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

OMB No 1545-0052

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury

| | | dar year 2016 or tax year beginning | and ending | iistructions i | 5 awww.ii | s.gov/torinissopi. | Open to Funic mapecus |
|------------------------------|-----------------|--|--|--|-----------|---|--|
| | - | undation , a | and ending | | A Empl | oyer identification number | · · · · · · · · · · · · · · · · · · · |
| | | | | | | | |
| С | DM | FOUNDATION, INC. | | | 36 | -3656304 | |
| | | d street (or P O box number if mail is not delivered to street address) | | Room/suite | | hone number (see instruction | s) |
| | | BOX 1655 | | | 57 | 4-232-8213 | |
| | | n, state or province, country, and ZIP or foreign postal code H BEND IN 46634-1 | 655 | | C If exe | mption application is pending | check here |
| | | | -11 | ┥ | | | |
| G | леск | | n of a former public o | cnarity | D 1 Fo | oreign organizations, check hi | ere |
| | | Final return Amended | | | J | preign organizations meeting i% test, check here and attact | |
| | | Address change Name cha | <u> </u> | | - | A lest, check here and attack | 1 computation |
| | | type of organization Section 501(c)(3) exempt private | | | 1 | ate foundation status was teri n 507(b)(1)(A), check here | ninated under |
| | | i i | e private foundation | | 1 | | _ |
| | | ket value of all assets at J Accounting method | Cash X A | ccrual | 1 | foundation is in a 60-month to section 507(b)(1)(B), check h | |
| | - | ear (from Part II, col. (c), ■ \$ 3,493,303 (Part I, column (d) must b | | | didei | section 507 (b)(1)(b), Gleck I | leie |
| | ne 16) art I | | | | 1. | | (d) Disbursements |
| 7 | ai L i | Analysis of Revenue and Expenses(The total of amounts in columns (b), (c), and (d) may not necessarily equal | (a) Revenue and expenses per | (b) Net in | | (c) Adjusted net | for charitable |
| | | the amounts in column (a) (see instructions)) | books | inco | iiie | income | purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | 74,35 | 9 | | | |
| | 2 | Check ► If the foundation is not required to attach Sch_B | | | | | |
| | 3 | Interest on savings and temporary cash investments | 16 | | 169 | | |
| | 4 | Dividends and interest from securities | 102,52 | 1 1 | 02,521 | | |
| | 5a | Gross rents | | | | DECEN | The state of the s |
| ne | b | Net rental income or (loss) | 000 50 | | | RECEN | harrowene (cd f |
| 117 Revenue | 6a | Net gain or (loss) from sale of assets not on line 10 | 298,58 | <u> </u> | | S MOA S (| 30 S |
| é ~ | b | Gross sales price for all assets on line 6a 526, 324 | | | 98,580 | 18 140, 50 | ZU1/ 1/2 |
| 2017 Re | 7 8 | Capital gain net income (from Part IV, line 2) | | | 90,360 | OGDEN | |
| . J | 9 | Net short-term capital gain Income modifications | | | | OODLIG | V1 |
| .73 | 10a | Gross sales less returns and allowances | | - | | | |
| > | ь | Less Cost of goods sold | | | | *************************************** | |
| <u> </u> | c | Gross profit or (loss) (attach schedule) | · · · · · · · · · · · · · · · · · · · | | | | |
| _ | 11 | Other income (attach schedule) | | | | | |
| <u>.</u> | 12 | Total. Add lines 1 through 11 | 475,62 | 9 4 | 01,270 | 0 | |
| , | 13 | Compensation of officers, directors, trustees, etc | | 0 | | | |
| anses | 14 | Other employee salaries and wages | | | | | |
| | 15 | Pension plans, employee benefits | | | | | |
| Exp | 16a | Legal fees (attach schedule) See Stmt 1 | 1,71 | | | | |
| Ш | b | Accounting fees (attach schedule) Stmt 2 | 5,00 | | 5,000 | | |
| Ę | С | Other professional fees (attach schedule) Stmt 3 | 25,00 | 0 | 25,000 | | |
| tra | 17 | Interest | | | | | |
| nis. | 18 | Taxes (attach schedule) (see instructions) Stmt 4 | 10,86 | 9 | | | |
| Ë | 19 | Depreciation (attach schedule) and depletion | | | | | |
| Αd | 20 | Occupancy Travel, conferences, and meetings | | | | | |
| P | 21 | Printing and publications | · | | | | |
| ā | 23 | Other expenses (att sch) Stmt 5 | 41 | 4 | | | |
| . <u>E</u> . | 24 | Total operating and administrative expenses. | | <u>-</u> | | | - |
| rat | | Add lines 13 through 23 | 42,99 | 3 | 30,000 | 0 | o |
| Operating and Administrative | 25 | Contributions, gifts, grants paid | 250,00 | | , | | 250,000 |
| 0 | 26 | Total expenses and disbursements.Add lines 24 and 25 | 292,99 | | 30,000 | 0 | 250,000 |
| | 27 | Subtract line 26 from line 12 | ······································ | | | | <u>-</u> |
| | а | Excess of revenue over expenses and disbursements | 182,63 | | | | |
| | ь | Net investment income (if negative, enter -0-) | | 3 | 71,270 | | |
| | С | Adjusted net income(if negative, enter -0-) | | | | 0 | |

For Paperwork Reduction Act Notice, see instructions.

