 8 from line 6a	819,009	9		
10	Analysis of line 9:				
а	Excess from 2012 105,20	7			
b	Excess from 2013 93,19	9			
С	Excess from 2014 98,57	8			
d	Excess from 2015 93,99				
e	Excess from 2016 428,03	4		1	

Page	1	C

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for	or determination 2016, enter the da	letter that it is a te of the ruling.	private operating ▶		
ь	Check box to indicate whether the four				ction 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
	85% of line 2a					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:			:		
	(1) Value of all assets			ξ		
b	section 4942(j)(3)(B)(j)					
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income	(0 1 - 4 - 4 - 4 - 4		h - formelekten k	od \$5 000 or m	l ava in acceta at
Part	Supplementary Information any time during the year-			ne toundation n	iad \$5,000 or it	iore in assets at
1	Information Regarding Foundation		13.)	· · · _		
a	List any managers of the foundation before the close of any tax year (but of	who have contribu	uted more than 29 ontributed more th	% of the total cont nan \$5,000). (See s	ributions received section 507(d)(2).)	by the foundation
b	List any managers of the foundation ownership of a partnership or other e	who own 10% o ntity) of which the	r more of the sto foundation has a	ck of a corporatio 10% or greater int	n (or an equally lerest.	arge portion of the
2	Information Regarding Contribution Check here ► ✓ if the foundation unsolicited requests for funds. If the other conditions, complete items 2a,	only makes cont foundation makes b, c, and d.	ributions to prese gifts, grants, etc.	elected charitable (see instructions)	to individuals or o	organizations under
а	The name, address, and telephone no	umber or e-mail ac	ddress of the pers	on to whom applic	cations should be	addressed:
b	The form in which applications should	d be submitted an	d information and	materials they sho	ould include:	
С	Any submission deadlines:			 		
d	Any restrictions or limitations on a factors:	wards, such as b	by geographical a	areas, charitable f	ields, kinds of in	stitutions, or other

Form 9	90-PF (2016)				Page 11
Part	XV Supplementary Information (cont	inued)			
3	Grants and Contributions Paid During	the Year or Approv	ed for Futu	ire 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	reciplent		
d	Paid during the year				
	SEE ATACHED SCHEDULE				429,500
	Total				a 429,500
-	Total				b

Part X	MFA Analysis of Income-Producing Ac	tivities				
nter gr	oss amounts unless otherwise indicated.	Unrelated bu	Islness income	Excluded by secti	on 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt function income
		Business code	Amount	Exclusion code	Amount	(See instructions.)
	ogram service revenue:					
a				 		
b				<u> </u>		
C d				 		
-						
e •				 		
, 	Topo and analysis from a superior in			 		
9 2 M	Fees and contracts from government agencies embership dues and assessments	-				
	•	ļ		44	407	
	erest on savings and temporary cash investments			14	187	
	vidends and interest from securities	donal bar tier.	- State Contract Contract			SEAT ME THE SE
	t rental income or (loss) from real estate:		14 Company Control		会の現在数 7年によるとの	
a	Debt-financed property					
b	Not debt-financed property		<u> </u>			
	et rental income or (loss) from personal property	·				
	her investment income			<u> </u>		
	in or (loss) from sales of assets other than inventory			 		
	et income or (loss) from special events					
	oss profit or (loss) from sales of inventory					
	her revenue: a	-				
b						
C						
d						
8		12 the six their Atlanta or		Constant Contraction		
e 12 Su	btotal. Add columns (b), (d), and (e)				187	· · · · · ·
e 12 Su 13 To	btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e)					187
e 12 Su 13 To See wo	btotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation	 ns.)				· · · · · ·
e 12 Su 13 To See wo	btotal. Add columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	ot Purposes	13	187
e 12 Su 13 To See wo	btotal. Add columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	ot Purposes	13	187
e 12 St 13 To See wo Part X Line N	btotal. Add columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	ot Purposes	13	187
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e 12 St 13 To See wo Part X Line N	btotal. Add columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	ot Purposes	13	187
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Form 99	0-PF (2	2016)						Page 13
Part	XVII		n Regarding Tran ganizations	sfers To and Transa	actions and F	Relationship	s With Noncha	aritable
1	in se	he organization of	directly or Indirectly e	engage in any of the fol section 501(c)(3) organi				
а		·	-	a noncharitable exemp	=			
								1a(1) /
		Other assets .						1a(2) /
b	o Other transactions: (1) Sales of assets to a noncharitable exempt organization							
								1b(1) ✓ 1b(2) ✓
				able exempt organization				1b(2) ✓ 1b(3) ✓
			- •	rassets				1b(4) ✓
	• •		~					1b(5) ✓
		_		ip or fundraising solicit				1b(6) 🗸
С				sts, other assets, or pai				1c /
d		-	•	s," complete the follow	-			w the fair market
				ces given by the report				
	value	e in any transaction	on or sharing arrange	ement, show in column	(d) the value o	f the goods,	other assets, or s	ervices received.
(a) Line	no.	(b) Amount involved	(c) Name of nonch	aritable exempt organization	(d) Descr	iption of transfer	s, transactions, and sh	aring arrangements
		 .		- 				
			<u> </u>					
								
