

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491177003167

2016

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

Open to Public Inspection

For	caler	ndar year 2016, or tax year	beginning 01-01-20)16 , aı	nd er	nding 12-31-	2016				
		indation FAMILY FOUNDATION				A Employer Id	entification number	۲			
KC	DENIGK	FAMILY FOUNDATION	68-0571605								
		l street (or P O box number if mail is n AST HAPPY VALLEY ROAD 315	ot delivered to street address)	Room/suite		B Telephone nu	mber (see instruction	s)			
						(480) 473-7648					
		i, state or province, country, and ZIP or E, AZ 85255	C If exemption	application is pending	g, check here						
G (1	neck al	I that apply	ganizations, check he	re \Box							
• •	reek ur	Final return	_	ganizations meeting	▶ ⊔						
			☐ Amended return ge ☐ Name change	test, check here and attach computation							
H C	neck tv	_	501(c)(3) exempt private	foundation			ındatıon status was t n 507(b)(1)(A), checl				
		4947(a)(1) nonexempt charitable				under sectio	11 307(b)(1)(A), clieci	Killere F —			
		ket value of all assets at end	J Accounting method	☑ Cash ☐ Accru	al		ition is in a 60-month				
		from Part II, col (c), \$ 1,229,312	Other (specify) (Part I, column (d) must	be on cash basis)		under sectio	n 507(b)(1)(B), check	k here			
Da	rt I	Analysis of Revenue and	Expenses (The total					(d) Disbursements			
		of amounts in columns (b), (c), and (equal the amounts in column (a) (see	(d) may not necessarily	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc ,	received (attach								
	2	schedule) Check ▶ ☑ If the foundation is	not required to attach								
	-	Sch B									
	3	Interest on savings and tempora	ry cash investments	96		96	96				
	4	Dividends and interest from secu	ırıtıes	18,472		18,472	18,472				
	5a	Gross rents									
æ	b	Net rental income or (loss)		6 1							
Ĕ	6a	Net gain or (loss) from sale of as	ssets not on line 10	23,005							
Revenue	b	Gross sales price for all assets or				22.275					
ă	7	Capital gain net income (from Pa	•			22,976					
	8	Net short-term capital gain .									
	9	Income modifications	I								
	10a b	Gross sales less returns and allow Less Cost of goods sold	wances	<u> </u>							
	c	Gross profit or (loss) (attach sch	edule)								
	11	Other income (attach schedule)	,								
	12			41,573		41,544	18,568				
	13	Compensation of officers, director		41,373			10,300				
	14	Other employee salaries and was	,								
v.	15	Pension plans, employee benefits	=								
Se	16a	Legal fees (attach schedule) .									
<u>B</u>	Ь	Accounting fees (attach schedule	<u>•</u>)	7,481		3,741		3,740			
and Administrative Expenses	c	Other professional fees (attach s	•			, :-		, 12			
IVe	17	Interest									
rat	18	Taxes (attach schedule) (see ins	tructions)	2,204							
]] S	19	Depreciation (attach schedule) a	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Ē	20	Occupancy									
Ac	21	Travel, conferences, and meeting	gs	61,421		30,711		30,710			
md	22	Printing and publications	=			,					
g Đi	23	Other expenses (attach schedule									
Operating	24	Total operating and administ									
æ		Add lines 13 through 23	•	71,106		34,452		34,450			
Ö	25	Contributions, gifts, grants paid		69,100		<u> </u>		69,100			
	26	Total expenses and disburser	ments. Add lines 24 and			2.1.5-		400 F=-			
	27	Subtract line 26 from line 12		140,206		34,452		103,550			
	a	Excess of revenue over exper	nses and	-98,633							
	١.	disbursements									
	b	Net investment income (if neg	•			7,092					
	C	Adjusted net income(if negative	<u> </u>				18,568				
ror	raper	work Reduction Act Notice, se	e instructions.		(Cat No 11289>	K For	m 990-PF (2016)			

1,489,388

391

391

1 488 997

1,488,997

1,489,388

∞,]

1,390,364

1,390,364

1,390,364

1,390,364

1

2

3

4

5

6

1,488,997

1,390,364

1,390,364 Form **990-PF** (2016)

-98,633

1,229,312

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶ ✓

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg , and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Investments—other (attach schedule)

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize)

	7
2	8
Assets	9
As	10a
	Ь
	С

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

28 29

31

Part III

2

3

Liabilities

Balances

Fund

ō

Assets 27

Net 30

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Enter the appropriate amount in each column for each year, see instructions before making any entries

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

in Part I, line 8

(a)

Base period years Calendar

year (or tax year beginning in)

2015

2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

78,880

93,760

97,188

111,261

168,773

3

22,976

Page 3

(d)

Date sold

(mo, day, yr)

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b) .

