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, Form 990-PF

Return of Private Foundation
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.

OMB No 1545-0052

De	nartm	ent of the Treasury	Do not enter so	cial security numbers o	n this form as	ıt may be m	ade public.	<u> </u>
		Revenue Service	► Information about Form	n 990-PF and its separa	te instructions	is at www.i	rs gov/form990pf.	Open to Public Inspection
_			or tax year beginning	0.6	5/14 ,2016	, and endi		12/31, 20 16
٠		of foundation					ţ	nufication number
_		BER FAMILY F				r	81-3055	
4	umbe	er and street (or P O	box number if mail is not delivered	to street address)		Room/suite	B Telephone nu	umber (see instructions)
						[}	
_			CE 501 SILVERSIDE			L	(800)	839-1754
C	ity or	town, state or province	ce, country, and ZIP or foreign pos	ital code			C 4	
		47310F2	10000 1000				C if exemption ap pending, check	here
_		MINGTON, DE						
G	Che	ck all that apply	X Initial return	Initial return	•	oublic char	- L. Creight Gige	nrizations, check here
			Final return	Amended re				anizations meeting the eck here and attach
	Chr	ale tuma of ====	Address change	Name chang				
'n	_	-	zation X Section 501(· · ·			E if private found	dation status was terminated
Ļ			nonexempt charitable trust	Other taxable pr				507(b)(1)(A), check here .
1			of all assets at JAcco		asn Acc	crual	1	on is in a 60-month termination
		of year (from Pai		ther (specify) column (d) must be on cas			under section 5	507(b)(1)(B), check here . >
			venue and Expenses (The		on Dasis)			(d) Disbursements
	ar t I	total of amounts in	n columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inve		(c) Adjusted net	for charitable
		may not necessar column (a) (see in	rily equal the amounts in	books	incon	ne	ıncome	purposes (cash basis only)
٦	1		structions)) its, etc., received (attach schedule)	510,100.	 			(Cash Dasis Only)
- {	2	Chack I If th	e foundation is not required to					
3	- - 3	atta	ch Sch B	5.		5.		
2012	7 4	_	erest from securities		 			
			· · · · · · · · · · · · · · · · · · ·	·	 			
F.		Net rental income or						
			im sale of assets not on line 10		 			
2		Gross sales price for assets on line 6a		h				
-Revenue	. 7		come (from Part IV, line 2)			0.	· · · · · · · · · · · · · · · · · · ·	
چ	``		oital gain					
-	⊵9	Income modification	ons					
2	10 a	Gross sales less return and allowances	ns					
ć			old .					
-	e ea.	•	s) (attach schedule)			I		
	11	Other income (atta	ach schedule)					
_	12	Total. Add lines 1	through 11	510,105.	1		4 *D	
(6	13	Compensation of offi	icers, directors, trustees, etc	0.	1 1	こじた	VE	
Sec	14 15 16a b	Other employee sa	alaries and wages		1			
en	15		ployee benefits		ISI M	AY I S	20145	
X	16a		schedule)			AT 18	2017	
ē	ь		attach schedule)	ļ	1		<u> </u>	
ξį	17 18 19 20 21		I fees (attach schedule)	ļ	**************************************	ששניי	119	
itra	17			 			<u>e to é</u>	
nis	18	•	edule) (see instructions)		 			
Ξ	19	•	ch schedule) and depletion.	 	 			
Ą	20			ļ	 			
5	21		es, and meetings	 	 			
e e	22		cations	6,388.	 			6,388
ij	23 24 25		ettach schedule) ATCH .1 .	0,388.	 			0,388
ra	44		nd administrative expenses.	6,388.	1	1		6,388
Ž	25		ugh 23	ļ	 			
J	26		bursements Add lines 24 and 25	6,388.	 			6,388
-	27	Subtract line 26 fr		1	 			
	ľ		expenses and disbursements	503,717.	}			
	l .		ncome (if negative, enter -0-)		 	5.		
	1		ome (if negative, enter -0-).					