	 		 				·	
								
		·						
								
	一十							
						\		
								
						·		
2a b	desc	cribed in section (filiated with, or related other than section 501(-	☐ Yes ☐ No
		(a) Name of organ		(b) Type of organ	ızatlon		(c) Description of relati	onship
								
		·						
				<u> </u>				
Cian-				ed this return, including accomp an taxpayer) is based on all info				edge and belief, it is true,
Sign	' N	(2.0a.17	Costele	13-14-17	\		May the	IRS discuss this return preparer shown below
Here		Contract 1.			Treasurer			ructions)? Tes No
		Print/Type prepare		Date	Title	Date		PTIN
Paid			· s rigilio	Preparer's signature		Date	Check [] if	
Prep							self-employed	L
Use	Only						Firm's EIN ▶	
		Firm's address ▶					Phone no	

Schedule B

(Form 990, 990-EZ, or 990-PF) Schedule of Contributors

OMB No. 1545-0047

2016

Department of the Treasury Internal Revenue Service ► 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.

Name of the organization **Employer identification number** 34-1836479 **Castele Family Foundation** 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) filling Form 990 or 990-EZ that met the 331/3 % 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 religious, charitable, etc., contributions

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).

Employer identification number

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	Seven C's Plus, Ltd 16103 Lake Avenue Lakewood, OH 44107	\$75,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Estate of Theodore J. Castele, Richard T. Castele, Executor 16103 Lake Avenue Lakewood, OH 44107	\$400,000	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

THE CASTELE FAMILY FOUNDATION 34-1836479 ATTACHMENT TO FORM 990-PF 2016

PART 1 LINE 18 (TAXES):	
SECTION 4940 TAX	0
PART 1 LINE 16C (OTHER PROFESSIONAL FEES):	
SEVEN C'S, INC (A MANAGEMENT COMPANY) FOR ALL ACCOUNTING, TAX, AND GRANT MANAGEMENT SERVICES PER CONTRACTUAL AGREEMENT	4,000 =======
PART 1 LINE 23 (OTHER EXPENSES):	
BANK CHARGES FILING FEES TO THE ATTORNEY GENERAL AND	149
SECRETARY OF STATE OF THE STATE OF OHIO TAX PUBLICATIONS	0
ASSOCIATION OF SMALL FOUNDATIONS DUES	750
OFFICE EXPENSES	0
	899

THE CASTELE FAMILY FOUNDATION 34-1836479 ATTACHMENT TO FORM 990-PF 2016

PART VIII (1) (INFORMATION ABOUT OFFICERS, DIRECTORS, TRUSTEES AND FOUNDATION MANAGERS):