8 Enter qualifying distributions from Part XII, line 4

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

Net value of noncharitable-use assets

1,251,285

1,270,024

1,227,988

1,285,929

1,318,288

2

3

4

5

6 7

8

Yes V No

(d) Distribution ratio

(col (b) divided by col (c))

0 063039

0 073825

0 090604

0 075578

0 128024

0 431070

0 086214

242,502

20,907

20,978

103,550

Form 990-PF (2016)

Form 990-PF (2016) Information About Officers, Directors, Trustees,	Foundation Managers Highly	Page 7
and Contractors (continued)	roundation managers, riging	Palu Employees,
3 Five highest-paid independent contractors for professional service	es (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		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		1
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ	evant statistical information such as the nunced, etc	nber of Expenses
1		
2		
2		
3		
		
4		
Part IX-B Summary of Program-Related Investments (see	nstructions)	
Describe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions		
all other program-related investments. See instructions		
-		
Total. Add lines 1 through 3		. ▶
		Form 990-PF (2016)

1a

1b

2

За 3b

4

5

103,550

103.550

Form 990-PF (2016)

71 103.479

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Page 9

12.054

12.054

Form **990-PF** (2016)

1	XI	į į	

Form 990-PF (20	016)	
Part XIII	Undistributed Income	(see instructions)

b Total for prior years

a From 2011.

b From 2012. c From 2013. . .

d From 2014. e From 2015.

XII, line 4 > \$

indicated below:

4 Qualifying distributions for 2016 from Part

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

6 Enter the net total of each column as

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 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

b Excess from 2013. .

same amount must be shown in column (a))

1 Distributable amount for 2016 from Part XI, line 7 a Enter amount for 2015 only. Excess distributions carryover, if any, to 2016

2 Undistributed income, if any, as of the end of 2016

103,281 33,612

59.297 32,330 18,439 f Total of lines 3a through e.

(a)

Corpus

246,959

91.496

338,455

103.281

235,174

33.612 59,297

32.330

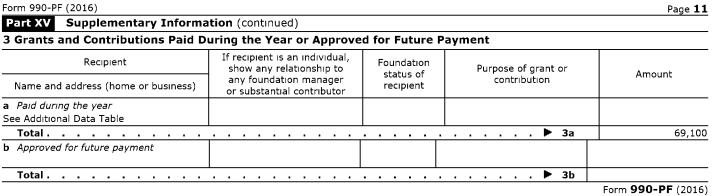
18.439

91.496

(b)

Years prior to 2015

(c)



Form 990-PF (2016)					Page 12
Part XVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	(e) Related or exempt	
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a b					
c					
d					
e f					
q Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	96	
4 Dividends and interest from securities			14	18,472	
5 Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	22,976	29
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory11 Other revenue a					
b					
c					
d e					
12 Subtotal Add columns (b), (d), and (e)				41,544	29
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations			1	3	41,573
Part XVI-B Relationship of Activities to the		ment of Exem	pt Purposes		
Line No. Explain below how each activity for which the accomplishment of the foundation's explain the accomplishment of the foundation of					
<u> </u>				Fo	rm 990-PF (2016)

Part	XVII	Exempt Organi		Ialis	1613 10 6	and mansact	.101	is and Relatio	nsinps with Non	iciiai itabie		
		ganization directly or in Code (other than section								on 501	Yes	No
a Tra	nsfers f	from the reporting four	idation to a n	oncha	ritable ex	empt organizatio	on d	of				
(1)	Cash.									. 1a(1		No
(2)) Other	assets								. 1a(2		No
b Oth	ner tran	sactions										
		of assets to a nonchar	•	-						. 1b(1		No
		ases of assets from a r			-					1b(2	_	No
		al of facilities, equipmen								1b(3		No
		bursement arrangemer								. 1b(4)		No
· ` ' · · · · · · · · · · · · · · · · ·												No
(6) Performance of services or membership or fundraising solicitations											<u>'</u>	No No
	-	ver to any of the above								. Lo		NO
of t	the good any tran	ds, other assets, or ser nsaction or sharing arra (b) Amount involved	vices given b ingement, sh	y the ow in	reporting column (c	foundation If th	ne f	oundation receive goods, other asse	d less than fair mark	ket value ved	angemen	ıts
	-											
2a Is t	he four	ndation directly or indir	ectly affiliate	d with	. or relate	ed to, one or mor	re t	ax-exempt organ	zations			
		in section 501(c) of the	•		•	•				. 🗆 Yes	✓ N	lo
		omplete the following s	•			· // //						
	,	(a) Name of organization			(1	b) Type of organiza	atıor	1	(c) Description	of relationship		
Sign	of m	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, c									
Here		*****				2017-06-17		*****		lay the IRS disci		
	· · · · · · · · · · · · · · · · · · ·							with the preparer see instr)? 🗹				
		Print/Type preparer's	name	Prep	arer's Sıgı	nature		Date	Check if self- employed ▶ □	PTIN P0029	0440	
Paid Pron	arer	STEVEN K URKE						2017-06-17				
_	Only	Firm's name ► URK	E & STOLLER	LLP						Firm's EIN ▶20	-38154	1 50
J 36	J.111 y	Firm's address ▶ 11	.811 N TATUI	M BLV	D STE 106	50						
	Firm's address ► 11811 N TATUM BLVD STE 1060 PHOENIX, AZ 85028									Phone no (60)	2) 867-!	5058
		1										

