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

OMB No 1545-0052 2016

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

Open to Public Inspection

Fo	r cale	ndar year 2016 or tax year beginning	, 2016,	and ending	,	
					A Employer identification num	nber
		MEL FOUNDATION		<u>}</u>	<u>47-6690011</u>	
		SAINT ANDREWS DR		1	B Telephone number (see inst	ructions)
M	ARIC	N, IL 62959		į.	618-993-8765	
				·	C If exemption application is	pending, check here
_	Cha	ck all that apply . Initial return	Initial return of a forn	por public charity	-	
u	Cile	Final return	Amended return	her public charity	D 1 Foreign organizations, chec	k here ▶
		Address change	Name change		2 Foreign organizations meet	ing the 85% test, check
	Cha			aundation	here and attach computation	
н	Che		(c)(3) exempt private f	orivate foundation	E If private foundation status	was terminated
_		Section 4947(a)(1) nonexempt charitable tr			under section 507(b)(1)(A)	
ı			ounting method: X C	ash		
	► \$		Other (specify)		If the foundation is in a 60 under section 507(b)(1)(B)	
Б			column (d) must be or	i casri basis)		, check here
P	<u>art l</u>	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investmen	t (c) Adjusted net income	(d) Disbursements for charitable
		columns (b), (c), and (d) may not neces-	expenses per books	ıncome	licome	purposes
		sarily equal the amounts in column (a)				(cash basis only)
_	-	(see instructions).)	77. 665			,
		1 Contributions, gifts, grants, etc., received (attach schedule)	96,667.		23.49	<u> </u>
		2 Check ► I if the foundation is not required to attach Sch B	< , <u> </u>	•	<u> </u>	45.00
		3 Interest on savings and temporary cash investments .				
		4 Dividends and interest from securities	9,306.	9,30	6.	
	-	5 a Gross rents				The Control of the Co
		- b Net rental-income or (loss)	医多类点 经收益额			
	R	6 a Net gain or (loss) from sale of assets not on line 10	-7,534.			Sales and the sales
	E	b Gross sales price for all assets on line 6a 13,852.				THE PROPERTY OF
3		7 Capital gain net income (from Part IV, line 2)			0.	
	E N	8 Net short-term capital gain		第四次 二次表现		
•	U E	9 Income modifications		en Joshanne		
3	-	returns and allowances .				
:		b Less Cost of				3.14.6.7
		goods sold C Gross profit or (loss) (attach schedule)				
		11 Other income (attach schedule)			XV 3	13.474.75 A. 2011 (1.10 1.10 1.10 1.10 1.10 1.10 1.10
		12 Total. Add lines 1 through 11	98,439.	9,30	6 0.	
_		13 Compensation of officers, directors, trustees, etc	.0			
		14 Other employee salaries and wages				
		15 Pension plans, employee benefits .			1 Aug -	
	Α	16a Legal fees (attach schedule)				
	D M	b Accounting fees (attach sch) SEE.ST 1	275.		<u> </u>	<u>- €3</u> 275.
	N	C Other professional fees (attach sch)				017
P		17 Interest			WIFIT A M.	011
E	T	18 Taxes (attach schedule)(see instrs) SEE STM 2	69.	6	9.	
A	Â	19 Depreciation (attach schedule) and depletion			,	
Í	. j.	20 Occupancy				1 -4 1
Ĝ		21 Travel, conferences, and meetings				
A	E	22 Printing and publications				
N D	P	23 Other expenses (attach schedule)	-			
	E N	SEE STATEMENT 3	15.			15.
	S	24 Total operating and administrative	252	ے ا		200
	S	expenses. Add lines 13 through 23	359.	6	9.	_290. 8,820.
		26 Total expenses and disbursements.	8,820.			0,020.
		Add lines 24 and 25	9,179.	6	9.] 0.	9,110.
_		27 Subtract line 26 from line 12:	- /			
		a Excess of revenue over expenses	00.000			
		and disbursements	89,260.	0.00	7	
		b Net investment income (if negative, enter -0-).		9,23		
_		C Adjusted net income (if negative, enter -0-) .		<u> </u>	0.	<u> </u>

