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# Form **990-PF**

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

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2016

OMB No 1545-0052

Open to Public Inspection

Départment of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2016 or tax year beginning 2016, and ending Employer identification number 81-2798465 Kostiuk Family Foundation Inc. Telephone number (see instructions) 1607 Ashforde Drive R (404) 376-6407 Marietta, GA 30068 C If exemption application is pending, check here X Initial return G Check all that apply: Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation Check type of organization X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust \int Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here X Cash Fair market value of all assets at end of year Accounting method: Accruat (from Part II, column (c), line 16) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) ► Ś (Part I, column (d) must be on cash basis ) 1,041,182 Part I Analysis of Revenue and (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not neces purposes sarily equal the amounts in column (a) (cash basis only) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) 010,373 2 Check ► if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 580 580 580 Dividends and interest from securities  $\overline{10}$ , 877 10,877 10,877 5 a Gross rents b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 445,027 REV b Gross sales price for all assets on line 6a 524,520 Capital gain net income (from Part IV, line 2) 445,027 3% Ě Net short-term capital gain 0 Ü Income modifications 10 a Gross sales less returns and b Less Cost of goods sold ×. \* C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 1,466,857 456,484 11,457 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits See St 1 16a Legal fees (attach schedule) 6,250 6,250 6,250 b Accounting fees (attach sch) c Other professional fees (attach sch). See St 2 3,782 3,782 3,782 NISTRAT 17 Interest. Taxes (attach schedule)(see instrs) See Stm 3 18 28 28 Degreciation (attach 19 schedule) and depletion MAY 0 9 201 Occupancy Travel, conferences, and meetings. 22 Printing and publications. <del>4302</del>2 Other expenses (attach schedule) 23 24 Total operating and administrative expenses. Add lines 13 through 23 10,060 10,060 10,060 Contributions, gifts, grants paid. Total expenses and disbursements. Add lines 24 and 25 10.060 10,060 10,060 Subtract line 26 from line 12: a Excess of revenue over expenses 1,456,797 and disbursements b Net investment income (if negative, enter -0-) 446, 424 C Adjusted net income (if negative, enter -0-) 397.

