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Form **990-PF**Department of the Treasury

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.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2016
Open to Public Inspection

For calendar year 2016 or tax year beginning DEC 21, 2016 , and ending 2016 DEC 31. Name of foundation A Employer identification number 81-4675261 HARTMANN FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 710 W PARK AVE (217)398-8874 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 61820 CHAMPAIGN, IL G Check all that apply: X i initial return Initial return of a former public charity D 1. Foreign organizations, check here (33 Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H- Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here A Fair market value of all assets at end of year | J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16 under section 507(b)(1)(B), check here 389,000. (Part I, column (d) must be on cash basis.) \$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income 389,000 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total, Add lines 1 through 11 389,000 12 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 0. 0 0 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 0 0 Add lines 24 and 25 27 Subtract line 26 from line 12: 389,000 2 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

| Part II Balance | Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End of | year |
|----------------------------|--|--|----------------|---------------------------------------|
| - \ | column should be for end-of-year amounts only | | (b) Book Value | (c) Fair Market Value |
| 1 Cash - non-inter | est-bearing | | 389,000. | 389,000. |
| 1 | porary cash investments | | | |
| 3 Accounts receiv | - | | | · · · · · · · · · · · · · · · · · · · |
| | for doubtful accounts | ┥ | | |
| 1 | | | | |
| 4 Pledges receival | | - | | |
| ŀ | for doubtful accounts ► | | | |
| 5 Grants receivab | | | | |
| | from officers, directors, trustees, and other | | | |
| disqualified pers | ons | | | |
| 7 Other notes and loans of | eceivable | | | |
| Less: allowance | for doubtful accounts 🕨 | | | |
| 2 8 Inventories for s | ale or use | | | |
| 9 Prepaid expense | es and deferred charges | | | |
| 4 10a Investments - U | S. and state government obligations | | | |
| b Investments - co | | | | |
| c Investments - c | • | | | |
| l l | | - | | · |
| | dings, and equipment basis | - | | |
| Less accumulated dep | | | | - <u></u> |
| 12 Investments - m | | | | |
| 13 Investments - o | her | | | |
| 14 Land, buildings, | and equipment; basis ▶ | _ | | |
| Less accumulated dep. | eciation | | | |
| 15 Other assets (de | scribe |) | | |
| 16 Total assets (to | be completed by all filers - see the | | | |
| instructions. Als | o, see page 1, item I) | 0. | 389,000. | |
| | le and accrued expenses | | | |
| 18 Grants payable | | | | |
| المستران المستران | p | | ·, | |
| 9 | • | | | |
| 20 Loans from officers | , directors, trustees, and other disqualified persons | | ·-· | |
| Mortgages and | other notes payable | | | |
| 22 Other liabilities | describe - | ' | | |
| | | | | |
| | (add lines 17 through 22) | 0. | 0. | |
| i i | at follow SFAS 117, check here | 1 | | |
| | nes 24 through 26 and lines 30 and 31. | | | |
| 24 Unrestricted | | | | |
| 25 Temporarily res | tricted | | | |
| 26 Permanently res | stricted | | | |
| Foundations th | at do not follow SFAS 117, check here 🔻 🔀 | | | |
| and complete l | nes 27 through 31. | | | |
| 27 Capital stock, tr | ust principal, or current funds | 0. | 0. | |
| 28 Paid-in or capita | Il surplus, or land, bldg., and equipment fund | 0. | 0. | |
| (A) | gs, accumulated income, endowment, or other funds | 0. | 389,000. | |
| Total not accet | s or fund balances | 0. | 389,000. | |
| ≱ 30 Total net assets | or igno varances | | 309,000. | |
| | and about March but and | | 200 000 | |
| | and net assets/fund balances | 0. | 389,000. | |
| Part III Analys | is of Changes in Net Assets or Fund | Balances | | |
| | | | | |
| | nd balances at beginning of year - Part II, column (a), lii | ne 30 | | |
| | of-year figure reported on prior year's return) | | 1 | 0. |
| 2 Enter amount from Pa | art I, line 27a | | 2 | 389,000. |
| 3 Other increases not in | cluded in line 2 (itemize) | | 3 | 0. |
| 4 Add lines 1, 2, and 3 | | | 4 | 389,000. |
| | ed in line 2 (itemize) | | 5 | 0. |
| | nd balances at end of year (line 4 minus line 5) - Part II, | column (b), line 30 | 6 | 389,000. |
| | | | | Form 990-PF (2016) |