JSA For Paperwork Reduction Act Notice, see instructions. 6E1410 1 000

Form **990-PF** (2016)

Б	art (l	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		End of	f year
		amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
- }	1	Cash - non-interest-bearing				
1	2	Savings and temporary cash investments		503,7	17.	503,717.
- }	3	Accounts receivable ▶				
1		Less allowance for doubtful accounts ▶				
- [4	Pledges receivable ▶				
- {		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other			1	
- {		disqualified persons (attach schedule) (see instructions)		<u> </u>		
- {	7	Other notes and loans receivable (attach schedule)				
- {		Less allowance for doubtful accounts ▶				
ssets	8	Inventories for sale or use				
Se	9	Prepaid expenses and deferred charges				
څ	10a	Investments - U S and state government obligations (attach schedule).	Ī			
	b	Investments - corporate stock (attach schedule)				
		Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation				
1	12	(attach schedule) Investments - mortgage loans				
-	13	Investments - other (attach schedule)			-1	
-	14	Land, buildings, and equipment basis				
		Less accumulated depreciation				
-	15	(attach schedule) Other assets (describe				
-	16	Total assets (to be completed by all filers - see the		 		
-		instructions Also, see page 1, item I)		503,7	17.	503,717
7	17	Accounts payable and accrued expenses	I ————————	 		
	18	Grants payable	1			
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons.	ľ			
اح:	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
Ì						
	23	Total liabilities (add lines 17 through 22)	0.		0.	
7		Foundations that follow SFAS 117, check here	 	 		
ances		and complete lines 24 through 26 and lines 30 and 31.	1			
ā	24	Unrestricted	<u> </u>	 		
	25	Temporarily restricted		 		
Net Assets or Fund B	26	Permanently restricted		 		
2				}		
5		check here and complete lines 27 through 31.				
23	27	Capital stock, trust principal, or current funds		 		
Se	28	Paid-in or capital surplus, or land, bldg , and equipment fund		503,7	717	
As	29	Retained earnings, accumulated income, endowment, or other funds				
et	30 31	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see		303,7		
Z	31	·	Í	503,7	717	
6	art l	Instructions)		303,7	17.	<u> </u>
		al net assets or fund balances at beginning of year - Part		(must sares with		
'					4	C
2	Ent	l-of-year figure reported on prior year's return)er amount from Part I, line 27a	• • • • • • • • • • • • • • • • • • • •		2	503,717
2	ااات	er amount HUIII Fait I, IIIIC 2/d, ,				303,717
	OII	ner increases not included in line 2 (itemize)			3	503,717
		d lines 1, 2, and 3			<u>4</u> 5	303,717
		al net assets or fund balances at end of year (line 4 minu	s line 5) - Dort II - column	(b) line 30	6	503,717
_0	101	arrier assets of fund pararices at end of year time 4 minu	s mie 5) - Part II, column	(u), lifte 3U	0	1 303,717

	s and Losses for Tax on Inv		(b) How		
	id describe the kind(s) of property sold prick warehouse, or common stock, 200		acquired P - Purchase	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
i -	STICK WATERIOUSE, OF COMMINION SLOCK, 200	3 SIIS WILC CO)	D - Donation	(, day, j.)	(, aaj, j. ,
<u>a</u>	 			 	
b			 	 	
<u> </u>			 	 	
<u>d</u>			 	ļ	
<u>e</u>			 	·	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	{	(h) Gain or (lo (e) plus (f) minu	
	(or anowable)	plus experies of sale	 	(c) plus (r) mine	
<u>a</u>	 		 		
<u>b</u>			 		
<u>C</u>			 		
<u>d</u>	 	 	 		
Complete only for accets	showing goin in column (h) and owns	and by the foundation on 12/21/60	 		
Complete only for assets	showing gain in column (h) and owne	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		Gains (Col (h) ga	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (i), if any	COI	(k), but not less tLosses (from co	
	as 01 12/01/09	Over cor (j), ir arry	 		- (-7)
<u>a</u>	 	 	 		
<u>b</u>	 	 	 		
<u>c</u>	 		 		
<u>d</u>			 		
<u>e</u>	L		┼		
Capital gain net income	or (net canital loss)	gain, also enter in Part I, line 7			
	((1)	(loss), enter -0- in Part I, line 7	2		
	gain or (loss) as defined in section		1		
=		structions) If (loss), enter -0- in	-		
			13		
art V Qualification	Under Section 4940(e) for Re	educed Tax on Net Investment	income		
	the section 4942 tax on the district not qualify under section 4940(e)	ibutable amount of any year in the b	oase perio	ids [Yes
					