Page 2

Par	t II	Balance Sheets	column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book	Value	(c) Fair Market Value
	1			43	 	2,363.	2,363.
	2		rary cash investments	105,38		2,363.	208, 427.
		Accounts receivable			0. 19	2, 119.	208,427.
•	1	Less, allowance for				<u> </u>	ļ
	۱.						
	4	Pledges receivable					<u> </u>
	_ ا	Less allowance for					
	5						<u> </u>
	6	disqualified persons (atta	cers, directors, trustees, and other ich schedule) (see instructions)				
	7	Other notes and loans rec					
S	1		doubtful accounts ►				
Š	8	Inventories for sale	or use				
A S E T	9	Prepaid expenses a	nd deferred charges				
Ś	10:	a Investments – U.S. obligations (attach s	and state government schedule).				
	1	b Investments — corporate	stock (attach schedule)				
	(c Investments — corporate	bonds (attach schedule)				
	11	Investments - land	, buildings, and		`		*
	ł	equipment: basis	· · · · · · · · · · · · · · · · · · ·				/
		Less: accumulated depred (attach schedule)	ciation • •				
	12	Investments - mort	gage loans				
	13	Investments - othe	r (attach schedule) .				
	14	Land, buildings, and	d equipment: basis►	light to the control of the control			
		Less: accumulated depred (attach schedule)	clation • • • • • • • • • • • • • • • • • • •				
		Other assets (descr					
	16	Total assets (to be	completed by all filers — Also, see page 1, item I).	105.00	2 10		210 700
_	17			105,82	2. 19	5,082.	210,790.
ī		· ·	·				
A B	18		••				
Ĭ	19			-			
Ļ	20		ctors, trustees, & other disqualified persons	•			
Ť	21		es payable (attach schedule)	,			
Ī	22	Other liabilities (des	cribe =	_).			
	23		I lines 17 through 22)		0.	0.	
		and complete lines	24 through 26 and lines 30 and 31.	X			
A1 F	م ا	•	**************************************	105.00			
N F E U T N	24	Unrestricted		105,82	2. 19	5,082.	
	25	Temporarily restricte					
A D	26	Permanently restrict					
A S S E T S N		and complete lines	o not follow SFAS 117, check here > 27 through 31.	니			
EL	27	·	principal, or current funds				
	28	Paid-in or capital surplus	, or land, bldg., and equipment fund .				
ΟĒ	29	Retained earnings, accum	ulated income, endowment, or other funds .				
RS	30		fund balances (see instructions)	105,82	2. 19	5,082.	
	31	Total liabilities and (see instructions).	net assets/fund balances	105 00	10	r 000	
Dar	 	<u> </u>	iges in Net Assets or Fund Bala	105,82	2.] 19	5,082.	
				·· · · · · · · · · · · · · · · · · · ·			1
1	Tota end-	I net assets or fund b of-year figure reporte	alances at beginning of year Part II, d on prior year's return)	column (a), line 30 (mus	st agree with	1	105,822.
2		r amount from Part I,				2	89,260.
3		increases not included in li				3	05,200.
4		lines 1, 2, and 3 .	` '			- 3	195,082.
5		ases not included in line 2	(itemize)	• • •		5	133,002.
_			alances at end of year (line 4 minus lin	e 5) - Part II. column (I	b). line 30	- + 6	195,082.
				,	-,, mio oo .		133,002.