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0504L 12/16/16

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Part	II I	Balance Sheets	column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
• 7	1	Cash - non-interest		(a) Book Value	(b) Book value	(4) Tan Market Value
ļ			rary cash investments		13,673.	13,673.
- (		Accounts receivable	· -		13/0/01	20,0.01
- {		Less: allowance for		~	and the second of the second o	
	4	Pledges receivable	<b></b>	<del></del>		<del></del>
Ì	7	Less allowance for	doubtful accounts >			
	5	Grants receivable				
	6		icers, directors, trustees, and other			
1	6	disqualified persons (atta	ach schedule) (see instructions)	ŀ		
	7	Other notes and loans red	ceivable (attach sch)		,	
A		Less allowance for	doubtful accounts >			
ASSETS	8	Inventories for sale	or use			
Ę	9	Prepaid expenses a	and deferred charges			
s	10 a	Investments - U.S	and state government			
		obligations (attach s	O			
	_	Investments — corporate	· · · · · · · · · · · · · · · · · · ·		888,329.	888,329.
		: Investments — corporate	Page 1		132,793.	132,793.
	11	Investments – land equipment, basis	, buildings, and	, , , <del>, , , , , , , , , , , , , , , , </del>	· · · · · · · · · · · · · · · · · · ·	
		Less: accumulated depre			ay make the a Memora av	1833 - 1 AMS
	ĺ	(attach schedule)	► ►			
	12	Investments - mort	tgage loans.			
	13	Investments - othe	r (attach schedule) Statement 6		6,387.	6,387.
	14	Land, buildings, and	d equipment basis►			
		Less: accumulated depre	ciation			
		(attach schedule)	·			
		Other assets (descr	completed by all filers — )			
	16	see the instructions	. Also, see page 1, item l).	0.	1,041,182.	1,041,182.
Ļ	17	Accounts payable a	nd accrued expenses			
I A	18	Grants payable				
A B	19	Deferred revenue				
l L	20	Loans from officers, dire	ctors, trustees, & other disqualified persons			
Ĩ	21	Mortgages and other note	es payable (attach schedule)			
Ŧ	22	Other liabilities (des	scribe >)			
E S	23	Total liabilities (add	d lines 17 through 22)	0.	0.	
	23		bllow SFAS 117, check here			
		and complete lines	24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			1,041,182.	
N F E U T N	25	Temporarily restrict	ed			
, D	1	Permanently restric		· · · · · · · · · · · · · · · · · · ·		
A D	1		o not follow SFAS 117, check here December 27 through 31.			
A B S A L T A		and complete lines	27 through 31.			
ELTASN	27	Capital stock, trust	principal, or current funds .			
SN	28	Paid-in or capital surplus	s, or land, bldg., and equipment fund			
O E	29	Retained earnings, accum	nulated income, endowment, or other funds			
ŘŠ	30	Total net assets or	fund balances (see instructions).	0.	1,041,182.	
	31	Total liabilities and (see instructions)	net assets/fund balances	0.	1,041,182.	
Par	<del>k</del> mi	•	nges in Net Assets or Fund Balanc			2.3. 52.350mm 2.004.00.00 (2.16.00)
1	Tota	I net assets or fund b	palances at beginning of year - Part II, colu		aree with	
•	end-	of-year figure reporte	ed on prior year's return)	(), (	1	0.
2	Ente	er amount from Part I	, line 27a			1,456,797.
3	Other	increases not included in	line 2 (itemize) See Statement	<u>_7</u>	3	34,590.
4		lines 1, 2, and 3			4	1,491,387.
5		eases not included in line 2			5	450,205.
_6_	Tota	i net assets or fund t	palances at end of year (line 4 minus line 5)	) - Part II, column (b),	ine 30 . <b>6</b>	1,041,182.
BAA		-	TEEA0302L	12/16/16		Form <b>990-PF</b> (2016)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)  (b) How acquir P — Purchase D — Donation						(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a	4100 United Parcel	Service		P		2/14/03	7/15/16
	Morgan Stanley 0895	81, detail attached		P		Various	Various
	Morgan Stanley 0895	81, detail attached		P		Various	<u>Various</u>
	<del></del>						
e		(0.0		<u> </u>		4) 0	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa			(h) Gain or (e) plus (f) m	(loss) inus (g)
a	452,331.			5,018.			447,313.
Ŀ	71,745.		7	4,016.		· -	-2,271.
				459.			-15.
е			10/21	150			
	<del></del>	ing gain in column (h) and owned  (i) Adjusted basis	(k) Excess of col (i)		O.	(I) Gains (Col. ain minus col (k), b	
	(i) F M.V as of 12/31/69	as of 12/31/69	over col (j), if any			an -0-) or Losses (fr	
a							447,313.
							-2,271.
							-15.
e		□ If goin, also				Γ	
2	Capital gain net income or (ne		enter in Part I, line 7 ter -0- in Part I, line 7	-	2		445,027.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	5) and (6).	İ			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions)	f (loss), enter -0-	-	3		-2,286.
Par	t V: Qualification Under	Section 4940(e) for Reduce	ed Tax on Net Investn	nent Inco	ome	<u> </u>	
If se	ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qua	ction 4942 tax on the distributable a	amount of any year in the b	pase perioc	J?	N/A	∏ No
1	Enter the appropriate amount in	each column for each year; see the in	structions before making any	entries.			
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets		(d) Distribution (col. (b) divided	
	2015						
	2014						
	2013						
	2012						
	2011					<del></del>	
2	Total of line 1, column (d).				2		
3	Average distribution ratio for the number of years the foundation	ne 5-year base period — divide the n has been in existence if less than	total on line 2 by 5, or by t 5 years	he	3		
4	Enter the net value of nonchar	stable-use assets for 2016 from Par	rt X, line 5		4		
5	5 Multiply line 4 by line 3						
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		
7	Add lines 5 and 6.				7		
8	Enter qualifying distributions fr			·	8		
	If line 8 is equal to or greater that Part VI instructions.	n line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1%	tax r	ate. See the	