Enter the appropriate a		ear, see the instructions before make	ing any e	ntries (d)	
Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2015			 	(cor (b) divided by	(0))
2013		+	+		
			+		
2013	<u> </u>		+		
2012			 		
2011	L		+		
-	•	vide the total on line 2 by 5, or by the			
number of years the fo	undation has been in existence if	less than 5 years	3		
			1.1		
Enter the net value of r	noncharitable-use assets for 2016	from Part X, line 5	4	 	
			1		
Multiply line 4 by line 3	3 .		5		
			1 1		
Enter 1% of net investi	ment income (1% of Part I, line 27t	o)	6		
			} }		
7 Add lines 5 and 6			7		
B Enter qualifying distribi	utions from Part XII, line 4		8		
If line 8 is equal to or		ox in Part VI, line 1b, and complet		rt using a 1% t	ax rate Sec
Part VI instructions		·	•	-	

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

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

Form 990-PF (2016)

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7

8b

DE,

Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ N/A			
14	The books are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839	-175	4	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-1			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	l		
	the foreign country ▶	<u></u>		
Pai	t 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.	<u> </u>	Yes	No
1a	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	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	}		
	disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	Ì		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	}	1	1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1		1
	the benefit or use of a disqualified person)?	1		1
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the	ì		1
	foundation agreed to make a grant to or to employ the official for a period after		1	
	termination of government service, if terminating within 90 days)	1		1
b	If any answer is "Yes" to 1a(1)-(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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		 	
_	were not corrected before the first day of the tax year beginning in 2016?	1c	 	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1	ŀ	\
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	1	1	1
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?		}	} }
	, , , , , , , , , , , , , , , , , , , ,	1		
	If "Yes," list the years Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		1	
Ų		ł	ļ	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	2b	 	
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1	 	\vdash
·		l		1
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		, [
- Ju	at any time during the year?	ļ	ļ	1 1
h	of "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or	1		
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	Į	l	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2016)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		Х

Form 990-PF (2016)

NONE

Form 990-PF (2016)

Form 990-PF (20		Page
	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	
3 Five hi	ghest-paid independent contractors for professional services (see instructions). If none, enter "I	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	
	fation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the numbe and other beneficianes served, conferences convened, research papers produced, etc.	er of Expenses
1 N/A		
I N/A		-
]
2		_
3		
4		
		-
Part IX-B	Summary of Program-Related Investments (see instructions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
		_
		
2		
		
All other prod	gram-related investments. See instructions	
3 NONE		
Total Add lu	nes 1 through 3	

Page 8

Pari	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn foundati	ons,
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	1a	
	Average of monthly cash balances	1b	180,505.
	Fair market value of all other assets (see instructions),	1c	
d	Total (add lines 1a, b, and c)	1d	180,505.
е	Reduction claimed for blockage or other factors reported on lines 1a and	!	
	1c (attach detailed explanation)	.	
2	Acquisition indebtedness applicable to line 1 assets ,	2	
3	Subtract line 2 from line 1d	3	180,505.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	1 1	
	instructions)		2,708.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	177,797.
6	Minimum investment return. Enter 5% of line 5		4,882.
Pari	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ ☐ and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1	4,882.
2 a	Tax on investment income for 2016 from Part VI, line 5 2a		
b	Income tax for 2016 (This does not include the tax from Part VI). 2b]	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,882.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		4,882.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	4,882.
Par	Qualifying Distributions (see instructions)	· · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	[
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		6,388.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	1	
а	, , , , , , , , , , , , , , , , , , , ,	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		6,388.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6,388.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	alculating w	hether the foundation