(a) List and descr	d Losses for Tax on Investmer tibe the kind(s) of property sold (e.g., i rehouse; or common stock, 200 shares	eal estate.	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr.)	(d) Date sold (mo , day, yr.)
1a 335 CONOCOPHILLIP	S		P	3/20/15	7/21/16
<u>b</u>			ļ		
		····	<u> </u>	<u> </u>	
			 	-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other to plus expense of s		(h) Gain or (e) plus (f) m	
a 13,85	2.		21,386.		-7,534.
b					
<u> </u>					
d e					
	nowing gain in column (h) and owned	by the foundation on 12/3	1/69	(I) Gains (Col.	(b)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (over col. (j), if any	(1)	pain minus col. (k), b an -0-) or Losses (fr	ut not less
a					-7,534.
Ь					
С					
d					
<u>e</u>			3	T	
2 Capital gain net income or	<u> </u>	enter in Part I, line 7 ter -0- in Part I, line 7	_ 2		-7,534.
, -	or (loss) as defined in sections 1222(5	· · · · · · -	,]		
in Part I, line 8	line 8, column (c) (see instructions). I	<u> </u>	3		0.
Part V Qualification Un	der Section 4940(e) for Reduce	ed Tax on Net Invest	ment Income		
If 'Yes,' the foundation does not 1 Enter the appropriate amount	section 4942 tax on the distributable a qualify under section 4940(e). Do not of tin each column for each year; see the in	complete this part.	· 	Yes (d)	X No
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use a	assets	Distribution (col. (b) divided	
2015	2,950.		49,358.		0.059767
2014					
2013					
2012				 	
2011				1	
2 Total of line 1, column (d).			. 2		0.05976
3 Average distribution ratio for number of years the foundation	or the 5-year base period — divide the ation has been in existence if less than	total on line 2 by 5, or by			0.05976
4 Enter the net value of nonc	haritable-use assets for 2016 from Pa	rt X, line 5 .	4		149,243
5 Multiply line 4 by line 3			5		8,920
6 Enter 1% of net investmen	t income (1% of Part I, line 27b) .] 6		92
7 Add lines 5 and 6			1	1	
7 Add lines 5 and 6					9,012
8 Enter qualifying distribution	ns from Part XII, line 4				9,012

_			6900			P	age 4
Par		- see	instru	ctions	<u>s)</u>		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.						
	Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		1				92.
	check here . ► X and enter 1% of Part I, line 27b	ŀ					ł
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	ŀ				-	
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				92.
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				92.
6	Credits/Payments:	[
а	2016 estimated tax pmts and 2015 overpayment credited to 2016	į					
b	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 6 d						
7	Total credits and payments. Add lines 6a through 6d	\neg	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached .	Ì	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. ►	9				92.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax Refunded	. ►	11				
Par	t VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	Lit				Yes	No
ıa	participate or intervene in any political campaign?			. [1 a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			1			
L	(see Instructions for the definition)?				1 b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	4			4.37	3. 3	
	or distributed by the foundation in connection with the activities.	•					
c	Did the foundation file Form 1120-POL for this year?			Ī	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				7877	2 8 2 2	6.5.5
	(1) On the foundation \$\\ 0\). (2) On foundation managers \$\\ \\$			0.	7	3 6	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers . • \$ 0				1		
•	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	5-2917	
2	If 'Yes,' attach a detailed description of the activities	•			2.75.54	T4.20	X
						Y (7)	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	05		1	3		
		55		}	4 a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?					NT.	
	of Yes,' has it filed a tax return on Form 990-T for this year?		•	ł	4 b	IN	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?.				3		X Æresil
_	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.). 6		
	By language in the governing instrument, or				ž ,		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that confined the additional and the ad	lict			-	- <u>%</u> (\$ 4 (NE)
_	with the state law remain in the governing instrument?		• •	- }	6	X	
	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		٠	l	7	X	
ъa	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		-	_	3	
	IL			-		Ša.	
b	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				<u></u> 8b	X	<u></u> _
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	٠		.	00	^	7
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' co.	(3) or	4942(Ú(S)	9		v
		•	e rait	717	7		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nan	1es			10		v
BAA	and addresses			Fa	10 m 990)-PF (2	X 2016)
				- OI	・・・・・フプし	rrr (4	,010)