| Part II Balance Sheets | Fo | rm 990 | O-PF (2016) CDM FOUNDATION, INC. | 36-365630 | 4 | Page 2 |
|--|--------------|--------|--|-------------------|----------------|---------------------------------|
| 1 Cash - non-interest-beams (girar standardors) (girar stan | | | No. of the desired and the second and the desired and the second a | Beginning of year | End of | |
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| 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ▶) | \exists | 17 | | | | |
| 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ▶) 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total liabilities and net assets/fund balances(see instructions) 28 Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Decreases not included in line 2 (itemize) ▶ | | 18 | Grants payable | | | |
| Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) 4 Analysis of Changes in Net Assets or Fund Balances 5 Decreases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 Total remains (itemize) 5 Total remains (itemize) 7 O | es | | | | | |
| Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) 4 Analysis of Changes in Net Assets or Fund Balances 5 Decreases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 Total remains (itemize) 5 Total remains (itemize) 7 O | ≝ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) 4 Analysis of Changes in Net Assets or Fund Balances 5 Decreases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 Total remains (itemize) 5 Total remains (itemize) 7 O | ab | 21 | | | | |
| Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 | | 22 | Other liabilities (describe ▶) | | | |
| and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) 40 Part III Analysis of Changes in Net Assets or Fund Balances 41 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 42 Enter amount from Part I, line 27a 43 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | | 23 | Total liabilities (add lines 17 through 22) | 0 | 0 | |
| Unrestricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg , and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances(see instructions) Total liabilities and net assets/fund balances(see instructions) Total net assets or fund balances(see instructions) Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5 | Т | | Foundations that follow SFAS 117, check here | | | |
| 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | S | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | 낕 | 24 | Unrestricted | | | |
| 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | ॿ | 25 | Temporarily restricted | | | |
| 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | ä | 26 | | | | |
| 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | Ĕ | | | | | |
| 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances(see instructions) 31 Total liabilities and net assets/fund balances(see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | Ē | | and complete lines 27 through 31. | | | |
| Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | ō | 27 | Capital stock, trust principal, or current funds | 1,892,225 | 2,103,265 | |
| Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | ě | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | |
| Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | SS | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | - | 30 | Total net assets or fund balances(see instructions) | 1,920,629 | 2,103,265 | |
| Part iil Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | Z | 31 | Total liabilities and net assets/fund balances(see | | | |
| 1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | \perp | | instructions) | 1,920,629 | 2,103,265 | |
| end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | _ | | | | " | |
| 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | 1 | Tota | I net assets or fund balances at beginning of year – Part II, column (a), line 30 (must | t agree with | | 1 000 600 |
| 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | | | | | 1 | |
| 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 | 2 | | | | | 182,636 |
| 5 Decreases not included in line 2 (itemize) ▶ | 3 | | | | | 2 102 265 |
| 5 Decreases not moraged in time 2 (normally) | 4 | | | | | 2,103,265 |
| | 5 | | | | 1 | 2 102 205 |
| O Total net about of lene believed at the figure (miles) | 6 | Tota | I net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b) |), line 30 | | 2,103,265 Form 990-PF (2016) |

Page 3

| | nd Losses for Tax on Investm | ent Income | | 30 3030304 | · | | Fage |
|---|--|------------------|-------------|--|--------------|------------------------|--|
| (a) List and desc | cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.) | | | (b) How acquired P - Purchase D - Donation | | e acquired day, yr) | (d) Date sold (mo , day, yr) |
| 1a See Worksheet | | | | | | | |
| b | | | | | | | |
| С | | | | | ļ | | ļ |
| _d | | | | | | | _ |
| e | (D.D | | 4-101 | | | #10 | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | 10. | other basis nse of sale | | | n or (loss) f) minus (g) |
| _a | | | | | | | |
| <u>b</u> | | | | | | | |
| c d | | | | | ļ | | |
| e | | | | | | | |
| | gain in column (h) and owned by the fo | oundation on 1 | 2/31/69 | | | (I) Gains (Col | (h) gain minus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | | s of col (i) (j), if any | 0 | ol (k), but not | less than -0-)or om col (h)) |
| a | | | | | | | |
| _b | | | | | | | |
| <u>c</u> | | | | | | | |
| <u>d</u> | | | | | | | |
| Capital gain net income or (net ca | pital loss) If gain, also enter i | | 7 | | 2 | | 298,580 |
| If gain, also enter in Part I, line 8, | s) as defined in sections 1222(5) and (6 column (c) (see instructions) If (loss), e | 5) | <u> </u> | | | | |
| Part I, line 8 Part V Qualification Un | der Section 4940(e) for Reduc | 17. | | | 3 | | |
| | s part blank on 4942 tax on the distributable amount y under section 4940(e) Do not comple | • • | the base | period? | | | Yes X No |
| 1 Enter the appropriate amount in e | ach column for each year, see the instru | uctions before | making a | nny entries | | | |
| (a) Base period years Calendar year (or tax year beginning ir | (b) Adjusted qualifying distribution | ons | Net value | (c) of noncharitable-use asse | ts | | (d) ribution ratio divided by col (c)) |
| 2015 | | 1,600 | | 3,402, | 123 | | 0.047500 |
| 2014 | 18 | 3,350 | | 3,390, | | | 0.054085 |
| 2013 | | 4,700 | | 3,210, | | | 0.060645 |
| 2012 | | 2,636 | | 2,701, | | | 0.086105 |
| 2011 | | 8,012 | | 2,586, | 04/ | | 0.092037 |
| 2 Total of line 1, column (d) | | | | | 2 | . | 0.340372 |
| , , , | -year base period – divide the total on li | ine 2 by 5, or b | y the | | | | |
| | as been in existence if less than 5 years | | | | 3 | <u>-</u> | 0.068074 |
| 4 Enter the net value of noncharitab | le-use assets for 2016 from Part X, line | 5 | | | 4 | | 3,394,161 |
| 5 Multiply line 4 by line 3 | | | | | _5 | | 231,054 |
| 6 Enter 1% of net investment income | e (1% of Part I, line 27b) | | | | _6 | | 3,713 |
| 7 Add lines 5 and 6 | | | | | 7 | | 234,767 |
| 8 Enter qualifying distributions from | | and samplets | that === | uoing a 49/ tourst- | | | 250,000 |
| Part VI instructions | line 7, check the box in Part VI, line 1b, | , and complete | uiai pari | using a 170 tax rate | See the | | |

