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Form 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

OMB No 1545-0052

▶ 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.

Open to Public Inspection

F	or c	alendar year 2016 or tax year beginning	11	/16, 2016 ,	and endi	ng		12/31, 2016
Name of foundation						А	Employer identi	fication number
	MAS	ON AVE. FAMILY FOUNDATION				1	37-663402	26
		er and street (or P.O box number if mail is not delivered	l to street address)		Room/suite	В	Telephone numi	per (see instructions)
	21	MASON AVENUE					(314) 8	89-1100
-	City o	r town, state or province, country, and ZIP or foreign pos	stal code					
	WEE	SSTER GROVES, MO 63119				С	If exemption applic pending, check her	cation is
ĉ		eck all that apply: X Initial return	Initial return	of a former r	ublic char	.tv _	_	
	0111	Final return Address change	Amended re	turn	Judiic Criai	ם איי	Foreign organize Foreign organize Foreign organize 85% test, check	alions meeting the here and attach
F	i Che	eck type of organization: X Section 501(-	•	
		Section 4947(a)(1) nonexempt charitable trust	Other taxable pr				•	b)(1)(A), check here
ı	Faii	r market value of all assets at JAcco	unting method: X C	ash Acc	crual	F	If the foundation i	s in a 60-month termination
	enc	of year (from Part II, col (c), line	ther (specify)					b)(1)(B), check here . >
	16)	▶\$ 7,500,373. (Part 1, c)	column (d) must be on cas	sh basis)				
	Part	Analysis of Revenue and Expenses (The lotal of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	(a) Revenue and expenses per books	(b) Net inve incon		(c)	Adjusted net income	(d) Disbursements for charitable purposes
-	Т	column (a) (see instructions))						(cash basis only)
	1 2	Contributions, gulfs, grants, etc., received (attach schedule). Check if the foundation is not required to attach Sch. B	7,500,000	N				· · · · · · · · · · · · · · · · · · ·
	3	Interest on savings and temporary cash investments.						
	4	Dividends and interest from securities	373.		373.			ATCH 1
	5a	Gross rents		**				
	b	Net rental income or (loss)						
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 8a				*	· · · · · · · · · · · · · · · · · · ·	(
Š	7	Capital gain net income (from Part IV, line 2) .			0.	,		Ţ.
ď	8	Net short-term capital gain				·····		,
	9	Income modifications						
	10 a	Gross sales less returns and allowances						
	b	,						
	C	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)	<u>{</u>					
	12	Total. Add lines 1 through 11	7,500,373.		373.			
S	13	Compensation of officers, directors, trustees, etc	0.					
Ses	114	Other employee salaries and wages						
ë	15	Pension plans, employee benefits						
Administrative Expen	16a	Legal fees (attach schadule)						
e Lu	b	Accounting fees (attach schedule)				·····		
.≥	С	Other professional fees (attach schedule).						
ra L	17	Interest						
ž.	18	Interest						
Ē	19	Depreciation (attach schedule) and depletion.						
ğ	20	Occupancy						
		Travel, conferences, and meetings		_				
	22	Printing and publications						
ğ	23	Other expenses (attach schedule)						
Œ,	24	Total operating and administrative expenses.						
e.		Add lines 13 through 23	0.		}			
C	23 24 25	Contributions, gifts, grants paid						
	26	Total expenses and disbursements Add lines 24 and 25	0.				·····	0
	27	Subtract line 26 from line 12						
		Excess of revenue over expenses and disbursements .	7,500,373.	ļ				
	i	Net investment income (if negative, enter -0-)	,		373.			
	~							

c Adjusted net income (if negative, enter -0-). .