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orn	m 990-PF (2016) BROEMMEL FOUNDATION 47-6690	011	P	age 5
	rt VII-A Statements Regarding Activities (continued)			
_	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	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?.	. 13	Х	
1/	Website address	- -993-8	765	
14	The books are in care of ROBERT BROEMMEL 1elephone no. 618- Located at 2711 SAINT ANDREWS DR MARION IL 2IP + 4 62959	73350	105_	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	. N/A	<u></u>	
	and enter the amount of tax-exempt interest received or accrued during the year 15		T V	N/A No
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		· · · · · · · ·	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1	a During the year did the foundation (either directly or indirectly):			
	(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?	,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	,		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	,	, ,	, ,
	(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.	,	, ch	
	(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(i)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? .	1 c		X
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))			
	a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	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) (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.)	2 b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	#4V	(3)	2/4
	► 20 _ , 20 _ , 20			. 1
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	0	,	
	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 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)	3 b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	ļ	Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could			
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4 b	,	Х

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Form **990-PF** (2016)

Form 990-PF (2016) BROEMMEL FOUNDATION			<u>47-669</u>) 0011	Page 6
Part VII-B Statements Regarding Activiti		4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incu	•		п. п		
(1) Carry on propaganda, or otherwise attemp	_	-	∐ Yes Ⅸ	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra				No	
(3) Provide a grant to an individual for travel,		•	Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	s)	• • • •	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	e, literary, or or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excel ding disaster assistance	otions ·	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistanc	ce check here	▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?.	emption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Regi	ulations section 53.494	5—5(d)			
6 a Did the foundation, during the year, receive ar on a personal benefit contract?		•	∐Yes X	No	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	iums, directly or indirec	tly, on a personal bene	fit contract? .	· · · 6b	X
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	iction? Yes X	No	1
b If 'Yes,' did the foundation receive any procee			ب ب	N/A 75	
Part VIII * Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees	,
and Contractors					
1 List all officers, directors, trustees, foundation					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other all	e account, lowances
ROBERT BROEMMEL	PRESIDENT	0.	0.		0.
_2711 SAINT ANDREWS DRMARION, IL 62959	0]	
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none, enter 'NONE	1	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other all	e account, lowances
NONE					
				-	
				<u> </u>	_
				ļ	
Total number of other employees paid over \$50,000	i	·	. •		0

0.

Form 990-PF (2016)

Total. Add lines 1 through 3 .

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Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	TF.	
TAOL	<u></u>	
	· · · · · · · · · · · · · · · · · · ·	
 -		
Tota	I number of others receiving over \$50,000 for professional services	0
TOTA	i number of others receiving over \$50,000 for professional services	
	Summary of Direct Charitable Activities	
List ti organ	ne foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of izations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
3		
J		
		
4		
	Summary of Program-Related Investments (see instructions)	
Des	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
	N/A	
2		
_		
A !!		
	other program-related investments. See instructions	
3		

47-6690011

Par	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign f	oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1 a	149,667.
	Average of monthly cash balances	1 b	1,849.
	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	151,516.
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation)		_
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	151,516.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	2,273.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	149,243.
6	Minimum investment return. Enter 5% of line 5	6	7,462.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operational and certain foreign organizations check here □ and do not complete this part.)	ting fo	undations
1	Minimum investment return from Part X, line 6	1	7,462.
2 a	Tax on investment income for 2016 from Part VI, line 5 2a 92.		
b	Income tax for 2016. (This does not include the tax from Part VI) 2b	ž.	
C	Add lines 2a and 2b	2 c	92.
3	Distributable amount before adjustments. Subtract line 2c from line 1	_3	7,370.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	7,370.
6	Deduction from distributable amount (see instructions)	6	
_ 7	Distributable amount as-adjustedSubtract line 6 from line 5. Enter here and on Part XIII, line 1	7	7,370.
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	9,110.
ŧ	Program-related investments – total from Part IX-B	1 Ь	
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: Suitability test (prior IRS approval required)	<u></u> 3a	
t	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	9,110.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part 1, line 27b (see instructions)	5	92.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,018.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ndation	
BAA			Form 990-PF (2016)