| Forn | 1990-PF (2016) CDM FOUNDATION, INC. 36-3656304 | | | | F | age 4 |
|------|--|----|-----|-----|-----|-------|
| Pa | art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions) | | | | | |
| 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 | Domestic foundations that meet the section 4940(e) requirements in Part V, check | 1 | [| | 3, | 713 |
| | here ▶ X 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) | | ĺ | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | 2 | | | | 0 |
| 3 | Add lines 1 and 2 | 3 | | | 3, | 713 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | 5 | | | 3, | 713 |
| 6 | Credits/Payments | | | | | |
| а | 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 10,000 | | | | | |
| b | Exempt foreign organizations – tax withheld at source | | | | | |
| С | Tax paid with application for extension of time to file (Form 8868) | | | | | |
| d | Backup withholding erroneously withheld 6d 6d | | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | 7 | | | 10, | 000 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here | 8 | | | | 21 |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | 6, | 266 |
| 11 | Enter the amount of line 10 to be Credited to 2017 estimated tax▶ 6,266 Refunded ▶ | 11 | | | | |
| Pa | art 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 | | | | Yes | No |
| | participate or intervene in any political campaign? | | | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | | | |
| | Instructions for the definition)? | | | 1b | | х |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | | |
| | published or distributed by the foundation in connection with the activities | | | | | |
| С | 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) 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 🕨 💲 | | | | | Į |
| 2 | Has the foundation engaged in any activities that have not previously been 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 IRS, in its governing instrument, articles of | | | | | ŀ |
| | incorporation, 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 contraction during the year? | | | 5 | | X |
| | 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 | X | |
| 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 | X | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | |
| | IL | | | | | |
| 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 | X | |
| 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," | | | ĺ | 1 | |
| | complete Part XIV | | | 9 | | X |
| 0 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | | | |
| | names and addresses | | | 10_ | | _X_ |
| _ | | | | | | |

| Form | 1990-PF (2016) CDM FOUNDATION, INC. 36-36563 | 04 | | | _ P | age 5 |
|------|---|---------------|-------|-----|-----|--------------|
| | art VII-A Statements Regarding Activities (continued) | | | | | |
| | att the otation one regulating view of the same of | | | | 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 | | | | | |
| 12 | person had advisory 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 applica | tion? | | 13 | X | |
| | Website address N/A | | · | | | |
| 14 | The books are in care of ▶ DONALD M. RIGGS, TREASURER | elephone no 🕨 | 574-2 | 32- | 821 | 3 |
| 1-7 | 112 W. JEFFERSON BLVD. SUITE 250 | · | | | | |
| | Located at ▶ SOUTH BEND IN | ZIP+4 ▶ | 46601 | | | |
| 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 | | | |
| 16 | At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority | _ | | | Yes | No |
| 10 | over a bank, 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 foreign country | | | | | |
| P2 | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | | | | |
| ıa | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | Yes | X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | | | |
| | disqualified person? | Yes | X No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | Yes | X No | | | : |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | Yes | X No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | | | | |
| | the benefit or use of a disqualified person)? | Yes | X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | | | |
| | foundation agreed to make a grant to or to employ the official for a period after | | | | | |
| | termination of government service, if terminating within 90 days) | Yes | X No | : | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulat | ions | | | | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | | N/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | ▶ □ | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | | | | | Ī |
| Ū | were not corrected before the first day of the tax year beginning in 2016? | | N/A | 1c | | |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | | | |
| - | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | | | |
| а | At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and | | | | | |
| _ | 6e, Part XIII) for tax year(s) beginning before 2016? | Yes | X No | | | |
| | If "Yes," list the years ▶ 20 , 20 , 20 , 20 | | _ | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | | | Ī |
| - | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | | | |] . | |
| | all years listed, answer "No" and attach statement – see instructions) | | N/A | 2b | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | [| | |
| | ▶ 20 | | | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | | | |
| | at any time during the year? | Yes | X No | | | |
| b | If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or | | | | | |
| | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the | | | | | l |
| | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of | | | | | |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | | | | |
| | foundation had excess business holdings in 2016) | | N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose | s? | | 4a | | X |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | | | 1 |
| | charitable purpose that had not been removed from jegnardy before the first day of the tax year beginning in 2 | | | 4b | l | X |

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| orm | 990-PF (2016) CDM FOUNDATION, INC. | 36-3 | 656304 | | | Page | 6 |
|-----|--|--|---|--|--------------|------------------------------|----------|
| Pa | art VII-B Statements Regarding Activities for Which Form | 720 May Be Re | quired (conti | nued) | | | |
| 5a | During the year did the foundation pay or incur any amount to | | | | | 1 | |
| | (1) Carry on propaganda, or otherwise attempt to influence legislation (section 45 | 945(e))? | \ \ \ | res 🗓 No | | I | |
| | (2) Influence the outcome of any specific public election (see section 4955), or to | carry on, | _ | | | ı | |
| | directly or indirectly, any voter registration drive? | | \ \ | res 🗓 No | | ł | |
| | (3) Provide a grant to an individual for travel, study, or other similar purposes? | | | res 🗓 No | | ŧ | |
| | (4) Provide a grant to an organization other than a charitable, etc., organization of | lescribed in | | | | 1 | |
| | section 4945(d)(4)(A)? (see instructions) | | \ | res X No | | I | |
| | (5) Provide for any purpose other than religious, charitable, scientific, literary, or | educational | | | | ŧ | |
| | purposes, or for the prevention of cruelty to children or animals? | | | res 🗓 No | | 1 | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under | the exceptions desc | cribed in | | | ı | |
| | Regulations section 53 4945 or in a current notice regarding disaster assistance (| | | N/A | 5b | | _ |
| | Organizations relying on a current notice regarding disaster assistance check her | | | ▶ 🗍 | | 1 | |
| С | If the answer is "Yes" to question 5a(4), does the foundation claim exemption from | n the tax | | | | 1 | |
| | because it maintained expenditure responsibility for the grant? | | N/A 🗌 | ∕es No | | | |
| | If "Yes," attach the statement required by Regulations section 53 4945–5(d) | | _ | | | ŧ | |
| 6a | Did the foundation, during the year, receive any funds, directly or indirectly, to pay | premiums | | | | 1 | |
| | on a personal benefit contract? | | | res 🗓 No | | Į. | |
| b | Did the foundation, during the year, pay premiums, directly or indirectly, on a pers | onal benefit contract | ? | | 6b | X | <u> </u> |
| | If "Yes" to 6b, file Form 8870 | | | | | | |
| 7a | At any time during the tax year, was the foundation a party to a prohibited tax she | Iter transaction? | \rightarrow \text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\tint{\text{\text{\text{\text{\text{\text{\tint{\text{\tint{\tint{\text{\text{\tint{\text{\tint{\text{\tint{\text{\tint{\text{\tint{\text{\tinit{\text{\text{\text{\text{\text{\tinit}\xint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinit{\text{\tinit{\text{\text{\text{\text{\tinit{\text{\text{\tinit{\tinit{\tinit{\text{\tinit{\text{\tinit{\text{\text{\tinit}\xitit{\tinit{\text{\tinit{\text{\tinit{\tinit{\text{\tinit{\titil\tinit{\tinit{\tinit{\text{\tinit{\tinit{\tinit{\tinit{\tinit}}\\\ \tinit{\tinit{\tinit{\tinit{\tinit{\tinit{\tinit{\tinit{\tinit{\tinit{\tiit}\xiitit{\tinit{\tiitit{\tinit{\tiit}\tiitit{\tiitit{\tiitit{\tiitit{\tiitit{\tiitit{\tiitit{\tiitit{\tiitit{\tiitit{\tiitit{\tiitit{\tiititit{\tiitit{\tiititit{\tiitititit | res X No | | 1 | |
| | If "Yes," did the foundation receive any proceeds or have any net income attribute | | n? | N/A | 7b | | |
| | art VIII Information About Officers, Directors, Trustees, Fo | | | aid Employees | 3, | | |
| | and Contractors | | | | | | _ |
| 1 1 | ist all officers, directors, trustees, foundation managers and their compen | sation (see instruc | tions). | | | | _ |
| | | (b) Title, and average | (c) Compensation | (d) Contributions to | | | |
| | (a) Name and address | hours per week | (If not paid, | employee benefit plans and deferred | | pense accoun r allowances | t, |
| | | devoted to position | enter -0-) | compensation | | | _ |
| N/ | A | | | | | | |
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| | | | | | ļ <u>.</u> | | _ |
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| | | | | <u> </u> | | | _ |
| 2 | Compensation of five highest-paid employees (other than those included | on line 1 - see ins | tructions). If non | e, enter | | | |
| | "NONE," | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | (b) Title, and average | | (d) Contributions to employee benefit | (a) Ev | pense accoun | |
| | (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | plans and deferred | | r allowances | |
| | | devoted to position | | compensation | <u> </u> | | _ |
| NC | NE | | | | ŀ | | |
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| | | 1 | ! | | | | |
| | Laurehour fiether ampleyees and eyes \$50,000 | <u>-</u> | l | <u> </u> | | | 0 |
| ota | I number of other employees paid over \$50,000 | | | | | 90-PF (20 | _ |
| | | | | + | OHN 23 | , w-i- i- (20 | , IO) |