JSA For Paperwork Reduction Act Notice, see instructions
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E	art II	Balance Sheets description column should be for end-of-year	Beginning of year	Endic	
	r	amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		373.	,, 373
	2	Savings and temporary cash investments		7,300,000.	7,500,000
		Accounts receivable			
		Less allowance for doubtful accounts ▶	1	· · · · · · · · · · · · · · · · · · ·	was the transfer and the set
	4	Pledges receivable			
	•	Less allowance for doubtful accounts	* * * *		· · · · · · · · · · · · · · · · · · ·
	_				
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other	•		
		disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule)			* * * * * * * * * * * * * * * * * * *
	7	Other notes and loans receivable (attach schedule)			Nillin Vellind
		Less allowance for doubtful accounts ▶		l .	
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
ď	10a	Investments - U S $$ and state government obligations (attach schedule), $$.			
	b	Investments - corporate stock (attach schedule)			
	С	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings,	1. 100 15 15 17	1-2-01000000000000000000000000000000000	<u> </u>
į		Less accumulated depreciation -		;	CA + n 5 5 1 1 2 5 2 1 1 1 2 1 2 1 2 1 2 1 2 1
j					
	12 13	Investments - mortgage loans		<u></u>	
	14	Investments - mortgage loans. Investments - other (attach schedule) Land, buildings, and equipment basis Less accumulated depreciation	1 2 2 2 3 3 3 3 3 7 4 5 2 8	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
		equipment basis			
		(attach schedule)	4		
	15	Other assets (describe >)			
		Total assets (to be completed by all filers - see the			
	·	instructions Also, see page 1, item i)	0.	7,500,373.	7,500,373
	17	Accounts payable and accrued expenses			
-	18	Grants payable			
S	19	Deferred revenue			
Ξ		Loans from officers, directors, trustees, and other disqualified persons			lii kaan ka
Liabilities		Mortgages and other notes payable (attach schedule)			
ا		Other liabilities (describe)			
		Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
-			<u> </u>		
S		Foundations that follow SFAS 117, check here . >			
nces		and complete lines 24 through 26 and lines 30 and 31	•		
al	24	Unrestricted			
Balar	25	Temporarily restricted			
0	26	Permanently restricted	,		
or Fund		Foundations that do not follow SFAS 117, X			
		check here and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds		7,500,373	
Assets		Paid-in or capital surplus, or land, bldg, and equipment fund			
SS		Retained earnings, accumulated income, endowment, or other funds			
4		Total net assets or fund balances (see instructions)	F	7,500,373	
Net		Total liabilities and net assets/fund balances (see			
			-	7,500,373	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
		instructions)		1,300,373	· <u>l</u>
		Analysis of Changes in Net Assets or Fund Bal			
1		I net assets or fund balances at beginning of year - Par	t II, column (a), line 30	(must agree with	
2	Ente	er amount from Part I, line 27a			7,500,37
3	Othe	er increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	7,500,37
			• • • • •	5	
		`	is line 5) - Part II column		7,500,37
5	Dec	reases not included in line 2 (itemize) ► If net assets or fund balances at end of year (line 4 minuments)		5	

MASON AVE. FAMILY FOUNDATION

(a) List and	and Losses for Tax on Inv describe the kind(s) of property sold (ick warehouse, or common stock, 200	(e g , real estate,	(b) How acquired P - Phichase D - Donation	(c) Date-acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a					
р ,			-		
<u>C</u>			-		
d e		About the second of the second			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a					
b					
С			-		
d			-		
Complete only for accets s	howing gain in column (h) and owner	d by the foundation on 12/31/69			<u> </u>
Complete only for assets s		- 		Gains (Col (h) ga (k), but not less to	
(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Losses (from co	
<u>a</u>					
b c			 		······································
d			1		
8			-		
2 Capital gain net income	or (not capital loss)	gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7	2		
Net short-term capital g	ain or (loss) as defined in section:	•	ˈ├ ─┼		
		structions) If (loss), enter -0- in			
<u> </u>			3		
Part V Qualification U	Inder Section 4940(e) for Re	educed Tax on Net Investment	Income		
		butable amount of any year in the Do not complete this part	base perio	od?	Yes 1
		ear, see the instructions before ma	king any e	ntries.	
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution r (col. (b) divided b	atio y col (c))
2015					
2014					····
2013					
2012		was a supplication of the			
2011			+		<u>,</u>
2 Total of line 1, column (d)		2		
	<i>, , , , , , , , , , , , , , , , , , , </i>		• }		
		less than 5 years	1 - 1		
nombor or jouro me roc					
Enter the net value of ne	oncharitable-use assets for 2016	From Part X, line 5	4		
Multiply line 4 by line 3,			. 5		
6 Enter 1% of net investm	ent income (1% of Part I, line 27t	o)	6		
7 Add lines 5 and 6			. _7_ _		
8 Enter qualifying distributed filme 8 is equal to or go Part VI instructions	tions from Part XII, line 4 greater than line 7, check the bi	ox in Part VI, line 1b, and comple	8 te that pa	irt using a 1% i	ax rate See