•				
Form	1990-PF (2016) Kostiuk Family Foundation Inc. 81-2798465		Р	age <b>4</b>
_	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here		· · · · ·	
•	Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)			
t	Domestic foundations that meet the section 4940(e) requirements in Part V,		8,9	28.
	check here. ► and enter 1% of Part I, line 27b			
•	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	foundations only Others enter -0-).			0.
3	Add lines 1 and 2		8,9	28.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income, Subtract line 4 from line 3. If zero or less, enter -0-		8,9	28.
6	Credits/Payments "			
	2016 estimated tax pmts and 2015 overpayment credited to 2016			
	Exempt foreign organizations – tax withheld at source	*		
(	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any <b>penalty</b> 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		8,9	928.
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			
Par	t VII-A: Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	Yes	No X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (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 or distributed by the foundation in connection with the activities		<i>3</i>	
	Did the foundation file <b>Form 1120-POL</b> for this year?	1 c	,834	х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		4	<u> </u>
	(1) On the foundation $\Rightarrow$ 0. (2) On foundation managers $\Rightarrow$ 0.			,
€	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers		į	
_	<u></u>		K.	
Z	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	2		X
	,	i i		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	- 4	l .	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3		X
	of the foundation have differenced business gross income of \$1,000 or more during the year?	4 a	NT	X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	IN.	/A
,	If 'Yes,' attach the statement required by General Instruction T	3	> 4	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		10 mg/m 12 mg/	
•	By language in the governing instrument, or	4		
			***	
	<ul> <li>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?</li> </ul>	2.147	1 march	MI
7		7	X	<del> </del>
	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  Enter the states to which the foundation reports or with which it is registered (see instructions).	<u> </u>	A Carrie de s	1
0 6	<del></del>			
	N/A  If the converse lives to less 7 has the foundation furnished a convert form 000 PF to the Attenue Convert	* 1	3	
Ŀ	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	8 b	X	المتلاطب
^		1.5		}
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV.	9	MAGAN.	X

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10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses .See Statement 9

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Fa	rt vil-A   Statements Regarding Activities (Continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)		11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person ha advisory privileges? If 'Yes,' attach statement (see instructions)	d	12	ļ	х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applications and exemption applications are considered as a second control of the foundation comply with the public inspection requirements for its annual returns and exemption applications.	ication?	13	Х	
	Website address N/A				<u>-</u>
14	The books are in care of Sabrielle Kostiuk  Located at 1607 Ashford Drive Marietta GA  Telephone no ZIP + 4 3		3/6	<u>-640</u>	7
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here	0068	Ŋ/Ā		П.
	and enter the amount of tax-exempt interest received or accrued during the year	► 15			N/A
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	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country		_		
Pa	rt 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).			l	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	s X No	}		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			,	
		s X No			
		es X No	1 2	45	
	(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)?	es X No	,	· · ·	3. ' &.
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the			`. [	200
	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.)	s X No		"	· * }
I	b If any answer is 'Yes' to 1a(1)–(6), did <b>any</b> 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)?	ы	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	► 🗍	<b>**</b>	<u> </u>	1,1
•	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	- 2	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?  If 'Yes' list the years ▶ 20 20 20 20	es X No			
	If 'Yes,' list the years ► 20, 20, 20		1. 14 1. 14		
1	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) all years listed, answer 'No' and attach statement — see instructions.)	to	2 b	N	/ A
(	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here		7.3	127	
	► 20 , 20 , 20 , 20			7	<b>.</b>
3	a Did the foundation hold more than a 2% direct or indirect interest in any business	es X No	, ,		
1	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		х
I	<b>b</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		X
RΔ		Fo	rm 99	O.DE	2016