A	В	C	D	E
RICHARD T CASTELE 16103 LAKE AVENEUE LAKEWOOD OHIO 44107	MEMBER, TRUSTEE, CHAIRMAN,TREASURER 1 HOUR PER WEEK	LESS THAN \$1,000	0	0
JOHN T CASTELE 28846 WOODMILL DRIVE WESTLAKE, OHIO 44145	MEMBER, TRUSTEE, VICE PRESIDENT, SECRETARY MINIMAL TIME SPENT	MINIMAL	0	0
MARY KAY BINDER 529 MANORBROOK DRIVE CHAGRIN FALLS, OHIO 44022	MEMBER, TRUSTEE, PRESIDENT 5 HOURS PER WEEK	APPROXI- MATELY \$3,000	0	0

ALL ACCOUNTING, LEGAL AND GRANTS MANAGEMENT SERVICES ARE PROVIDED BY A MANAGEMENT COMPANY, SEVEN C'S INC. THE INDIVIDUALS LISTED ABOVE ARE ALL OWNERS OF THE MANAGEMENT COMPANY ALONG WITH FOUR OTHER FAMILY MEMBERS. THE INDIVIDUALS ABOVE ARE ALSO EMPLOYEES OF THE MANAGEMENT COMPANY. THE COMPENSATION NOTED ABOVE IS THE ESTIMATE OF THE AMOUNT OF COMPENSATION PAID BY THE MANAGEMENT COMPANY TO THE INDIVIDUALS FOR THEIR TIME SPENT ON THE ACTIVITIES OF THE FOUNDATION.

THIS COMPENSATION MEETS THE EXCEPTION TO THE RULES OF SELF DEALING PURSUANT TO REG 53.4941(d) -3C IN THAT THE SERVICES PERFORMED ARE REASONABLE AND NECESSARY IN THE MANAGEMENT OF THE FOUNDATION AND ARE NOT EXCESSIVE.

THE CASTELE FAMILY FOUNDATION 34-1836479 ATTACHMENT TO FORM 990-PF 2016

PART XV(3)(a) (GRANTS PAID DURING THE YEAR).

NAME AND ADDRESS OF RECIPIENT	INDIVIDUAL'S RELATIONSHIP	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT	AMOUNT
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVENEUE CLEVELAND, OH 44104	N/A	PUBLIC	CAPITAL CAMPAIGN	350,000
LAKEWOOD DIVISION OF YOUTH 12900 MADISON AVE LAKEWOOD OHIO 44107	N/A	PUBLIC	H2O SUMMER SERVICE CAMP	1,500
SAINT MICHAELS PARISH 432 E FIREWEED PALMER ALAISKA 99845	N/A	PUBLIC	BUILDING FUND	5,000
DANBURY FOOD SHARE PROGRAM INC 541 S CHURCH ROAD MARBLEHEAD OHIO 43440	N/A	PUBLIC	GENERAL SUPPORT	2,000
MEDINA HEALTH MINISTRIES 970 E WASHINGTON ST SUITE 104 MEDINA OHIO 44256	N/A	PUBLIC	GENERAL SUPPORT	2,000
PROVIDENCE HOUSE 2050 W 32ND ST CLEVELAND OH 44113	N/A	PUBLIC	GENERAL SUPPORT	2,000
CLEVELAND CENTRAL CATHOLIC HIGH SCHOOL 6550 BAXTER AVENUE CLEVELAND OHIO 44105	N/A	PUBLIC	A BEACON OF HOPE CAMPAIGN	2,500
MATHEWS LENDING LIBRARY 15528 MADISON AVE LAKEWOOD OHIO 44107	N/A	PUBLIC	GENERAL SUPPORT	1,500
PALMER FOOD BANK PO BOX 2421 PALMER ALASKA 99645	N/A	PUBLIC	GENERAL SUPPORT	2,000
CATHOLIC SOCIAL SERVICES 3710 EAST 20TH AVENUE ANCHORAGE AK 99508 CHRIST CHILD SOCIETY OF CLEVELAND	N/A	PUBLIC	BROTHER FRANCIS SHELTER	2,000
6753 STATE ROAD PARMA OHIO 44134 LIFE ACT	N/A N/A	PUBLIC PUBLIC	GENERAL SUPPORT SAVING TEEN LIVES CAMPAIGN	1,500
29425 CHAGRIN BLVD SUITE 203 CLEVELAND OHIO 44122 JEWISH FAMILY SERVICE ASSOCIATION OF CLEVELAND		PUBLIC	ANNUAL CAMPAIGN	3,000 500
3659 S GREEN ROAD SUITE 322 BEACHWOOD OHIO 44122 WELCOME HOUSE	N/A	PUBLIC	GENERAL SUPPORT	1,000
802 SHARON DRIVE WESTLAKE OHIO 44145 MIDDLEBURG EARLY EDUCATION CENTER	N/A	PUBLIC	GENERAL SUPPORT	1,500
7171 PEARL RD MIDDLEBURG HEIGHTS OH 44130 CAMP IMAGINE	N/A	PUBLIC	SUMMER ACTIVITY PROGRAM	·
PO BOX 26 AVON LAKE OHIO 44012 MERCYHURST UNIVERSITY	N/A	PUBLIC		1,500
501 EAST 38TH STREET ERIE PA 16546			AIM CAREER PATH PROGRAM	2,500
MAGNIFICAT HIGH SCHOOL 20770 HILLIARD BLVD ROCKY RIVER OH 44116	N/A	PUBLIC	ANNUAL FUND	1,000