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	struc	uons)			
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)			7		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			7.		
	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 J Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			7.		
3 Add lines 1 and 2						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			7.		
5	5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0					
6						
а	2016 estimated tax payments and 2015 overpayment credited to 2016, . , . 6a					
þ	Exempt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld			~~		
7	Total credits and payments. Add lines 6a through 6d			0.		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			7.		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 11					
	t 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 X		
	participate or intervene in any political campaign?	1a				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	4.		х		
	Instructions for the definition)?	1b	- , 			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	·• '	**	100		
	published or distributed by the foundation in connection with the activities	4 -		x		
	Did the foundation file Form 1120-POL for this year?	1c	» à	8		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	,	1	A		
	(1) On the foundation ► \$ (2) On foundation managers ► \$,	26 3		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		·	, ·		
•	on foundation managers \$	2		x		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?					
•	If "Yes," attach a detailed description of the activities	ļ	Ì			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	3		Х		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
J	If "Yes," attach the statement required by General Instruction T	l				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		ļ			
U	By language in the governing instrument, or			l		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?	6	Х			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х			
	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MO,					
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	1				
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			\ v		
	complete Part XIV	9_		X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		x			
	names and addresses . ATCH 2	10	0-PF	12010:		
	Fr	nm 95	ソントト	(2016)		

37-6634026

Pai	t VII-A Statements Regarding Activities (continued)	·				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No		
	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		1			
	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 application?	13	X			
	Websile address N/A					
14	The books are in care of ► THE ORGANIZATION Telephone no ► 314-889	-110	0			
	Located at ► 21 MASON AVENUE WEBSTER GROVES, MO ZIP+4 ► 63119					
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check herc	. <i>.</i>	. ▶			
	and enter the amount of tax-exempt interest received or accrued during the year		·			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	,	Yes	No		
	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 ▶	3.1	13.4	. 🏖 📋		
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	13 851				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> 4. 7.</u>	Yes	No		
1a	During the year did the foundation (either directly or indirectly)			53		
	(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		42			
	disqualified person? Yes X No	. 3 3	15			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	33	9%	ČŽ 1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	13	11			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	7.7	r.X.i			
	the benefit or use of a disqualified person)? Yes X No		\$ 60			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			. 7.74		
	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.)			3-11		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		£_42			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	¥ 55	# ^.*		
	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		1.2212	X		
_	were not corrected before the first day of the tax year beginning in 2016?	1c	30 'al'			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	177	1.4			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		<i>J</i> (
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?					
	Get and Anny for tax year (s) degrating before 2010.					
h	If "Yes," list the years Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		8-			
"	(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.)	2b	v	* * `		
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	777	16. F.	118 1		
·			95			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		4.3	N. A.		
O.	at any time during the year?			X 9		
h	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					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	13		154		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	. *	13.4	3.7		
	foundation had excess business holdings in 2016)	3b	` ` `	' '		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	X		
	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 jeopardy before the first day of the tax year beginning in 2016?	4b]	X		
				10010		

Form	990-PF (2016) MASON AVE. FAN	ALLY FOUNDATI	ON		31-66	34026	Paţţe O
Pa	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Reg	uired (cont	inued)		-
5a	During the year did the foundation pay or incur any amo						
	(1) Carry on propaganda, or otherwise attempt to influe		14945(e))?	Yes	X No	s. 5.	
	(2) Influence the outcome of any specific public ele	=					
	directly or indirectly, any voter registration drive?	•		[XNo		
	(3) Provide a grant to an individual for travel, study, or o				X No		
	(4) Provide a grant to an organization other than a				L		1
	section 4945(d)(4)(A)? (see instructions),			· · · · · · · · · · · · · · · · · · ·	X No		
	(5) Provide for any purpose other than religious, ch				L1		
	purposes, or for the prevention of cruelty to children			F 1	X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the			• -			
•	Regulations section 53 4945 or in a current notice regar					5b	
	Organizations relying on a current notice regarding disas	-			· · · · · · -		
_	If the answer is "Yes" to question 5a(4), does the					-1 [
С	because it maintained expenditure responsibility for the				No]]	
c -	If "Yes," attach the statement required by Regulations se-		athe to now promise				` ` `
6a	Did the foundation, during the year, receive any fur			i 1	X No		- '
L	on a personal benefit contract?			·	***************************************	6ь	x
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ict'		00	-,
-	If "Yes" to 6b, file Form 8870.		. all all an tagana all an 2		XNo		ļ
7a	At any time during the tax year, was the foundation a p If "Yes," did the foundation receive any proceeds or ha				<u> </u>	7b	
b	Information About Officers, Directo						
	and Contractors						
1	List all officers, directors, trustees, foundation r	nanagers and their	compensation (see	instructions (d) Contribut			
	(a) Name and address	hours per week	(If not paid,	employee ben	efit plans	(e) Expense other allow	account, vances
		devoted to position	`enter`-0-)	and deferred cor	npensation		
ATC	н 3		0.		0.		0.
					<u>-</u> -		
						······································	