Form 990-PF (2016)

▶

3

All other program-related investments. See instructions

Total. Add lines 1 through 3

| - | and the barray of any management and any and any and any and any any and any and any and any and any and any any and any any and any any and any and any and any any any and any any and any any and any any and any | | | |
|---|--|----|-------|----|
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 250,0 | 00 |
| 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 | 250,0 | 00 |
| 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 | 3,7 | 13 |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 246,2 | 87 |
| | | | | |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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| Pa | art XIII Undistributed Income (see instruction | ns) | | | |
|-----|--|---|---------------------|-------------|---|
| | | (a) | (b) | (c) | (d) |
| 1 | Distributable amount for 2016 from Part XI, | Corpus | Years prior to 2015 | 2015 | 2016 |
| | line 7 | | | | 165,995 |
| 2 | Undistributed income, if any, as of the end of 2016 | | | | |
| а | Enter amount for 2015 only | | | | |
| b | Total for pnor years 20 , 20 , 20 | | | | |
| 3 | Excess distributions carryover, if any, to 2016 | | | | |
| а | From 2011 110,7 | 86 | | | |
| b | From 2012 102,1 | 35 | | | |
| С | From 2013 39,3 | 49 | | | ŧ. |
| d | From 2014 17,4 | 63 | | | [|
| е | From 2015 2,7 | 16 | | | <u> </u> |
| f | Total of lines 3a through e | 272,449 | | | Į. |
| 4 | Qualifying distributions for 2016 from Part XII, | | | | |
| | line 4 ▶ \$ 250,000 | | | | |
| a | Applied to 2015, but not more than line 2a | | | • | • |
| | Applied to undistributed income of prior years | | | | |
| | (Election required – see instructions) | | | | |
| С | Treated as distributions out of corpus (Election | | | | |
| | required – see instructions) | | | | <u> </u> |
| ď | Applied to 2016 distributable amount | | , | - | 165,995 |
| | Remaining amount distributed out of corpus | 84,005 | | | |
| 5 | Excess distributions carryover applied to 2016 | | | | |
| • | (If an amount appears in column (d), the same | | | | |
| | amount must be shown in column (a)) | | | | |
| e. | Enter the net total of each column as | | | | |
| • | indicated below | | | · | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 356,454 | | | |
| | Prior years' undistributed income Subtract | 330,434 | | | *************************************** |
| J | line 4b from line 2b | | | 4 | |
| _ | Enter the amount of prior years' undistributed | *************************************** | | | |
| · | income for which a notice of deficiency has | - | | | |
| | • | | | | |
| | been issued, or on which the section 4942(a) | | | | - |
| 4 | tax has been previously assessed Subtract line 6c from line 6b Taxable | | | | |
| u | | | | - | |
| _ | amount – see instructions Undistributed income for 2015 Subtract line | | | | |
| e | 4a from line 2a Taxable amount – see | | | | |
| | | | | | |
| | Instructions Undistributed income for 2016 Subtract lines | | | | |
| ' | | | | | |
| | 4d and 5 from line 1 This amount must be distributed in 2017 | | | | o |
| , | | · · · · · · · · · · · · · · · · · · · | | | 0 |
| ′ | 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) | - | | | |
| 5 | Excess distributions carryover from 2011 not | 110 706 | | | |
| a . | applied on line 5 or line 7 (see instructions) | 110,786 | | | |
| 7 | Excess distributions carryover to 2017. | 245 660 | | | |
| ^ | Subtract lines 7 and 8 from line 6a | 245,668 | | | |
| 0 | Analysis of line 9 | 25 | | | |
| a | Excess from 2012 102,1 | | | | |
| b | Excess from 2013 39,3 | 1 | | | |
| C | Excess from 2014 17, 4 | 1 | | | |
| d | Excess from 2015 2,7 Excess from 2016 84.0 | - | | 4 | |
| • | Excess from 2016 84.0 | וביט וביט | . 1 | | • |