Pa	rt XIII Undistributed Income (see instri	uctions)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
•	line 7		-	 	4,882.
2	Undistributed income, if any, as of the end of 2016			 	1,002.
	Enter amount for 2015 only				
	Total for prior years 20 14 ,20 13 ,20 12				
	Excess distributions carryover, if any, to 2016				
	From 2011		ł		
	From 2012				
	From 2013	1	•		
	From 2014		Ì		
	From 2015	ľ			
	Total of lines 3a through e	ļ			
	Qualifying distributions for 2016 from Part XII,			 	
	line 4 ▶ \$6,388.		}		
a	Applied to 2015, but not more than line 2a	į	1		
	· · · · · · · · · · · · · · · · · · ·				
D	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2016 distributable amount			· · · · · · · · · · · · · · · · · · ·	4,882.
	Remaining amount distributed out of corpus	1,506.			
	Excess distributions carryover applied to 2016 .				
	(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 indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,506.			
	·				
D	Prior years' undistributed income Subtract line 4b from line 2b		ţ		1
С	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		l		
ď	Subtract line 6c from line 6b Taxable				Ţ
-	amount - see instructions				
е	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount - see instructions				<u> </u>
	Undistributed income for 2016. Subtract lines				
,	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 applied on line 5 or line 7 (see instructions)				
۵	Excess distributions carryover to 2017.			· · · · · · · · · · · · · · · · · · ·	
3	Subtract lines 7 and 8 from line 6a	1,506.			
10	Analysis of line 9				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
	Excess from 2016 1,506.				<u> </u>
					Form 990-PF (2016)

Pa	<u>ri XIV Private Op</u>	erating Foundations	s (see instructions ai	nd Part VII-A, quest	ion 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private oper		
h	foundation, and the ruling Check box to indicate v	_	•			(1)(3) or 4942(1)(5)
_		Tax year	is a private operating	Prior 3 years	1 Section 4942	(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	I or the minimum investment					
	return from Part X for each year listed				l	
b	85% of line 2a	<u></u>				
C	Qualifying distributions from Part					
	XII, line 4 for each year listed .	ļ			<u> </u>	
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i)	<u> </u>			 	
	enter 2/3 of minimum invest-	ĺ			1	
	ment return shown in Part X, ine 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than	1				
	gross investment income (interest, dividends, rents,		1			
	payments on securities loans (section 512(a)(5)),					
	or royalties)	<u> </u>		<u></u>	ļ	
	(2) Support from general public and 5 or more				}	
	exempt organizations as provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization.		ļ	<u></u>	 	
	(4) Gross investment income.		<u></u>			
Fa		uring the year - see		only if the founda	ation nad \$5,000 (or more in assets at
1	Information Regardin	•				
а	before the close of any	the foundation who I tax year (but only if the	have contributed mor ney have contributed r	e than 2% of the tot nore than \$5,000) (S	al contributions rece See section 507(d)(2)	erved by the foundation)
	NONE	 				
b		the foundation who rship or other entity) o				lly large portion of the
	N/A					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsh	nip, etc., Programs:		
	unsolicited requests f	or funds If the found	lation makes gifts, gra	to preselected cha ants, etc (see instru	ritable organizations ctions) to individuals	and does not accept or organizations under
	The name, address, a	plete items 2a, b, c, an		the nerger to the series	anligations about the	uddraga ad
						addressed
b	The form in which app	lications should be su	bmitted and information	on and materials they	should include	
c	Any submission deadl	ines	- , 			
d	Any restrictions or I factors	imitations on awards	s, such as by geogr	aphical areas, charr	table fields, kinds o	f institutions, or other

Page **11**

Part XV Supplementary Information (c	continued)			
3 Grants and Contributions Paid Durin	g the Year or Appr	oved for F		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTIDUCION	- -
a Paid during the year		1		
		1		
			1	
	L	<u> </u>	<u> </u>	
Total	<u> </u>		<mark></mark>	
b Approved for future payment				
			1	
			1	
	}			
Total				

Page **12**

Part XVI-A	Analysis of Income-Produce	ucing Act	IVITIES			_
	ounts unless otherwise indicated		ated business income		section 512, 513, or 514	(e) Related or exempt
1 Program ser	vice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
а						
b				_		
c						
d						<u> </u>
				 		