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (c) Compensation (If (a) Name and address Title, and average (d) Expense account. hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation HENRY H ROFNIGK IR OFFICER 0 5 00 10040 E HAPPY VALLEY ROAD 315 SCOTTSDALE, AZ 85255 KATHLEEN A ROENIGK VICE PRESIDE 0 1 00 10040 E HAPPY VALLEY ROAD 315 SCOTTSDALE, AZ 85255 RANDALL K ROENIGK PRESIDENT 0 0 5 00 10040 E HAPPY VALLEY ROAD 315 SCOTTSDALE, AZ 85255 SCOTT S ROFNIGK DIRECTOR 0 5 00 10040 E HAPPY VALLEY ROAD SCOTTSDALE, AZ 85255 KATIE L ROENIGK DIRECTOR 0 1 00 10040 F HAPPY VALLEY ROAD 315 SCOTTSDALE, AZ 85255 ROSS ROENIGK DIRECTOR 0 1 00 10040 E HAPPY VALLEY ROAD 315 SCOTTSDALE, AZ 85255 LAWRENCE M ROENIGK DIRECTOR 0 0 1 00 10040 E HAPPY VALLEYROAD 315 SCOTTSDALE, AZ 85255 RON ROENIGK DIRECTOR 1 00

10040 E HAPPY VALLEY ROAD 315 SCOTTSDALE, AZ 85255

Form 990PF Part XV Line 3 - Grant	s and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	Toopie.ie		
a Paid during the year		<u> </u>		
BACH AND BEYOND C/O DANKHAUS 4740 N WESTERN AVENUE CHICAGO, IL 60660			MUSIC ENHANCEMENT	500
BENEDICTINE SISTERS OF PITTSBURGH 3526 BAKERSTOWN ROAD BAKERSTOWN, PA 15007			COMMUNITY SUPPORT	200
CALVARY EPISCOPAL CHURCH 111 3RD AVE SW ROCHESTER, MN 55902			COMMUNITY SUPPORT	5,000
CHICAGO SINFONIETTA 70 E LAKE ST 1430 CHICAGO, IL 60601			EDUCATION OUTREACH	500
DIRECT EFFECT CHARITIES 4044 N LINCOLN AVE 400 CHICAGO, IL 60618			INNER CITY PUBLIC SCHOOLS	400
DOOR COUNTY LAND TRUST PO BOX 65 STURGEON BAY, WI 54235			PRESERVATION	500
DUBOIS BOOSTER CLUB P O BOX 445 DUBOIS, WY 82513			SCHOOL SPORTS PROGRAMS	500
FRIENDLY TOWERS-JESUS PEOPLE USA C/O EVANGELICAL COVENANT CHURCH 920 W WILSON AVENUE CHICAGO, IL 60640			SENIOR CARE PROGRAMS	300
FRIENDS OF CONRAD SULZER LIBRARY C/O REV GEORGE RICE ADDISON ST COMM CHURCH 2132 W ADDISON ST CHICAGO, IL 60618			MUSIC ENHANCEMENT	2,000
GENE & ROSEMARY SCHULTER FOUNDATION PO BOX 25430 CHICAGO, IL 606250430			SCHOLARSHIP PROGRAM	450
HEALTHY LIFESTARS 1645 E MISSOURI AVE STE PHOENIX, AZ 85016			CHILDREN HEALTHY LIFESTYLES ED	500
HUNTSMAN CANCER FOUNDATION 2000 CIRCLE OF HOPE SALT LAKE CITY, UT 84112			CANCER RESEARCH	500
IZAAK WALTON LEAGUE OF AMERICA 707 CONSERVATION LANE GAITHERSBURG, MD 20878			CONSERVATION	5,000
JANE ADDAMS SENIOR CAUCUS 1111 N WELLS ST 302 CHICAGO, IL 60610			BETTERMENT OF THE COMMUNITY	200
JESUS PEOPLE USA 920 W WILSON AVE CHICAGO, IL 60640			COMMUNITY SUPPORT	200