| Pa | rt XIV Private Operating Fou | ndations (see ins | tructions and Part | VII-A, question 9) | | |
|----------|---|----------------------------|---------------------------|-----------------------------|--------------------|--------------|
| 1a | If the foundation has received a ruling or d | letermination letter that | it is a private operating | 3 | | |
| | foundation, and the ruling is effective for 2 | 016, enter the date of t | he ruling | > | | |
| b | Check box to indicate whether the foundar | tion is a private operatii | ng foundation describe | d in section 49 | 042(J)(3) or 494 | 2(J)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | . M . | 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 | | | , , | <u> </u> | |
| | each year listed | | | | | |
| L | 85% of line 2a | | | | | |
| b | | | | | | |
| С | Qualifying distributions from Part XII, | | | | | |
| | line 4 for each year listed | | | | | |
| 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 | | | | | |
| | (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 | | | | | |
| 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 | | | | | |
| Da | rt XV Supplementary Inform | ation (Complete t | hie part only if th | e foundation had | \$5 000 or more is | n accete at |
| га | any time during the ye | | | ie iouiluation nau | \$5,000 or more in | ii assets at |
| 1 | Information Regarding Foundation Ma | | 0113.7 | | | |
| | List any managers of the foundation who h | - | han 2% of the total cor | stributions received by t | he foundation | |
| а | before the close of any tax year (but only i | | | | ne louridation | |
| | N/A | they have contributed | more than \$5,000) (O | cc 3ccilon 507 (d)(2)) | | |
| b | List any managers of the foundation who o | wen 10% or more of the | stock of a corporation | (or an equally large no | tion of the | |
| b | ownership of a partnership or other entity) | | • | | tion of the | |
| | N/A | of which the foundation | rnas a 10 % or greater | interest | | |
| 2 | Information Regarding Contribution, G | Front Cift Loon Soh | olarchin ata Brage | | | |
| 2 | Check here ► X if the foundation only | | | | | |
| | | | | | | |
| | unsolicited requests for funds If the found | | s, etc. (see instruction: | s) to individuals of orga | nizations under | |
| | other conditions, complete items 2a, b, c, a | | | | | |
| а | The name, address, and telephone number | er or e-mail address of t | ne person to whom ap | plications should be add | ressed | |
| | N/A | | | | | |
| L | The form in which control to the state of | ulbmittad and offered | on and materials the con- | abouted in closed a | | |
| b | The form in which applications should be s N/A | abilikted and informati | on and materials they s | stioula include | | |
| С | Any submission deadlines | | | | | |
| | N/A | | | | | |
| d | Any restrictions or limitations on awards, s | uch as by geographica | l areas, charitable field | s, kinds of institutions, o | or other | |
| | factors | | | | | |
| | NI/A | | | | | |

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| Part XV Supplementary Information (co | ntinued) | _ | | |
|---|--|-------------------------|----------------------------------|---------|
| 3 Grants and Contributions Paid During the | Year or Approved for Fut | ure Payment | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | reapient | | |
| name and address (home or business) a Paid during the year See Statement 7 | or substantial contributor | | | 250,000 |
| | | | | |
| Total | | | ▶ 3a | 250,000 |
| b Approved for future payment | | | P 3a | 230,000 |
| N/A | | | | |
| Total | | | ▶ 3h | |

| | Part XVI-A Analysis of Income-Producing ter gross amounts unless otherwise indicated | | ousiness income | Excluded | 1 by section 512, 513, or 514 | (-) |
|------------------|--|----------------------|-----------------|--------------------------|-------------------------------|--|
| | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income (See instructions) |
| 1 | Program service revenue | | | | | |
| | a | | | + | | |
| | b | | | + | | |
| | d | | | + | | |
| | e | | | | | |
| | f | | | + 1 | | |
| | g Fees and contracts from government agencies | — | | + | | |
| 2 | Membership dues and assessments | | | 1 | | |
| | Interest on savings and temporary cash investments | | - | 14 | 169 | |
| | Dividends and interest from securities | | | 14 | 102,521 | ·· ···· |
| | Net rental income or (loss) from real estate | | | | | ······································ |
| • | a Debt-financed property | | | 1 | | ****************** |
| | b Not debt-financed property | | | | | |
| 6 | Net rental income or (loss) from personal property | | | 11 | | |
| | Other investment income | | | 11 | | |
| | Gain or (loss) from sales of assets other than inventory | | | 1 | 298,580 | |
| | Net income or (loss) from special events | | | | | |
| | Gross profit or (loss) from sales of inventory | | | | | |
| | Other revenue a | | | | | |
| | b | | | | | |
| | С | | | | | |
| | | | | | | |
| | | | | | | |
| | d | | | | | |
| 12 | d | | | 0 | 401,270 | 0 |
| | d | | | 0 | 401,270 | 0 401,270 |
| 1 3 Se | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) | | | | | |
| 1 3 Se | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | | | | |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which inc | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which inc | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |
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| Se F | d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomposition accomplishment of the foundation's exempt in | e Accomplishment | of Exempt Pu | irposes contribute | d importantly to the | 401,270 |