page 2 of 2

THE CASTELE FAMILY FOUNDATION 34-1836479 ATTACHMENT TO FORM 990-PF 2016

PART XV(3)(a	(GRANTS	PAID DURING	THE YEAR)
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NAME AND ADDRESS OF RECIPIENT	INDIVIDUAL'S RELATIONSHIP	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT	AMOUNT
YOUTH CHALLENGE 800 SHARON DRIVE WESTLAKE, OHIO 44145	N/A	PUBLIC	ANNUAL FUND	3,500
COMMUNITY WEST FOUNDATION 20545 CNETER RIDGE ROAD SUITE 448 CLEVELAND OHIO 44116	N/A	PUBLIC	MOLL CANCER CENTER CARING CONTINUES FUND	2,500
ST ANGELA MERICI CATHOLIC CHURCH 20970 LORAIN ROAD FAIRVIEW PARK OHIO 44126	N/A	PUBLIC	CAPITAL CAMPAIGN	15,000
BELLFAIRE JCB ONE POLLOCK CIRCLE 22001 FAIRMOUNT BLVD CLEVELAND OH 44118	N/A	PUBLIC	HOMELESS YOUTH FUND	2,000
AVON LAKE UNITED CHURCH OF CHRIST 32801 ELECTRIC BOULEVARD AVON LAKE OH 44012	N/A	PUBLIC	NURSERY SCHOOL SCHOLARSHIPS	1,000
THE MSA COALITION 9935-D REA ROAD #212 CHARLOTTE NC 28277	N/A	PUBLIC	GENERAL SUPPORT	1,500
OUR LADY OF THE SEAS CATHOLIC COMMUNITY 48478 HIGHWAY 12 S BUXTON NC 27920	N/A	PUBLIC	GENERAL SUPPORT	2,500
ST IGNATIUS HIGH SCHOOL 1911 LORAIN AVENUE CLEVELAND OHIO 44113	N/A	PUBLIC	MARION MALL PROJECT	6,500
GREATER CLEVELAND FOOD BANK 15500 OUTH WATERLOO RD CLEVELAND OHIO 44110	N/A	PUBLIC	GENERAL SUPPORT	1,000
BOY SCOUTS OF AMERICA GREATER CLEVELAND COUNCIL 2241 WOODLAND AVE CLEVELAND OHIO 44115	N/A	PUBLIC	SUPPORT OF URBAN SCOUTS AND THE BEAUMONT CAMPERHIP FUND	6,500
FRIENDS OF CASA OF GEAUGA COUNTY PO BOX 21 NOVELTY OH 44072	N/A	PUBLIC	GENERAL SUPPORT	1,000
CLEVELAND KIDS BOOK BANK 3635 PERKIN AVENUE, SUITE 1E CLEVELAND OH 44114	N/A	PUBLIC	GENERAL SUPPORT	2,500
GREATER CLEVELAND AL ANON CLEVELAND OH	N/A	PUBLIC	GENERAL SUPPORT	1,000

TOTAL 429,500