Form 990-PF (2016) Kostiuk Family For Part VII-B Statements Regarding Activiti	indation Inc.	4720 May Ba Barr	81-279	98465 Page <b>6</b>			
		14/20 May Be Req	uirea (continuea)	<del></del>			
<ul><li>5 a During the year did the foundation pay or incu</li><li>(1) Carry on propaganda, or otherwise attempt</li></ul>	•	n (coction 404E(c))2	□ <b>v</b> ☑	N-			
· · · · · · ·	_	•	∐ Yes X	No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes X No.							
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)  Yes X No.							
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes X No							
b If any answer is 'Yes' to 5a(1)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?							
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ □	5b N/A			
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).		'1			
6 a Did the foundation, during the year, receive air on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premium	s Yes X	No .			
<b>b</b> Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene		6 b X			
If 'Yes' to 6b, file Form 8870							
7a At any time during the tax year, was the found				No S			
<b>b</b> If 'Yes,' did the foundation receive any procee			<u>-</u>	1/A 7b			
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	Employees,			
1 List all officers, directors, trustees, foundation	on managers and their	compensation (see ins	tructions).	<del></del>			
(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 account, other allowances			
Gene Kostiuk	President	0.	0.	0.			
1670 Ashforde Drive	0						
Marietta, GA 30068							
Jeanne M. Kostiuk  1670 Ashforde Drive	Secretary 0	0.	0.	0.			
Marietta, GA 30068							
Marie Gabrielle Kostiuk 1670 Ashforde Drive	Vice Preside 0	0.	0.	0.			
Marietta, GA 30068		<u> </u>	<u> </u>	<u> </u>			
Christopher Charles Kostiuk  1670 Ashforde Drive	Director 0	0.	0.	0.			
Marietta, GA 30068  2 Compensation of five highest-paid employees (of	har than those included	on line 1		<del> </del>			
2 Compensation of five highest-paid employees (or		on line 1 — see instructio	(d)Contributions to	<del></del>			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances			
None			<del></del>				
		<del></del>		<del> </del>			
				<del> </del>			
				}			
			L				
Total number of other omniques and que #E0 000	<u> </u>	<u> </u>	<u> </u>	ļ			
Total number of other employees paid over \$50,000	TEEA0306L 1	2/16/16		Form <b>990-PF</b> (2016)			
<del></del>	00000			(2010)			

Form		1-2798	
	t.VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Fand Contractors (continued)		ipioyees,
<u>· 3</u>	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NON		<del></del>
	(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
Noi	ne	]	
Tota	number of others receiving over \$50,000 for professional services	<u> </u>	0
Pai	t IX-A Summary of Direct Charitable Activities		
List the 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			
4		. <b></b> _	
		. – – –]	
Pai	t IX-B   Summary of Program-Related Investments (see instructions)		
Desc	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1			
	N/A	· <b></b> -	
2		. – –	

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

N/A

All other program-related investments See instructions

Total. Add lines 1 through 3

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Adjusted qualifying distributions. Subtract line 5 from line 4

Page 8

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities. 1 a 997,155. **b** Average of monthly cash balances 1 b 16,677. c Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c) 1 d 1,013,832. e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 0 Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 1,013,832 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 15,207 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 998,625 Minimum investment return. Enter 5% of line 5 6 49,931 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6 49,931. 2 a Tax on investment income for 2016 from Part VI, line 5 2 a 8,928 b Income tax for 2016. (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b 20 8,928. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 41,003 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 41,003 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 7 41,003 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes. a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 261 a **b** Program-related investments — total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) Š 3 a **b** Cash distribution test (attach the required schedule) 3 b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 0. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) 5

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

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Form 990-PF (2016)

0.