					1		
2	Compensation of five highest-paid employees	/other than thes	o included on lin	0 1 - 500	instruction	ne) If no	ne ente
_	"NONE."	(other than thos	ie included on ini	e i - 300	mati dotto	113). 11 1101	10, 011101
		(b) Title, and average		(d) Contribu		(e) Expense	account
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and d	leferred	other allow	wances
NON	ਸ			compens	ation		
14014			0.		0.		0.
		!		}			
							
							
					<u>_</u>		
			Carrier William consistent Many on Secretary Consistent of the	<u></u>			
<u>Fotal</u>	number of other employees paid over \$50,000		<u> </u>		<u>▶ </u>		

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employ	rees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, en	ter "NONE	."
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE ·		
	1	0
Total number of others receiving over \$50,000 for professional services	. , , <u> </u>	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the rorganizations and other beneficiaries served, conferences convened, research papers produced, etc.	number of	Expenses
1 N/A		
With the second		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
	#**	
All other program-related investments See instructions		
3 NONE		
3 IVONE		
Total Add lines 1 through 3		

Par	X	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn foundations,	
1	Fair	market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purp	poses		
а	Ave	rage monthly fair market value of securities	1a	
þ	Ave	rage of monthly cash balances,	1b	576,952.
C	Fair	market value of all other assets (see instructions).	1c	
d	Tota	al (add lines 1a, b, and c)	1d	576,952.
е	Red	uction claimed for blockage or other factors reported on lines 1a and		
	1¢ (:	attach detailed explanation)		
2	Acq	uisition indebtedness applicable to line 1 assets , , , , , , , , , ,	2	
3	Sub	tract line 2 from line 1d	3	576,952.
4	Casl	h deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	ınstr	ructions).	4	8,654.
5		value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	568,298.
_6	Mini	mum investment return. Enter 5% of line 5	6	3,571.
Par	ΧI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part.)	dations	
1	Mini	mum investment return from Part X, line 6	1	3,571.
2 a		on investment income for 2016 from Part VI, line 5		
b	Inco	me tax for 2016. (This does not include the tax from Part VI) 2b		
С		lines 2a and 2b	2c	7.
3		ributable amount before adjustments Subtract line 2c from line 1	3	3,564.
4		overies of amounts treated as qualifying distributions		
5		lines 3 and 4	5	3,564.
6		uction from distributable amount (see instructions)	6	
7		ributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
		<u>1 </u>	7	3,564.
Part		Qualifying Distributions (see instructions)		
1	Amo	ounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		enses, contributions, gifts, etc total from Part I, column (d), line 26	1a	
b		gram-related investments - total from Part IX-B	1b	
2		ounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
		oses	2	
3		ounts set aside for specific charitable projects that satisfy the.		
а		ability test (prior IRS approval required)	3a	
b	Casl	h distribution test (attach the required schedule)	3b	
4		ifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>,,, ,</u>
5		ndations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
		er 1% of Part I, line 27b (see instructions)	5	0.
6		usted qualifying distributions. Subtract line 5 from line 4	6	0.
		: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		the foundation
		qualifies for the section 4940(e) reduction of tax in those years	~	

Page 9 Form 990-PF (2016) Undistributed Income (see instructions) Part XIII (d) (b) (c) (a) 2015 2016 Years prior to 2015 Corpus 1 Distributable amount for 2016 from Part XI, 3,564. 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. . . b Total for pnor years 20 14 ,20 13 ,20 12 3 Excess distributions carryover, if any, to 2016 a From 2011 b From 2012 c From 2013 d From 2014 e From 2015 f Total of lines 3a through e Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ a Applied to 2015, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions). c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2016 distributable amount e Remaining amount distributed out of corpus. . . Excess distributions carryover applied to 2016 . (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income, Subtract line 4b from line 2b. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions e Undistributed income for 2015. Subtract line f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be 3,564. 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) Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2017. 0 Subtract lines 7 and 8 from line 6a, 10 Analysis of line 9 a Excess from 2012 . . . b Excess from 2013 . . . c Excess from 2014 . . . d Excess from 2015 . . .

Form 990-PF (2016)

e Excess from 2016 . .