g Fees and	contracts from government agencies		···-			
Membership	dues and assessments			14	5	
	avings and temporary cash investments •			1 1 3		
	nd interest from securities					
	ncome or (loss) from real estate					
	anced property					
	ome or (loss) from personal property.	1	-			
	tment income					
) from sales of assets other than inventory					
	or (loss) from special events					
	or (loss) from sales of inventory.					
•	ue a					
						<u>.</u>
				_		
				ļ		
e Subtotal Ad Total. Add li ee worksheet		culations)	accomplishment of	Exempt Pur	poses	
Subtotal Ad Total. Add li ee worksheet art XVI-B	ine 12, columns (b), (d), and (e) t in line 13 instructions to verify calc	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Act Total. Add live worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Ad Total. Add li ee worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Act Total. Add live worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Act Total Add live worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Act Total Add live worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Act Total. Add live worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Act Total. Add live worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Act Total. Add live worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
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Subtotal Act Total Add live worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Add Interest worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
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Subtotal Ad Total. Add li ee worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Ac Total. Add li ee worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
Subtotal Ac Total. Add li ee worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to
e Subtotal Ac Total Add li ee worksheet art XVI-B	ine 12, columns (b), (d), and (e) . t in line 13 instructions to verify calc Relationship of Activitie Explain below how each activit	ulations) s to the A	accomplishment of	Exempt Pur	poses e) of Part XVI-A contri	outed importantly to

	90-PF (2 XVII			AMILY FOUND		ons a	nd Relatio	nships \	81-3055 With None			_{je} 13
		Exempt Organ										
1 [Old the	e organization direct	ly or indirectly	engage in any o	f the following	g with a	ny other or	ganization	described		Yes	No
1	n sect	ion 501(c) of the Co	de (other than	section 501(c)(3	3) organization	s) or in	section 527	, relating	to political			
(organi	zations?										
a `	Transf	ers from the reportin	g foundation to	a noncharitable	exempt organ	nization o	of:					
(1) Ca	sh								1a(1)		Х
(2) Otf	ner assets								18(2)		X
b	Other	transactions [.]										
(1) Sa	les of assets to a no	ncharitable exe	mpt organization.			. <i></i>			16(1)		<u> </u>
(2) Pu	rchases of assets fro	om a noncharita	able exempt orgai	nization					1b(2)		X
(3) Re	ntal of facilities, equi	pment, or other	assets			<i></i>			1b(3)		X
(4) Re	mbursement arrange	ements							1b(4)		Х
(5) Loa	ans or loan guarantee	s							1b(5)		Х
(6) Pe	rformance of service	s or membersh	nip or fundraising	solicitations.					1b(6)		X
C	Sharın	g of facilities, equipm	nent, mailing lis	its, other assets,	or paid employ	ees .				1c		X
d l	f the	answer to any of th	e above is "Ye	s," complete the	e following so	hedule.	Column (b) should a	lways show	the f	air m	arket
		of the goods, other a										
\	/alue i	n any transaction or	sharing arrang	gement, show in	column (d) ti	he value	of the goo	ods, other	assets, or s	ervices	rece	∍ived
(a) Lin	e no	(b) Amount involved	(c) Name of	noncharitable exempt	organization	(d) D	escription of tra	ansfers, transa	ctions, and sha	nng ama	ngeme	nts
		N/A				N/A						
											-	
]						
			}									
2a	s the	foundation directly	or indirectly af	filiated with, or	related to, on	e or me	ore tax-exer	npt organi	zations			
		ped in section 501(c)						_		Ye	s X] No
		," complete the follow										
		(a) Name of organization	n	(b) Type	of organization			(c) Descrip	tion of relation	ship		
		·										
		penalties of perjury, I declar and complete Declaration of						nd to the best	of my knowled	ge and b	elief, it	ıs true
Sign		1	7		/			سب	May the IR	S discus	g thre	return
iere		//w/CK) rd		//7	PPR	45 1D4N	/		reparer		below
101C	1 246	nature of officer or trustee		Date/	, ,	Title			(see instruction	15)? <u>X</u>	Yes	No.

Print/Type preparer's name Preparer's signature Date if PTIN Check Paid 04/26/2017 self-employed P01345770 JEFFREY D HASKELL JEFFREY D HASKELL Preparer Fim's EIN ▶510398347 ▶ FOUNDATION SOURCE Firm's name Use Only Firm's address ▶ ONE HOLLOW LN, STE 212 LAKE SUCCESS, 11042 800-839-1754 Phone no