6

# Part XIII Undistributed Income (see instructions)

٠			Cc	(a) orpu:	S		Years p	(b) rior to	2015		<b>(c)</b> 2015	<u></u>	(d) 2016
1	The second dividual for 2010 Rolling at Mi.					+				<del>                                     </del>			
2	Undistributed income, if any, as of the end of 2016:	<u> </u>				$\perp$				↓			41,003
_	a Enter amount for 2015 only									1			
	<b>b</b> Total for prior years: 20 , 20 , 20	-						·		<u> </u>		0	•
3	<del></del>	-				+	· <u> </u>		0	·			
	a From 2011												
	<b>b</b> From 2012	-								ŀ			
	<b>c</b> From 2013	┪											
	<b>d</b> From 2014	-											
	e From 2015	-											
	f Total of lines 3a through e	-			^								
4	Qualifying distributions for 2016 from Part	-			0	╬				ļ			
	XII, line 4 ► \$					l				1			
	a Applied to 2015, but not more than line 2a	İ								-		_	
	<b>b</b> Applied to undistributed income of prior years	<del>                                     </del>				+	-	<del></del> -	<del></del>	<del> </del> -		0.	
	(Election required — see instructions)	`							0.		,		
	c Treated as distributions out of corpus (Election required — see instructions)				0.								
	<b>d</b> Applied to 2016 distributable amount					1				<u> </u>	*		0
	e Remaining amount distributed out of corpus				0.	1				7			<u> </u>
5	Excess distributions carryover applied to 2016		-		0.								0
	(If an amount appears in column (d), the same amount must be shown in column (a) )								· ·	# f.	٠,	₹2	, ** ; ;
	(a)		*					4		2	^3	<b>*</b>	
6	Enter the net total of each column as				;			٤,	, Š		ą.	ė.	*
	indicated below:	3		<		1			35		Wa.		
1	a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				o.		;	· %			46.	Ĭ.,	
J	Prior years' undistributed income. Subtract line 4b from line 2b		**	,	< 4 2 %				0.			<b>,</b>	
•	Enter the amount of prior years' undistributed	3	·	Ş	7, ,	1			<u> </u>	C. W	200 P	* * .	
	income for which a notice of deficiency has been issued, or on which the section 4942(a)	*		>>							1	<b>A</b> \$	
	tax has been previously assessed	, Š	ર્ ત 4			j			0.		ĺ	· 128 39	
•	Subtract line 6c from line 6b. Taxable	1		, ,	· ·			-	<u> </u>		3 2	<u> </u>	
	amount - see instructions		ű ű	Š.	Y				0.				
•	Undistributed income for 2015. Subtract line 4a from		5 5	,	. }	4	1 1	×		* *	38 3 3		
	line 2a. Taxable amount — see instructions	*		į.		×.	<u> </u>	, \$				0.	
f	Undistributed income for 2016. Subtract lines		,	;	1. 1	) d Q2)			3L 3	<b>3</b>	3.54		
	4d and 5 from line 1. This amount must be distributed in 2017			,		7,	4 7	***		+			
7	Amounts treated as distributions out of	^ 3			<u> </u>	3, 3, 8,	*	<u> </u>			. 34		41,003
•	COIDUS to satisfy requirements imposed by							30 3					
	section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				_								
_	· · · · · · · · · · · · · · · · · · ·				0.	4. ·	<u> </u>	<u> </u>	<b>1</b> 132	- 4	# 4 E		1.44
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					4	,* ,	. //		9.	1434 ~	4 7 2	
10	Analysis of line 9				0.	\$ ¥,	<u> </u>	1					
	Excess from 2012	, 4	*	*						- 1			
	Excess from 2012	` , ,				1 3 m	3. S					V . V	
	Excess from 2014	,	3	*		- % - 3							
	Excess from 2014	* * * * * * * * * * * * * * * * * * *	*	4						4			40
	Excess from 2016	١.					, '	,;; ·					
BAA	EXC033 IIOIII 2010		<b>\</b> '	4	\$ J		- €	- 6	` ` `	: <u>\</u>	<u> </u>	¥ ***	
_~~													Form <b>990-PF</b> (2016

Form 990-PF (2016) Kostiuk Family Foundation Inc. 81-2798465 Pag  Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A							
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)  N/A  1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling							
is effective for 2016, enter the date of the	ruling			· _	4040()(5)		
<ul><li>b Check box to indicate whether the foundat</li><li>2a Enter the lesser of the adjusted net</li></ul>		rating foundation d		4942(j)(3) or	4942(j)(5)		
income from Part I or the minimum	Tax year (a) 2016	<b>(b)</b> 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total		
investment return from Part X for each year listed	(4) 2010	(5) 2010	(6) 2511	(4) 2010			
<b>b</b> 85% of line 2a					-		
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>							
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				
(1) Value of all assets			ļ				
(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 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)							
<ul><li>(3) Largest amount of support from an exempt organization</li></ul>							
(4) Gross investment income							
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in		
assets at any time during th  1 Information Regarding Foundation Management		Structions.)					
a List any managers of the foundation who have close of any tax year (but only if they have Gene Kostiuk	contributed more the	nan 2% of the total co than \$5,000) (See	ontributions received section 507(d)(2))	by the foundation bef	ore the		
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the	10% or more of the foundation has a 1	stock of a corporation	on (or an equally large	portion of the owner	rship of		
None							
2 Information Regarding Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:					
Check here ► X if the foundation only ma requests for funds. If the foundation makes gi complete items 2a, b, c, and d.							
a The name, address, and telephone number of	e-mail address of the	ne person to whom a	pplications should be	addressed <sup>-</sup>			
	<del></del>	<del></del>					
<b>b</b> The form in which applications should be s	submitted and infor	mation and materia	ils they should inclu	de:			
c Any submission deadlines							
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ble fields, kinds of	nstitutions, or other	factors:		
ВАА	TE	FA03101 12/16/16		<del></del>	orm <b>990-PF</b> (2016)		