Form	n 990-PF (2016)	MASON AVE	. FAMILY FOUNDA	TION	37-0	6634026 page 10
No.			(see instructions an		tion 9)	NOT APPLICAB
1 a	If the foundation has					
44	foundation, and the ruling	g is effective for 2016, er	nter the date of the ruling,		· . •	
b	Check box to indicate v	vhether the foundation	is a private operating for	oundation described in	n section 4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part I or the minimum investment	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
	return from Part X for each					
_	year listed					
	85% of line 2a					
·	Qualifying distributions from Part XII, line 4 for each year listed .		ļ			
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made					
	directly for active conduct of exempt activities. Subtract line					
3	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			and the state of t		
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest- ment return shown in Part X.					
	line 6 for each year listed	·				
C	"Support" alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents, payments on 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 sup-				,	
	port from an exempt organization			····		
	(4) Gross investment income .	1	\	- 1 :6 41 - 6	- 4: 1 CE 000	
Ea		itary information (C uring the year - see		only if the founda	ation had \$5,000 or	more in assets a
1	Information Regarding		·			
а	List any managers of	the foundation who h	ave contributed more	than 2% of the tolore than \$5,000) (S	tal contributions receive See section 507(d)(2))	ed by the foundatio
•	LEONARD S.					
					poration (or an equally	large portion of th
	ownership of a partner	snip or other entity) or	which the foundation	nas a 10% or greate	rinterest	
	N/A					
2	Information Regarding	Contribution, Grant.	Gift, Loan, Scholarshi	p. etc Programs:		
	·			-	ritable organizations a	nd does not acce
	unsolicited requests for other conditions, comp	or funds. If the founda	ation makes gifts, gra	nts, etc (see instruc	ctions) to individuals of	r organizations unde
a	The name, address, ar	nd telephone number o	or e-mail address of th	ne person to whom a	pplications should be add	Iressed
b	The form in which appl	ications should be sub	mitted and informatio	n and materials they	should include	and Address to a second of the
c	Any submission deadlir	nes.	- Via dimpositivatale transported to the control of			

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Page 11

Part XV Supplementary Information (continued)	oved for F	Suture Payment	
3 Grants and Contributions Paid During Recipient Name and address (home or business)	If recipient is an individual.	Foundation	S	
Name and address (home or business)	show any relabonship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid during the year				
	,			
		1		
			-	
Takal	<u> </u>	<u></u>	▶ 3a	
b Approved for future payment	<u> </u>		▶ 3a	
b Approved for future payment				
		1		
Total	<u> </u>	.	1	
Total	<u> </u>	<u> </u>	▶ 3b	l <u></u>

JSA £E1491 1 000

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Page		4

Part XV				[c.a. 4. e.	540 540 541	(0)
Enter gross	s amounts unless otherwise indicated.	Unrela (a)	ted business income - (b)	_	y section 512, 513, or 514 (d)	(e) Related or exempt
1 Prograr	n service revenue	Business code	Amount	(c) Exclusion code	1	function income (See instructions)
ъ		<u> </u>				
		}				
e						
•	and contracts from government agencies					
	rship dues and assessments					
	on savings and temporary cash investments •					
	ds and interest from securities			14	373.	
5 Net ren	tal income or (loss) from real estate	 		_		
	t-financed property	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
	debt-financed property					
	al income or (loss) from personal property.	1 1				
	nvestment income	1 1				
· ·	ome or (loss) from special events · · ·					
	profit or (loss) from sales of inventory					
11 Other re	evenue a					
c						
e		 			373.	
	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)				LL	373.
Part XVI	Explain below how each activit	y for which	income is reported	ın column (e	e) of Part XVI-A contribu	
······································	accomplishment of the foundation	on's exempt	purposes (other than	oy providing	runus for such purposes	(See instructions.)

·						
of statement statements,					the and the second seco	
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Form 990-PF (2016	6) MASON	AVE.	FAMILY	FOUNDATION	37-66	634026	Pag
	Information Regarding Exempt Organizations		fers To a	ind Transactions	and Relationships With No	oncharit	able
	•	, ,	,	_	any other organization describe	l i	Yes