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| orm 990 | 0-PF (201 | b) CDM FOUND | MITON | , INC. | | | | | | гау | <u>ge 10</u> |
|--------------|-------------|-------------------------------------|------------------|----------------------------|-------------------------|----------------------------|-------------------|---------------------------------------|------------|-------|--------------|
| Part : | | Information Rega Exempt Organiza | | insfers To and | Transaction | s and Relationsh | ips With | Noncharitable | | | |
| 4 5 | | | | fallan | | or organization descri | had | · · · · · · · · · · · · · · · · · · · | | Yes | No |
| | | nization directly or indir | | | | | | | | 163 | 110 |
| org | ganızatıon | s? | | | | | | | | | į |
| a Tra | ansfers fro | om the reporting founda | ition to a nor | ncharitable exempt | organization of | | | | [] | | ĺ |
| (1) |) Cash | | | | | | | | 1a(1) | | X |
| |) Other as | seets | | | | | | : | 1a(2) | | X |
| • • | • | | | | | | | | | | |
| | her transa | | | | | | | | 15/4 | | x |
| ٠, | • | assets to a noncharita | - | = | | | | i | 1b(1) | | X |
| (2) |) Purchas | es of assets from a noi | ncharitable e | exempt organization | 1 | | | | 1b(2) | | |
| (3) |) Rental o | f facilities, equipment, o | or other asse | ets | | | | | 1b(3) | | X |
| (4) |) Reimbur | sement arrangements | | | | | | | 1b(4) | | X |
| (5) |) Loans o | r loan guarantees | | | | | | | 1b(5) | | X |
| (6) |) Perform | ance of services or me | mbership or | fundraising solicitat | tions | | | | 1b(6) | | X |
| | | icilities, equipment, ma | - | = | | | | | 1c | | X |
| | - | r to any of the above is | _ | | | (b) should always sho | ow the fair n | narket | | | |
| | | goods, other assets, or | | _ | | | | | | | |
| | | | | | | | | | | | |
| | | transaction or sharing | | | | | | | | | |
| | ine no | (b) Amount involved | (c) Nan | ne of noncharitable exem | pt organization | (d) Descriptio | n of transfers, t | ansactions, and sharing ar | rangeme | ents | |
| A/k | | | | | | | | | | | |
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| 2a Is | the founda | ation directly or indirect | ly affiliated w | vith, or related to, or | ne or more tax-ex | empt organizations | | _ | | | _ |
| de | scribed in | section 501(c) of the C | ode (other t | han section 501(c)(| 3)) or in section 5 | 527? | | | T Ye | es X | No |
| | | plete the following sch | | | | | | | _ | | |
| | | a) Name of organization | | (b) Type of c | organization | | (c) Descri | otion of relationship | | | |
| N/ | | | | - 1,7,7 | <u> </u> | | | · | | | |
| 11/ | <u> </u> | | | | | | | | | | |
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| | Under per | nalties of penury, I declare the | at I have exami | ned this return, including | accompanying sche | dules and statements, and | to the best of m | y knowledge and belief, it | is true, | | |
| | correct, ar | nd complete Declaration of p | reparer (other t | nan taxpayer) is based t | on all information of w | nich preparer has any knov | vieuge | May the IRS disc | ısş this r | etum | |
| Sign | | 1 11/-1 | / | | | | | with the preparer | | | , I |
| | | P /// | _ | | | , | | (see instructions) | , X | Yes | No |
| Here | . / | | | - Inneun | - 111/1 | 4/2017 | Mmo o | ~··· | | | |
| | | War I | }~ | - /Rosur | <u> </u> | HEOIL | | sure | | | |
| | ▼ Signa | ature of officer or trustee | DOM | LDW. Kigge | Date | | Title | | | | |
| | Print/Ty | pe preparer's name | | V | Preparer's signatui | е | | Date | ļ | Check | ☐ ıf |
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| Paid | 1 | | | | | | | 11/14 | /17 | | |
| repare | r | | | - | - | | | PTIN | | | |
| Jse Onl | ly Firm's r | | | | | | | | | | |
| | Firm's a | iddress P | | | | | | Firm's EIN | | | |

Phone no

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

Employer identification number

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

2016

| CDM FOUNDATIO | ON, INC. | 36-3656304 | | | | | | | |
|---|---|--------------------------------------|--|--|--|--|--|--|--|
| Organization type(check o | ne) | | | | | | | | |
| 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 | n | | | | | | | |
| | 527 political organization | | | | | | | | |
| Form 990-PF | 501(c)(3) exempt private foundation | | | | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | | | |
| | X 501(c)(3) taxable private foundation | | | | | | | | |
| | | | | | | | | | |
| | covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Spec | cial Rule See | | | | | | | |
| General Rule | | | | | | | | | |
| | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tot r property) from any one contributor. Complete Parts I and II. See instructions for contributions. | | | | | | | | |
| Special Rules | | | | | | | | | |
| regulations under se 13, 16a, or 16b, and | described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^{1}/3$ % supportions $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-that received from any one contributor, during the year, total contributions of the ghe amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete | EZ), Part II, line greater of (1) | | | | | | | |
| contributor, during th | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received e year, total contributions of more than \$1,000 exclusively for religious, charitable, al purposes, or for the prevention of cruelty to children or animals. Complete Parts | , scientific, | | | | | | | |
| 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. | | | | | | | | | |
| 990-EZ, or 990-PF), but it mu | It isn't covered by the General Rule and/or the Special Rules doesn't file Schedule ust answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its occurrify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-to- | s Form 990-EZ or on its | | | | | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Page 1 of 1

Page 2

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|-------------------------------|---------------------------------------|---------|--------------------------------|
| me of organization | | | Employer identification number |
| CDM_FOUNDATION | , INC. | <u></u> | 36-3656304 |
| | | | |

| Part I | Contributors (See instructions) Use duplicate copies of Pa | art I if additional space is nee | ded | | |
|------------|---|----------------------------------|---|--|--|
| (a) No | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | |
| 1 | Anne C. McClure Charitable Annuity Trust U/A DTD 2/26/1971 P.O. Box 1655 South Bend IN 46634-1655 | \$ 74 ,359 | 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 | | |
| 110 | Name, address, and 2n · 4 | \$ | 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) | | |