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 or substantial contributor	Foundation status of	Purpose of grant or contribution	N/A Amount			
Name and address (home or business)	or substantial contributor	recipient	Contribution				
a Paid during the year	or substantial contributor	recipient					
Total			► 3a				
b Approved for future payment  Total			. ► 31				

Enter gross amounts unless otherwise indicated		Unrelate	ed business income	Excluded	by section 512, 513, or 514	(0)
. 1	Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (See instructions)
а	1					
ь	)					
c						
d	1			<del>†</del>		
e	· · · · · · · · · · · · · · · · · · ·			<del> </del>		
f				<del> </del>		
	Fees and contracts from government agence	<u> </u>		<del> </del>		
_	Membership dues and assessments			1		
2	-			-	500	
3	Interest on savings and temporary cash investments			14	580.	. <u>.                                   </u>
4	Dividends and interest from securities			14	10,877.	
5	Net rental income or (loss) from real estate			ļ		
	Debt-financed property		-,,			<del></del> -
Ī	Not debt-financed property			<u> </u>		
6	Net rental income or (loss) from personal property					
7	Other investment income			<u> </u>		
8	Gain or (loss) from sales of assets other than inventory					445,027.
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory	<i>'</i>		j		
11	Other revenue					
a	1			Ī		<u> </u>
Ŀ	)					
c	<u> </u>			1		
c	d			1		
e	2					
12		1.1		1	11,457.	445,027.
	<b>Total.</b> Add line 12, columns (b), (d), and (e			<del>'</del>	13	456,484.
	Totali rida iiro 12, coldiiiio (b), (d), diid (o	,			, ,	
		lculations.)				
(See	worksheet in line 13 instructions to verify ca		lishment of Exemp	nt Purn	nses	
(See	e worksheet in line 13 instructions to verify ca	o the Accomp				
(See Par Lin	e worksheet in line 13 instructions to verify ca	o the Accomp				
(See Par Lin	worksheet in line 13 instructions to verify ca  **EXVI-B   Relationship of Activities to the No.    Explain below how each activity for waccomplishment of the foundation's explain to the soundation.	o the Accomp				
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(See Par Lin	worksheet in line 13 instructions to verify ca  **EXVI-B   Relationship of Activities to the No.    Explain below how each activity for waccomplishment of the foundation's explain to the soundation.	o the Accomp				
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# Form 990-PF (2016) Kostiuk Family Foundation Inc. Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 81-2798465