Part XIII Undistributed Income (see instructions)

				
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
·		7 00/0 prior to 2070		
1 Distributable amount for 2016 from Part XI,				7 270
line 7			· · · · · · · · · · · · · · · · · · ·	7,370.
2 Undistributed income, if any, as of the end of 2016:				
a Enter amount for 2015 only			0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b -From 2012				
c From 2013				
d From 2014				
e From 2015 551.				
f Total of lines 3a through e	551.			
4 Qualifying distributions for 2016 from Part				
XII, line 4. • \$ 9,110.				
a Applied to 2015, but not more than line 2a			0.	· · · · · · · · · · · · · · · · · · ·
b Applied to undistributed income of prior years		_		
(Élection required – see instructions)		0.		
c Treated as distributions out of corpus			å.	
(Election required — see instructions).	0.			
d Applied to 2016 distributable amount			,	7,370.
e Remaining amount distributed out of corpus	1,740.	<u> </u>	*	· · · · · · · · · · · · · · · · · · ·
5 Excess distributions carryover applied to 2016	0.	<u> </u>	7.4	0.
(If an amount appears in column (d), the same amount must be shown in column (a).)	, , ,			
```	, , , , , , , , , , , , , , , , , , ,			
6 Enter the net total of each column as			31.5 M	( 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
indicated below:	1.66 Y			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,291.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b	· · · · · · · · · · · · · · · · · · ·	0.		
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 .	7.74	0.		
d Subtract line 6c from line 6b Taxable	***			**
amount – see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from		\$.		à
line 2a. Taxable amount — see instructions			0.	<u>(                                    </u>
6 Undertributed income for 2016. Subtract lines				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)	0.			
8 Excess distributions carryover from 2011 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	2,291.			
10 Analysis of line 9.				
a Excess from 2012.				
<b>b</b> Excess from 2013.				
c Excess from 2014				
<b>d</b> Excess from 2015 551.				
e Excess from 2016 1,740.		1		
BAA	·	<del></del>	·	Form 990 PF (2016)

Part XIV Private Operating Foundations (see in:  1 a If the foundation has received a ruling or determination letter to seffective for 2016, enter the date of the ruling.  b Check box to indicate whether the foundation is a private  2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.  b 85% of line 2a.  c 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.  e 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:  a 'Assets' alternative test - enter:  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i).  b 'Endowment' alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test - enter:  (1) Total support other than gross	that it is a private operation of operating foundation of	ing foundation, and t	the ruling	N/A
b Check box to indicate whether the foundation is a private  2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed  b 85% of line 2a  c 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  e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c  Complete 3a, b, or c for the alternative test relied upon:  a 'Assets' alternative test — enter  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i).  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test — enter:	operating foundation d	described in section		4042(1/5)
Tax year income from Part I or the minimum investment return from Part X for each year listed  b 85% of line 2a  c 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  e 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:  a 'Assets' alternative test — enter:  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i).  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test — enter:			4942(j)(3) or	1 1 4040/1/E1
income from Part I or the minimum investment return from Part X for each year listed  b 85% of line 2a  c 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  e 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:  a 'Assets' alternative test — enter:  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i).  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test — enter:		Prior 3 voors		4942(j)(5)