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|-------------------------------|--|--|--|-----------------------------------|
| Form 990-PF | Capital Gains and Losse | es for Tax on Investment Inc | come | 2016 |
| · · | endar year 2016, or tax year beginning | , and ending | | 2010 |
| Name | | | Employer Ider | ntification Number |
| CDM FOUNDATION, | INC. | | 36-3656 | 304 |
| | scribe the kind(s) of property sold, e.g., real estate, swarehouse, or common stock, 200 shs. MLC Co | (b) How acquired P-Purchase | (C) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
| _ | PLC | D-Donation P | 01/04/93 | 03/08/16 |
| | INDUSTRIALS, INC. | P | 01/06/10 | 03/08/16 |
| | | NC. P | 02/26/03 | 03/08/16 |
| | INOIS TOOL WORKS, INC | | 09/27/91 | 03/08/16 |
| (5) 1,000 SHS PFI | | P | 01/02/92 | 03/08/16 |
| | NETT SPINCO, INC. | P | 09/30/11 | 12/30/16 |
| (7) 7,500 SHS TEG | NA, INC. | P | 09/30/11 | 12/30/16 |
| (8) | | | | |
| (9) | | | | |
| (10) (11) | | | | |
| (12) | | | | |
| (13) | | | | |
| (14) | | | | |
| (15) | | | | |
| (e) Gross sales price | (f) Depreciation allowed | (a) Cort or other harris | (h) com | or (loss) |
| | (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain (e) plus (f) | |
| (1) 39,175 | | 24,422 | | 14,753 |
| (2) 60,083 | | 38,192 | <u> </u> | 21,891 |
| (3) 67,891 | | 62,977 | | 4,914 |
| (4) 97,120 (5) 29,415 | | 8,375 7,004 | | 88,745 |
| (5) 29,415 (6) 73,110 | | 26,941 | | 22,411 46,169 |
| (7) 159,530 | | 59,833 | | 99,697 |
| (8) | | | | |
| (9) | | | | |
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| (12) | | | | |
| (13) | | | | |
| (14) | | - | | |
| | | | <u> </u> | |
| Complete only for assets show | ring gain in column (h) and owned by the fo | oundation on 12/31/69 | (I) Gains (Co | (h) agin minus |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | (I) Gains (Col col (k), but not les Losses (from | s than -0-) Or col (h)) |
| (1) | | | | 14,753 |
| (2) | | | | 21,891 |
| (3) | | | | 4,914 |
| 5) | | | | 88,745 22,411 |
| (5) (6) | | | | 46,169 |
| <u>(7)</u> | | | | 99,697 |
| (8) | | | | <u>,</u> |
| 9) | | | | |
| (10) | | | | |
| (11) | | | | |
| 12) | | | | _ |
| (13) | | | | |
| (14) | | | | |
| (15) | ĺ | İ | 1 | |

| CDM CDM FOUNDATION, INC. 36-3656304 FYE: 12/31/2016 | Federal Statements | 11/14/2017 8:37 AM |
|---|--|--------------------|
| 3-1 | Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees | , |
| Description BELL & ANDERSON - LLC Total | Net Adjusted Net \$ 1,710 \$ Net \$ 1,710 \$ 0 | Charitable Purpose |
| Star | Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees | |
| Description OLIVER ESTATE, INC. Total | Net Adjusted Net Net | Charitable Purpose |
| Statem | Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees | |
| Description OLIVER ESTATE, INC. Total | Total Investment Adjusted Net \$ 25,000 \$ 25,000 \$ \$ 25,000 \$ 25,000 \$ | Charitable Purpose |
| | Statement 4 - Form 990-PF, Part I, Line 18 - Taxes | |
| Description QTRLY EST. EXCISE TAX INVEST INC | Net | Charitable Purpose |
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CDM CDM FOUNDATION, INC. 36-3656304 FYE: 12/31/2016

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| Charitable Purpose | \$ | | | | \$ | |
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| Adjusted Net | \$ | | | | \$ | |
| Net Investment | ₩ | | | | \$ | |
| Total | ₩ | 1 | 215 | 199 | \$ 414 | |
| Description | | Expenses | ILLINOIS CHARITY ANNUAL FILIN | STATIONARY AND POSTAGE | Total | |

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CDM CDM FOUNDATION, INC. 36-3656304 FYE: 12/31/2016

Federal Statements

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| Statement 6 - Form 990- |
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| Fair Market Value | \$ 127,590 | , , | 299,040 | 29,20 | | 184,250 | | 104,220 | 54,90 | • | | 67,38 | 109,788 | 61,57 | • | 59,84 | Н | • | 114,048 | 43,26 | | \$ 2,768,118 |
|-----------------------|--|--------|---------|---------|----------------------|---------------------------------|------|---------|-----------------------------|------|--------------------------|----------------------------|-----------|--------------|---------------|--------|---------|--------|---------|---------|---------------------------------|--------------|
| Basis of Valuation | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | Cost | |
| End of Year | \$ 97,367 | 1 | 148,808 | 100,697 | | 95,208 | | Ŋ | 50,280 | | | 4,79 | 97,163 | 8,89 | | 55,167 | 120,793 | | 5,40 | 140,505 | 77,375 | \$ 1,378,080 |
| Beginning of Year | \$ 97,367 | 73, | | 4,6 | , 29 | | ,81 | 101,357 | 0,28 | , 55 | 3,06 | | 97,163 | 8,89 | 90′ | | 0,79 | 59,448 | | | 77,375 | \$ 1,457,931 |
| Description | 3,000 SHS A T & T 900 SHS APPLE, INC. | 0 | ທ | O SHS | SHS CSW INDUSTRIALS, | 5,000 SHS CSW INDUSTRIALS, INC. | SHS | SHS D | 3,932 SHS EXXON CORPORATION | SHS | SHS ILLINOIS TOOL WORKS, | SHS ILLINOIS TOOL WORKS, : | PHILIP MO | SHS PEPSICO, | O SHS PFIZER, | | HS | | | SHS | 1,500 SHS WELLS FARGO & COMPANY | Total |

Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

| | Amount | | 16,000 | 1,000 |
|---------|--------------|------------------------|---------------------|-------------|
| | • | | | |
| ! | Purpose | | RELIGIOUS | EDUCATIONAL |
| Address | Status | ı | | |
| Add | Relationship | NORTHPORT, MI | NONE CHICAGO, IL | NONE |
| Name | Address | ATWILL MEMORIAL CHAPEL | AUSL | |

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CDM CDM FOUNDATION, INC. 36-3656304 FYE: 12/31/2016

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| - Form 99 |
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| Statement 7 - Form 99 |