	مطلك							-	Yes	No
d	escribe	organization direc ed in section 501(d to political organi	<li>c) of the Code (other</li>	ge in any of the following v than section 501(c)(3) org.	vith any ot anizations	her organizatio ) or in section !	on 527,	-		
		-		oncharitable exempt organi	zation of			<u> </u>		!
(1	) Cas	h						1a(1	) .	X
(2	2) Othe	er assets						1 a (2	<del>`</del>	X
<b>b</b> O	ther tra	ansactions							1	
(1) Sales of assets to a noncharitable exempt organization									)	X
(2) Purchases of assets from a noncharitable exempt organization									)	X
(3) Rental of facilities, equipment, or other assets									)	X
(4	) Reir	nbursement arran	ngements					1 b (4	)	X
(5	) Loai	ns or Ioan guaran	tees					1 b (5	)	X
(6	) Perf	formance of service	ces or membership o	r fundraising solicitations				1 b (6	)	X
<b>c</b> S	harıng	of facilities, equip	pment, mailing lists,	other assets, or paid emplo	yees.			1 c		X
<b>d</b> If	the an	swer to any of the s. other assets, or	e above is 'Yes,' con services given by the	nplete the following schedul reporting foundation of the fo	e Column	n <b>(b)</b> should alv	vays show the	e fair market v	alue of	
aı	ny tran	saction or sharing	g arrangement, show	in column (d) the value of	the goods	, other assets,	or services r	eceived.		
(a) Line	no.	(b) Amount involved	(c) Name of no	ncharitable exempt organization	(d)	Description of tran	nsfers, transactio	ns, and sharing ar	rangemen	ts
N/A	[_									
				· · · · · · · · · · · · · · · · · · ·	<u> </u>					
							<del></del>			
	-									
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				<del></del>	<del>                                     </del>			<del> </del>		
		<del></del>			<del>-</del>					
de	escribe 'Yes,'	undation directly or d in section 501(c complete the follo Name of organiz	c) of the Code (other owing schedule.	th, or related to, one or more than section 501(c)(3)) or	ın section	527?	Description	Y	es X	No
N/A	(4)	Traine of organiz	ation	(b) Type of organization	<u>''</u>		.) Description	or relationship	<del>'</del>	
14/17		<del></del>	<del></del>	<del></del> _						
			<del></del>	<del></del>						
_	Under p	enalties of perjury, I de	clare that I have examined	this return, including accompanying	schedules an	d statements, and to	o the best of my l	knowledge and belie	ef, it is tru	e,
Sign	correct,	and complete. Declara	tion of preparer (other than	taxpayer) is based on all information	n of which pre	eparer has any know	viedge			
Here		C. M		15/1/2	17 DI	1.0	, , ,	this re	e IRS disc	he
11010	<u> </u>			2/1 B.C	7	lice Vres	ident	(see up	er shown Istructions	
	Signa	ture of officer or trustee		Date	Tr	tle			X Yes	No
		Print/Type preparer's		Preparer's signature		Date	Check	If PTIN		
Paid		Thomas W.	Tripp	Thom W. Tap	·	4/19/17	self-employ	red P0004	<u> 17265</u>	
Prepa		Firm's name		n & Company, LLC			Firm's EIN	<u>58-255033</u>	6	
Use O	nly	Firm's address		Ferry Rd. #200			]			
		<u> </u>	Marietta, GA	30068			Phone no	(770) 565	-2422	2
BAA								Form S	90-PF	(2016)

## 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.

OMB No 1545-0047

Name of the organization		Employer identification number
Kostiuk Family Foundation Inc	•	81-2798465
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priv	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the <b>General</b>	Rule or a Special Rule.	
<b>Note.</b> Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and a	Special Rule. See instructions
General Rule		
X For an organization filing Form 990, 990-EZ property) from any one contributor Comple	7, or 990-PF that received, during the year, contributions tot te Parts I and II See instructions for determining a contribu-	aling \$5,000 or more (in money or utor's total contributions
Special Rules		
	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, ne year, total contributions of the greater of (1) \$5,000 or (2 0-EZ, line 1. Complete Parts I and II	16a, or 16b, and that
during the year, total contributions of more	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 exclusively for religious, charitable, scientific, to children or animals. Complete Parts I, II, and III.	from any one contributor, iterary, or educational
during the year, contributions exclusively fo \$1,000 If this box is checked, enter here the charitable, etc., purpose. Don't complete an	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received in religious, charitable, etc., purposes, but no such contribution total contributions that were received during the year for any of the parts unless the <b>General Rule</b> applies to this organicle, etc., contributions totaling \$5,000 or more during the year.	ions totaled more than an <i>exclusively</i> religious, nization because
Caution. An organization that isn't covered by t 990-PF), but it must answer 'No' on Part IV, lin Part I, line 2, to certify that it doesn't meet the	the General Rule and/or the Special Rules doesn't file Sche le 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 99	dule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF, 10-PF)
PAA For Pananyork Paduction Act Notice see the Instru	ections for Form 990, 990-E7, or 990-DE Schedule B	(Form 990, 990-F7, or 990-PF) (2016)

**					
Schedule	B (Form 990, 990-EZ, or 990-PF) (2016)	Page	1 of 1 of Part I		
	anzauon 1k <u>Family</u> Foundation Inc.	Employer Identification number 81-2798465			
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space				
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	Gene Kostiuk	_	Person		
	1607 Asheforde Drive Marietta, GA 30068	\$1,010,373.	Noncash X (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 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.)