investment return from Part X for each year listed  b 85% of line 2a  c 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  e 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:  a 'Assets' alternative test — enter:  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i) .  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test — enter:	1	<del></del>	T	(e) Total
c Qualifying distributions from Part XII, line 4 for each year listed	<b>(b)</b> 2015	(c) 2014	(d) 2013	
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 2d from line 2c  3 Complete 3a, b, or c for the alternative test relied upon:  a 'Assets' alternative test — enter:  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i).  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test — enter:				
for active conduct of exempt activities  e 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:  a 'Assets' alternative test — enter:  (1) Value of all assets				
for active conduct of exempt activities. Subtract line 2d from line 2c  3 Complete 3a, b, or c for the alternative test relied upon: a 'Assets' alternative test — enter  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i). b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c 'Support' alternative test — enter		<u>]                                    </u>		
alternative test relied upon:  a 'Assets' alternative test — enter:  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i)  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test — enter:				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test — enter:		l l	!	
section 4942(j)(3)(B)(i)  b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c 'Support' alternative test — enter				
minimum investment return shown in Part X, line 6 for each year listed				
(1) Total support other than gross				
nivestment 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		<u></u>		
Rart XV Supplementary Information (Complete t assets at any time during the year — see	this part only if the e instructions.)	foundation ha	d \$5,000 or more	: in
Information Regarding Foundation Managers: a List any managers of the foundation who have contributed mo close of any tax year (but only if they have contributed m ROBERT BROEMMEL	ore than 2% of the total conore than \$5,000) (See	ontributions received section 507(d)(2).	l by the foundation bef	ore the
<b>b</b> List any managers of the foundation who own 10% or more of a partnership or other entity) of which the foundation has NONE	f the stock of a corporation a 10% or greater inter	on (or an equally largest	je portion of the owner	ship of
2 Information Regarding Contribution, Grant, Gift, Loan, Schol Check here    X if the foundation only makes contributions requests for funds. If the foundation makes gifts, grants, etc. (complete items 2a, b, c, and d.	ns to preselected charitab			
a The name, address, and telephone number or e-mail address	of the person to whom a	ipplications should b	e addressed	
<b>b</b> The form in which applications should be submitted and i	information and materia	als they should incl	ude:	
c Any submission deadlines:	<del></del>			
d Any restrictions or limitations on awards, such as by geog				
y	graphical areas, charita	ible fields, kinds of	institutions, or other	factors:

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Form **990-PF** (2016)

2 Octobrida November Deld Busines No. Vo		Day		<del></del>
3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen		<del>,                                     </del>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 4				
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			. ► 3a	8,820
b Approved for future payment				
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	1			1
	]			1
Total	1	<u> </u>	<b>.</b> 21	<del> </del>
Total		•	. ► 3b	'

	Analysis of Income-Producing amounts unless otherwise indicated.		I business income	Excluded	by section 512, 513, or 514	(e)
1 D		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
_	am service revenue.		<del></del>	code		
а Ь	· · · · · · · · · · · · · · · · · · ·			┿~~;		
c		++		1		
d		†		1		_
е					-	
f			·			
g Fees	and contracts from government agencies					
	pership dues and assessments	<u> </u>		ļ		
	t on savings and temporary cash investments			<u> </u>		
	ends and interest from securities			14	9,306.	
	ental income or (loss) from real estate:					
	financed property		<del></del>	+		
	ebt-financed property ntal income or (loss) from personal property	<del>                                     </del>		<del>                                     </del>		