1			-	engage in any of the	_	-			Yes	No		
	in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political											
	_	zations?							- 1			
а	a Transfers from the reporting foundation to a noncharitable exempt organization of											
	(1) Ca	sh						1a(1)		X		
	(2) Ot	her assets		<i></i>				<u>1a(2)</u>		X		
b	Other	transactions:										
	(1) Sa	les of assets to a noi	ncharitable exe	mpt organization				1b(1)		X		
				able exempt organizatio						X		
				rassets				1 1		X		
								1		<u>X</u>		
	(4) Reimbursement arrangements											
		-		hip or fundraising solicit				3		X		
С				sts, other assets, or par				•		X		
				es," complete the folio					fair m	arket		
				rices given by the repo								
	value	in any transaction or	sharing arran	gement, show in colur	nn (d) the va	lue of the goods	, other asset	is, or service	s rec	eived.		
(a) Li	ne ro	(b) Amount involved	(c) Name of	noncharitable exempt organiz	ation (d)	Description of transf	ers, transactions	and sharing arra	ngame	nis		
		N/A		······································	N/	'A						
								······································				
		······································										
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					L							
		-		filiated with, or relate				1 1	Γv	٦.,		
				ther than section 501(c)(3)) or in sec	ction 5277		L Ye	es X] NO		
. p	If "Yes	," complete the follow										
w		(a) Name of organization	1	(b) Type of orga	nization		(c) Description o	f relationship				
						_				·····		
-								~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
						_		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
					www.							
							····		············			
				ined this return, including acce (axpayer) is based on all inform a ti			o the best of my	knowledge and t	elief, it	is true,		
Sign			Note to the second	11 /111	17	nas only in on eage	T _{Va}	the IRS discus	e this	avutas		
_	1	\sim	$\cup_{\mathcal{N}}$	X1/14/	1 † • TR	USTEE	with					
lere	Sigi	nature of officer or trustee		Date	Title		(see		Yes	No		
_							<u> </u>					
 >_: +	•	Print/Type preparer's nar	ne	Preparer's signature	· asylthesis community (POSM)	Date	Check	II PTIN				
Paid		MARK W PALUCZA	AK CPA	Pul wyhit.	CPA	11/14/	2017 self-emp	layed P004	0793	30		
rep	arer	Firm's name BD	O USA, LLE	· · · · · · · · · · · · · · · · · · ·		k omegan a a		13-53815	90 [
Jse (Only			EY RD STE 800								
	,	1		10		63105	Phone na.	314-889-1	100			
······		L						Form 99 ((2016)		
								. 3,	- •			

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Schedule B

Filers of:

(Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

MASON AVE. FAMILY FOUNDATION

Section:

Schedule of Contributors

OMB No 1545-0047

► 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.

Employer identification number 37-6634026

Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000

or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions.

Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. 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).

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

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

Employer identification number 37-6634026

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	LEONARD S. DINO, JR. 21 MASON AVENUE WEBSTER GROVES, MO 63119	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
~ **** + Silvan is in instructions.		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					

Employer Identification number 37-6634026

. [ash Property (See instructions) Use duplicate copies		1
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
AAAAA AAAAA AAAAA AAAAA AAAAA AAAAA AAAA		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		-	
		S	and the boundaries and programme
a) No. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
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	TO TO A THE U.S. AND INTERNAL PROPERTY AND ADDRESS OF THE U.S. AND ADDRESS OF		

ATTACHMENT 1

2. 3

ATTACHMENT 1 מו אסעם

ROM SECURITIES
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AND INTEREST
AND
DIVIDENDS AND INTEREST F
1
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PART I
FORM 990PF, PAR
FORM

	NET	INVESTMENT	INCOME	3. 373.	3.
REVENUE	AND	EXPENSES	PER BOOKS	373.	373
					TOTAL
				ANY #4013	
				n.	
				TRUST	
			DESCRIPTION	THE COMMERCE TRUST COMI	

110000

בוש בי שור אור הכימד. דר היהמל גין דר במגס מינגמשה

ATTACHMENT 2

2016 FORM 990-PF

FORM 990PF, PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

LEONARD S. DINO, JR. 21 MASON AVENUE WEBSTER GROVES, MO 63119

ATTACHMENT 2

ATTACHMENT

EXPENSE ACCT

CONTRIBUTIONS

AND OTHER ALLOWANCES

TO EMPLOYEE BENEFIT PLANS

COMPENSATION

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

MASON AVE. FAMILY FOUNDATION

WEBSTER GROVES, MO 63119

21 MASON AVENUE

DAVID BYRNE

,0

·

0

·

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TRUSTEE

WEBSTER GROVES, MO 63119

LEONARD S. DINO, JR.

21 MASON AVENUE

NAME AND ADDRESS

WEBSTER GROVES, MO 63119

21 MASON AVENUE

CARRIE N. DINO

·

ATTACHMENT 3

ביל ב יור זו אות טריטויור בינטט/עו/ור מטעט מאאקססט

, ,,,,,,