Page

1 to

of Part II

Name of organization

Kostiuk Family Foundation Inc.

Employer identification number

81-2798465

(a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received 9,100 sh of UPS common stock 7/15/16 1,010,373. (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) Part I (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (d) Date received (see instructions) Part I (a) No. from Part I (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I Schedule B (Form 990, 990-EZ, or 990-PF) (2016) BAA

Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

, Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2016)		Page	1 to 1 of Part III
Name of organ	nization k Family Foundation Inc.		<u> </u>	Employer identification number 81-2798465
Part III	exclusively religious, charitable, etc or (10) that total more than \$1,000 for the the following line entry. For organizations con contributions of \$1,000 or less for the year (E	e year from any one contribut npleting Part III, enter the total of Inter this information once. See	tor. Complete columns (a) of exclusively religious.	in section 501(c)(7), (8), ) through (e) and
(a) No. from Part I	Use duplicate copies of Part III if additional sp  (b)  Purpose of gift	cace is needed. (c) Use of gift		(d) ription of how gift is held
raiti	N/A	·		
		(e)		
	Transferee's name, address,	Transfer of gift	Relationship of	transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Desc	(d) cription of how gift is held
	Transferee's name, address,	(e) Transfer of gift and ZIP + 4	Relationship of	transferor to transferee
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	Desc	(d) cription of how gift is held
<b></b>		·		
	Transferee's name, address,	Relationship of	transferor to transferee	
		·		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Desc	(d) cription of how gift is held
		(e) Transfer of gift		

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

016	Federal Statements	Page <sup>2</sup>
	Kostiuk Family Foundation Inc.	81-279846
Statement 1 Form 990-PF, Part I, Line 16a Legal Fees		
Legal fees	(a)       (b) Net       (c)         Expenses       Investment       Adjusted         Per Books       Income       Net Income         \$ 6,250.       \$ 6,250.       \$ 6,250.         Total       \$ 6,250.       \$ 6,250.       \$ 6,250.	_
Statement 2 Form 990-PF, Part I, Line 16c Other Professional Fees		
Investment advisory fees	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income         \$ 3,782.       \$ 3,782.       \$ 3,782.         Total       \$ 3,782.       \$ 3,782.       \$ 3,782.	<del>-</del>
Statement 3 Form 990-PF, Part I, Line 18 Taxes		
Foreign taxes paid	(a)       (b) Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income         \$ 28.       \$ 28.       \$ 28.         Total       \$ 28.       \$ 28.       \$ 28.	
Statement 4 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks		
Corporate Stocks	Valuation Book <u>Method</u> Value	Fair Market Value
Morgan Stanley 088632	Mkt Val \$ 573,200. \$ Mkt Val 315,129.	573,200. 315,129.

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## **Federal Statements**

Page 2

**Kostiuk Family Foundation Inc.** 

81-2798465

Statement 5	
Form 990-PF, Part II, Line 10c	
<b>Investments - Corporate Bonds</b>	÷

Corporate Bonds	Valuation	Book	Fair Market
	<u>Method</u>	Value	Value
Morgan Stanley 089581	Mkt Val 5	\$ <u>132,793.</u> \$ <u>132,793.</u>	

# Statement 6 Form 990-PF, Part II, Line 13 Investments - Other

	Valuation <u>Method</u>				Fair Market Value	
Other Securities						
Morgan Stanley 089581	Mkt	Val	\$	6,387.	\$	6,387.
		Total	\$	6,387.	\$	6,387.

#### Statement 7 Form 990-PF, Part III, Line 3 Other Increases

Return of princ	cipal			
Net Unrealized	Gains or	Losses	on	Investments

	\$ 430.
	34,160.
Total	\$ 34,590.

#### Statement 8 Form 990-PF, Part III, Line 5 Other Decreases

Cost basis difference on sale of appreciated stock

	\$ 450,205.
Total	\$ 450,205.

# Statement 9 Form 990-PF, Part VII-A, Line 10 **Substantial Contributors During the Tax Year**

Name of Substantial Contributor Address of Substantial Contributor

Gene Kostiuk

1607 Asheford Drive Marietta, GA 30068