	investment income .	+		+		
	r (loss) from sales of assets other than inventory			+		-7,534.
	ncome or (loss) from special events.	<u> </u>				7,554.
	s profit or (loss) from sales of inventory			†		
	revenue				THE SHAPE OF	TACKSON'S
а			I III IIII			
b					-	
С						
d						
e		1				
40		CONTRACTOR CONTRACTOR		489-8 46020 XB/C1		
	otal Add columns (b), (d), and (e)	132000		ABOVE	9,306.	
13 Total	. Add line 12, columns (b), (d), and (e) .			<b>***</b>	9,306. 13	
13 Totai (See works	Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculate	ions )	shment of Fyem		13	
13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculat Relationship of Activities to the	e Accompli		pt Purp	oses 13	1,772.
13 Totai (See works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the	e Accompli		pt Purp	oses 13	1,772.
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculat Relationship of Activities to the	e Accompli		pt Purp	oses 13	1,772.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculat Relationship of Activities to the	e Accompli		pt Purp	oses 13	1,772.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculat Relationship of Activities to the	e Accompli		pt Purp	oses 13	1,772.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculat Relationship of Activities to the	e Accompli		pt Purp	oses 13	1,772.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculat Relationship of Activities to the	e Accompli		pt Purp	oses 13	1,772.

# Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

						-		Yes	No
descri	ie organization directly ibed in section 501(c) ( ng to political organizal	of the Code (ot	ngage in any of the follo ther than section 501(c)	wing with any (3) organization	other organization ons) or in section 5	n 527,	Transfer of the state of the st		
	• .		a noncharitable exempt	organization	of:			Į.	
(1) C		,	•				. 1a(1)		Х
	ther assets						1a(1)		$\frac{\lambda}{X}$
	transactions:			•			12(2)		
		charitable exe	mpt organization				. 1 b (1)		Х
			ble exempt organization				1 b (2)		X
			r assets			•	1 b (3)		X
			• • • • • • • • • • • • • • • • • • • •		•••		1 b (4)		X
	oans or loan guarantee						1 b (5)		X
	_		p or fundraising solicita				1 b (6)	-	X
			ts, other assets, or paid			•	10(6)		X
• Oriain	ig of facilities, equipm	ent, maning is	is, other assets, or paid	employees.			[ [	l	
<b>d</b> If the the go any tr	answer to any of the a ods, other assets, or ser ansaction or sharing a	above is 'Yes,' rvices given by tarrangement, sh	complete the following s the reporting foundation. I now in column (d) the va	schedule. Colu f the foundation alue of the goo	umn <b>(b)</b> should alw n received less than ods, other assets,	rays show the fa fair market value or services rece	eir market valu ein eived	ue of	
(a) Line no.	(b) Amount involved		f noncharitable exempt organiz		(d) Description of trans			gements	<u></u>
N/A					· · · · · · · · · · · · · · · · · · ·	· ·		<u> </u>	
			-		· · · -				
-									
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				<u>-</u>					
					· · · · · · · · · · · · · · · · · · ·				
							<del></del>		
descri	bed in section 501(c) (	of the-Code (ot	with, or related to, one o her than section 501(c)(	r more tax-exe (3)) or in secti	mpt organizations on 527?		Yes	X	No
	s,' complete the followi	3	4 > 7 (	<del></del>					
	(a) Name of organizati	ion	<b>(b)</b> Type of orga	nization	(c)	Description of	relationship	. ,	
N/A	<del></del>								
<del></del>	<del></del>								
	<del></del>								
Llada	v assetting of assess I dealer				<del></del>				
corre	ect, and complete Declaration	of preparer (other t	ned this return, including accom han taxpayer) is based on all in	panying schedules formation of which	and statements, and to preparer has any knowle	the best of my knowle edge	edge and belief, it	is true,	
Sign Here	" Hand 1.1.	Juenn	l 15-1	11-17	PRESIDENT		May the IF this return preparer s	with the shown be	elow
Sig	nature of officer or trustee		Date	<del></del>	Title		(see instru	Yes	ĺN₀
· · · · · · · · · · · · · · · · · · ·	Print/Type preparer's nan	me	Preparer's signature	)	Date 1 -1	Check	PTIN		1
Paid	EARON S WOLA	VER	1	<del>/</del>	5/3/17	self-employed	P00270	938	
Preparer								<del></del>	
Use Only			OUNG ST.	<del></del>		Firm's EIN - 46-	4220040		
USE UIIIY			62959			Phono no 100	10) 002 0	1140	
BAA		WKION' IT	04333			Phone no (6.	18) 993-2		