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

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

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

Name of the organization	DAME OF THE PARTY	Employer identification number
GRABER FAMILY FOUN	DATION	81-3055863
organization type (check o	one)	
ilers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	e foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private for	ındatıon
	501(c)(3) taxable private foundation	
Note: Only a section 501(c nstructions General Rule	e)(7), (8), or (10) organization can check boxes for both the General Rule an	d a Special Rule See
X For an organizat	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, con ey or property) from any one contributor. Complete Parts I and II. See inst al contributions	
Special Rules		
regulations unde 13, 16a, or 16b,	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the r sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form and that received from any one contributor, during the year, total contributor of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	990 or 990-EZ), Part II, line itions of the greater of (1)
contributor, duri	non described in section 501(c)(7), (8), or (10) filing Form 990 or 990-E2 ting the year, total contributions of more than \$1,000 <i>exclusively</i> for religiou ational purposes, or for the prevention of cruelty to children or animals. Coi	s, charitable, scientific,
contributor, durii contributions tota during the year f General Rule ap	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ to the year, contributions exclusively for religious, charitable, etc., purpose alled more than \$1,000. If this box is checked, enter here the total contributor an exclusively religious, charitable, etc., purpose. Don't complete any of plies to this organization because it received nonexclusively religious, charitable, etc., purpose.	es, but no such utions that were received f the parts unless the utable, etc , contributions
Caution: An organization t 990-EZ, or 990-PF), but it i	or more during the year	Schedule B (Form 990, line H of its Form 990-EZ or on i

Employer identification number 81-3055863

Part I	Contributors (See instructions). Use duplicate cop	utors (See instructions). Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	DIGGER SPECIALTIES INC. C/O LOREN GRABER, P.O. BOX 241 BREMEN, IN 46506	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\ \$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
			Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
			Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
			Person Payroll Noncash (Complete Part II for noncash contributions)				

Employer identification number

81-3055863

Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
	\$				
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
	\$				
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
	(b) Description of noncash property given (b) Description of noncash property given	(b) Description of noncash property given (c) FMV (or estimate) (See instructions) (b) Description of noncash property given (c) FMV (or estimate) (See instructions) (d) FMV (or estimate) (See instructions) (e) FMV (or estimate) (See instructions) (f) FMV (or estimate) (See instructions) (g) FMV (or estimate) (See instructions) (h) Description of noncash property given (c) FMV (or estimate) (See instructions) (d) FMV (or estimate) (See instructions) (e) FMV (or estimate) (See instructions)			

ימול הייני במל לתוח בי הלמשים בתחומה להייני להייני הייני להייני הלימו בי המלכות הייני לימול הייני הייני הייני ה

Name of organization GRABER FAMILY FOUNDATION

Employer identification number

81-3055863 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

	(10) that total more than \$1,000 for the the following line entry. For organizations contributions of \$1,000 or less for the year.	s completing Part III, enter ear (Enter this information	the total of ϵ	exclusively religious, charitable, etc	
	Use duplicate copies of Part III if additional	al space is needed			
(a) No from Part I	(b) Purpose of gift	(c) Use of gıft		(d) Description of how gift is held	
	Transferee's name, address, and Z	(e) Transfer of gift	Relationsh	ıp 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			
	(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		(d) Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, and Z	IP + 4	Relationsh	ip 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 Z	IP + 4	Relationsh	ip of transferor to transferee	

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2016 FORM 990-PF

81-3055863

ATTACHMENT

- OTHER EXPENSES

PART I

FORM 990PF,

DESCRIPTION

ADMINISTRATIVE FEES
ADMINISTRATIVE SET-UP FEE
DELAWARE INCORPORATION FEES
IRS APPLICATION FEES

PER BOOKS EXPENSES

REVENUE

AND

538. 4,500. 500. 850.

6,388.

TOTALS

..ARITABLE PURPOSES 538. 4,500. 500. 850.

6,388.

GRABER FAMILY FOUNDATION

FORM 990PF,

2016 FORM 990-PF

PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

81-3055863

ATTACHMENT 2

NAME AND ADDRESS

DIGGER SPECIALTIES INC. C/O LOREN GRABER, P.O. BOX 241 BREMEN, IN 46506

.863 -		1		
81-3055863	ATTACHMENT 3	EXPENSE ACCT AND OTHER ALLOWANCES	Ö	0
	ATTACE	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	·	0
		COMPENSATION	·	0
2016 FORM 990-PF	ERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRES / DIR / SEC / TREAS 1.00	GRAND TOTALS
GRABER FAMILY FOUNDATION	FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS	LOREN GRABER FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	