69,100

Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	Tecipient						
a Paid during the year								
KIWANIS CLUB OF LAKEVIEW PO BOX 180054 CHICAGO, IL 60618			COMMUNITY SUPPORT	1,000				
KIWANIS CLUB OF RAVENWOOD C/O MARIA BAPPERT 4710 N MAPLEWOOD AVE CHICAGO, IL 60625			COMMUNITY SUPPORT	100				
ST LABRE INDIAN SCHOOL E TONGUE RIVER RD ASHLAND, MT 59003			EDUCATION	200				
LIVING WATER LUTHERAN CHURCH 9201 E HAPPY VALLEY RD SCOTTSDALE, AZ 85255			COMMUNITY SUPPORT	2,000				
NORTHWESTERN UNIVERSITY MEDSCHOOL 420 E SUPERIOR ST CHICAGO, IL 60611			SCHOLARSHIP FUND	10,000				
OHIO UNIVERSITY PO BOX 869 ATHENS, OH 45701			CHEMISTRY FUND	30,000				
PARADISE VALLEY UNIFIED SCH DISTR 15002 N 32ND STREET PHOENIX, AZ 85032			EDUCATION	5,000				
PGA GOLF - SPECIAL OLYMPICS 10685 N 69TH STREET SCOTTSDALE, AZ 85254			SPECIAL NEEDS PHYSICAL FITNESS	1,000				
SOUTHWEST WILDLIFE CONSERVATION 8711 E PINNACLE PEAK RD SCOTTSDALE, AZ 85255			CONSERVATION	300				
THE WESTSIDE CLUB 9450 W 10TH STREET STE 7 INDIANAPOLIS, IN 46412			ADDICTION TREATMENT CENTER	2,000				
WYOMING PUBLIC MEDIA DEPT 3984 1000 E UNIVERSITY AVE LARAMIE, WY 82071			COMMUNITY SUPPORT	750				
Total				69,100				

efile GRAPHIC print - DO NOT I	PROCESS	As Filed Data -					DLN: 93491177003167					
TY 2016 Accounting F	ees Sch	edule										
Name: ROENIGK FAMILY FOUNDATION												
	EIN: 68-0571605											
	ETIM.	00-03/1	005									
Category	Ame	ount		Investment Income	Adjusted Ne Income		Disbursements for Charitable Purposes					
HENRY HORNE LLP		7,481		3,741			3,740					

Note: To capture the full conte	lote: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.										
TY 2016 Gain/Loss from Sale of Other Assets Schedule											
Name: ROENIGK FAMILY FOUNDATION											
	EIN: 68-0571605										
Name	Date	How	Date	Purchaser	Gross Sales	Basis	Basis	Sales	Total	Accumulated	

DLN: 93491177003167

Name	Date Acquired	How A cquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
2275 313 SH TROWEPRICE CAP APPR	2013-11	PURCHASE	2016-05		60,000	59,963			37	
2277 040 SH TROWEPRICE CAP	2013-11	PURCHASE	2016-07		60,000	60,008			-8	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491177003167
TY 2016 Investments Corporat	e Stock Schedu	le
-		

1,221,323

1,228,728

Name: ROENIGK FAMILY FOUNDATION **EIN:** 68-0571605

T ROWE PRICE CAP APPRECIATION

	Name of Stock		End of Year Book Value	End of Year Fair Market Value
ALPHA BANCORP			153,648	1

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491177003167	
TY 2016 Other Liabilities Schedule					
Name:	ROENIGK FAMILY FOUNDATION				
EIN:	68-0571605				
Description	n		Beginning of Year - Book Value	End of Year - Book Value	
AMERICAN EXPRESS CREDIT CARD			391		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	- DLN: 93491177003167	
TY 2016 Other Receivables from Officers Schedule			
Hom Officers Schedule			
	DOENTOK E	ANTLY FOLING ATTON	
	Name: ROENIGK FAMILY FOUNDATION		
	68-0571605		
Travel Advance to Officers:			
	Item No.	1	
Borro	wer's Name	PERSONAL EXPENSE PD BY FOUNDATION	
Borr	ower's Title		
Original Amo	ount of Loan	8126	
ı	Balance Due		
ι	Date of Note	2015-12	
м	aturity Date	2016-06	
Repay	ment Terms	REPAYMENT IN FULL	
Iı	nterest Rate	0.0100	
Security Provided I	y Borrower		
Purp	ose of Loan	PERSONAL EXPENSES PAID BY FOUNDATIO	
Description of Lender Co	nsideration		
Consid	eration FMV		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491177003167	
TY 2016 Taxes Schedule					
Name:	ROENIGK FA	MILY FOUNDATIO	N		
EIN:	68-0571605				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
2016 ESTIMATED TAX PAYMENT	2,204				