							Form <b>990</b>	PP (2	ZU10)

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

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

2016

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

OMB No 1545-0047

Employer identification number Name of the organization 47-6690011 BROEMMEL FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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. X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year 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)

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

	B (Form 990, 990-EZ, or 990-PF) (2016)	Page	ridentification number
Name of org BROEMN	EL FOUNDATION	' -	690011
Panti !	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT T BROEMMEL  2711 ST ANDREWS DRIVE  MARION, IL 62959	\$96,667.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <b>\$</b>	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total -contributions	(d) Type of contribution
		- \$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions )

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

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

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of Part II

Name of organization

BAA

Employer identification number

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

47-6690011 BROEMMEL FOUNDATION Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from Part I N/A (d) Date received (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) Part I (d) Date received (c) FMV (or estimate) (a) No. from Part I (b)
Description of noncash property_given (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 (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) Part I (d) Date received (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) Part I

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Name of organ	(Form 990, 990-EZ, or 990-PF) (2016)			1 to 1 of Part III			
	L FOUNDATION			7-6690011			
Part III	Exclusively religious, charitable, et or (10) that total more than \$1,000 for the following line entry. For organizations contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional states.	ne year from any one contributor. Cor completing Part III, enter the total of <i>exclu</i> (Enter this information once. See instruc	ns described in inplete columns (a) thrusively religious, cha	section 501(c)(7), (8), ough (e) and			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Descript	(d) cription of how gift is held			
	N/A						
	Transferee's name, address	Relationship of tran	enship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
(a) No. from	(b) Purpose of gift	(c) Use of gift	Descript	(d)			
Part I			·				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Descript	(d) ion of how gift is held			
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Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

2016	FEDE	ERAL STAT	EMENTS	S	PAGE 1
	BROEMMEL FOUNDATION				
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES					
BARNETT & LEVINE	TOTAL	(A) EXPENSES PER BOOKS \$ 275. \$ 275.	(B) N INVESTM INCOM	MENT ADJUSTED	\$ 275.
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES					
EXCISE TAX ON INVESTMENT IN	ICOME . TOTAL	(A) EXPENSES PER BOOKS \$ 69.	(B) N INVESTN INCOM \$ \$	MENT ADJUSTED ME NET INCOME 69.	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES				-	
FILING FEES	TOTAL	(A) EXPENSES PER BOOKS \$ 15. \$ 15.		MENT ADJUSTED	(D) CHARITABLE PURPOSES  \$ 15. \$ 15.
STATEMENT 4 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YE	AR				
NAME AND ADDRESS	RFI.	DONEE ATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
MARION MEDICAL MISSION	N/A		?C	CHARITABLE ACTIVITIES	\$ 420.
ST JOSEPH CHURCH BLDG FUND	N/A	1	?C	CHARITABLE ACTIVITIES	1,000.
DOMINICAN SISTERS	N/A	I	PC	CHARITABLE ACTIVITIES	1,000.
ST FRANCIS BORGIA CHURCH	N/A	Ŧ	PC	CHARITABLE ACTIVITIES	400.

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# **FEDERAL STATEMENTS**

PAGE 2

**BROEMMEL FOUNDATION** 

47-6690011

### STATEMENT 4 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE GRANT		AMOUNT
MARION MINISTERIAL ALLIANCE	N/A	PC	CHARITABLE ACTIVITIES	\$	1,000.
CATHOLIC CHARITIES FLORIDA	N/A	PC	CHARITABLE ACTIVITIES		2,500.
WOMEN'S CENTER	N/A	PC	CHARITABLE ACTIVITIES		500.
THE LIGHTHOUSE SHELTER	N/A	PC	CHARITABLE ACTIVITIES		1,000.
NIGHTS SHIELD	N/A	PC	CHARITABLE ACTIVITIES		1,000.
				TOTAL \$	8,820.