Year (continued)

| Name Address | Address Relationship Status | Purpose | Amount |
|----------------------------|--------------------------------|----------------|--------|
| CROSSING | NORTHPORT, MI | Cundings | |
| BOY SCOUTS AMERICA NE IL | NONE HIGHLAND PARK, IL | CHARITABLE | 7,000 |
| | VERO BEACH, FL | CIVAKI IABLE | 000'T |
| CHICAGO ART INSTITUE | NONE CHICAGO, IL | CHARITABLE | 200 |
| CHICAGO BOTANIC GARDEN | NONE GLENCOE. IL | CHARITABLE | 1,000 |
| SHELTERS | Ç | CHARITABLE | 1,500 |
| COMM CHIIRCH OF VERO REACH | | CHARITABLE | 2,500 |
| | NONE HANOVER, NH | RELIGIOUS | 200 |
| | | EDUCATIONAL | 1,000 |
| | | EDUCATIONAL | 4,000 |
| | ÷ 2.1 | CHARITABLE | 1,000 |
| | SAN FRANCISCO, CA NONE | EDUCATIONAL | 1,000 |
| ELAWA FARM FOUNDATION | LAKE FOREST, IL NONE | EDUCATIONAL | |
| ENVIRONMENTAL LEARNING CE | VERO BEACH, FL | ה זמ אחדם אווס | |
| GENEVA FD. OF PRESBYTERIA | EVANSTON, IL | Charliable | 250 |
| GLEN ARBOR ART ASSOCIATION | NONE GLEN ARBOR, MI | RELIGIOUS | 2,000 |
| | NONE SAN FRANCISCO, CA | CHARITABLE | 200 |
| GUARDIANS FOR NEW FUTURES | | RELIGIOUS | 1,000 |
| | | CHARITABLE | 2,000 |

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CDM CDM FOUNDATION, INC. 36-3656304 FYE: 12/31/2016 Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

500 250 3,000 6,000 1,000 000'9 2,000 1,000 500 2,000 2,000 500 1,000 10,000 14,000 Amount Purpose EDUCATIONAL EDUCATIONAL EDUCATIONAL EDUCATIONAL EDUCATIONAL CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE RELIGIOUS Status HARBOR SPRINGS, MI HARBOR SPRINGS, MI Address LAKE FOREST OPEN LANDS ASSOCIATION LAKE FOREST, IL VERO BEACH, FL VERO BEACH, FL VERO BEACH, FL KENILWORTH, IL VERO BEACH, FL SHELBURNE, VT SAN MATEO, CA CHICAGO, IL CHICAGO, IL CHICAGO, IL CHICAGO, IL LELAND, MI Relationship NONE HARVEST FOOD & OUTREACH PROGRAM LAKE CHAMPLAIN WALDORF SCHOOL HUMANE SOCIETY VERO BEACH ILLINOIS INSTITUE OF TECH INDIAN RIVER HOSPITAL FOU LITTLE TRAVERSE CONSERVAN KENILWORTH UNION CHURCH INDIAN RIVER LAND TRUST HARBOR SPRINGS LIBRARY Address MERIT SCHOOL OF MUSIC Name LEELANAU CONVERSANCY JOHN SHEDD AQUARIUM LINCOLN PARK ZOO MEDLEND

10,000

CHARITABLE

GLENVIEW, IL

CHICAGO, IL

NON

MIDWEST PALLIATIVE & HOSPICE CARE

METROPOLITAN FAMILY SERVICE

CHARITABLE

25,000

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CDM CDM FOUNDATION, INC. 36-3656304 FYE: 12/31/2016

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| Name | Address | | |
|---|--------------------------------------|-------------|--------|
| Address | Relationship Status | Purpose | Amount |
| NORTH SHORE ART LEAGUE | WINNETKA, IL | | |
| NORTHPORT POINT RECREATION PROGRAM | NONE FRAM NORTHPORT, MI | EDOCALIONAL | 000'T |
| NONI NORTHSHORE UNIVERSITY HEALTHSYSTEM | NONE TEM EVANSTON, IL | EDUCATIONAL | 1,000 |
| N OLD VERO ICE AGE SITES COMMITTEE | [7] | CHARITABLE | 1,000 |
| R INTERNATION? | ONE | EDUCATIONAL | 1,000 |
| PENINSULA FAMILY SERVICE | NONE SAN MATEO, CA | CHARITABLE | 2,000 |
| COUNSE | NONE FVANSTON II, | EDUCATIONAL | 1,000 |
| RAGDALE | NONE LAKE FOREST II. | EDUCATIONAL | 1,000 |
| PIVEPSIDE THEATPE | | CHARITABLE | 200 |
| DITCH INITITED CITES MADE AND CONTROL | NONE CITCAGO II | CHARITABLE | 2,000 |
| KOSM ONIVERSIII MEDICAL CENIER | `; | EDUCATIONAL | 2,000 |
| SAVING BIKDS THRU HABITAT | | CHARITABLE | 1,000 |
| | NORIH HAMPION, MA NONE | EDUCATIONAL | 3,500 |
| ST. GERMAIN CHILDREN'S CHARITY ST. HELENA HOSPITAL FOUNDATION | LA JOLLA, CA NONE ST HELENA CA | CHARITABLE | 4,000 |
| | NONE LA JOLLA. CA | | 4,000 |
| JOHN'S | NONE HARBOR SPRINGS MI | RELIGIOUS | 2,000 |
| ART TWA | 11. | RELIGIOUS | 1,500 |
| | | EDUCATIONAL | 200 |

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CDM CDM FOUNDATION, INC. 36-3656304 FYE: 12/31/2016

| Name | Address | ess | | |
|--|-----------------------|--------|-------------|---------|
| Address | Relationship | Status | Purpose | Amount |
| THE CAMPING AND EDUCATION FOUNDATIO CINCINNATI | NDATIO CINCINNATI, OH | н | | |
| | NONE | | EDUCATIONAL | 1.000 |
| THE ETHEL WALKER SCHOOL | SIMSBURY, CT | | | |
| | NONE | | EDUCATIONAL | 1.000 |
| THE HOTCHKISS SCHOOL | LAKEVILLE, CT | | | |
| | NONE | | EDUCATIONAL | 000.6 |
| THE NOVALIS PROJECT | ASHLAND, OR | | | |
| | NONE | | EDUCATIONAL | 77.500 |
| THE SOURCE | VERO BEACH, FL | ı | | |
| | NONE | | EDUCATIONAL | 1,000 |
| UNITED RELIGIONS INITIATIVE | SAN FRANCISCO, CA | , CA | | |
| | NONE | | RELIGIOUS | 200 |
| UNIVERSITY OF CHICAGO | CHICAGO, IL | | | |
| | NONE | | EDUCATIONAL | 1.000 |
| WILLIAMS COLLEGE | WILLIAMSTOWN, MA | MA | | |
| | NONE | | EDUCATIONAL | 1.000 |
| YALE ANNUAL FUND - 1944 | NEW HAVEN, CT | | | |
| | NONE | | EDUCATIONAL | 2,000 |
| Total | | | | 250,000 |