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| Part IV Capital Gains and Losses for Tax on Investment Income | |
|--|--------------------------------|
| P-PulcildSe (mo day yr.) (i | d) Date sold no., day, yr.) |
| 2-story brick warehouse; or common stock, 200 shs. MLC Co.) 1a (mo., day, yr.) | |
| b NONE | |
| C | |
| d | |
| <u>e</u> | |
| (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus (f) minus (g) | T |
| <u>a</u> | |
| <u>b</u> | |
| d | |
| e | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minut | |
| (i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) col. (k), but not less than -0-) Losses (from col. (h)) | Or |
| a | |
| <u>b</u> | |
| <u>c</u> | |
| d | |
| e | |
| 2 Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 | |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): | |
| If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 | |
| 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.) | I/A |
| If contrary 40.40/d1/21 applies Japan this part blank | |
| If section 4940(d)(2) applies, leave this part blank. | |
| Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? | Yes No |
| If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. | |
| 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) (b) (c) (d) | |
| (a) Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided to | ratio |
| 2015 | <i>y</i> 001. (0)) |
| 2014 | |
| 2013 | |
| 2012 | |
| 2011 | |
| | |
| 2 Total of line 1, column (d) | |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the 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 | |
| 5 Multiply line 4 by line 3 | |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | |
| 7 Add lines 5 and 6 | |
| 8 Enter qualifying distributions from Part XII, line 4 | |
| 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 instructions. | |

| | | | / <u>5 </u> | | Page 4 |
|----|--|--------|---|----------|--------------|
| | | ю - se | <u> </u> | OIJO | ns) |
| 18 | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | Ì | | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | • |
| ţ | | 1 | | | <u>0.</u> |
| | 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 | | 2 | | | <u>0.</u> |
| 3 | real control of the c | 3 | | | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | <u>0.</u> |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | _ | <u>0.</u> |
| 6 | Credits/Payments: | i | | | |
| a | 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 6a | 1 | | | |
| t | Exempt foreign organizations - tax withheld at source 6b | | | | |
| 0 | Tax paid with application for extension of time to file (Form 8868) | į | | | |
| (| Backup withholding erroneously withheld | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | | | _0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 _ | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | 0. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2017 estimated tax | 11 | | | |
| | art VII-A Statements Regarding Activities | | | | |
| 18 | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | | Yes | No |
| | any political campaign? | | 1a | | X |
| t | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published | l or | | | |
| | distributed by the foundation in connection with the activities. | - | - | | } |
| | Did the foundation file Form 1120-POL for this year? | | 1c | | х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | 10 | <u> </u> | |
| · | (1) On the foundation. \triangleright \$ O . (2) On foundation managers. \triangleright \$ O . | | | | |
| | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | ł | | l |
| • | managers. > \$ 0. | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | x |
| - | If "Yes," attach a detailed description of the activities. | | - | | |
| q | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | - 1 | | } |
| ٠ | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | 3 | | x |
| A | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | 4a | | X |
| | olf "Yes," has it filed a tax return on Form 990-T for this year? | N/A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 11/11 | 5 | | X |
| J | If "Yes," attach the statement required by General Instruction T. | | - | l | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | 1 | 1 | } |
| U | By language in the governing instrument, or | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law | A.f | - 1 | | l |
| | remain in the governing instrument? | | 6 | Х | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | | 7 | X | |
| ′ | bid the foundation have at least \$0,000 in assets at any time during the year in thes, complete that in, con. (c), and that Av | | | | |
| Q: | Enter the states to which the foundation reports or with which it is registered (see instructions) | | 1 | | } |
| U | IL | | - | | |
| , | of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | - | | |
| | of each state as required by General Instruction G? If "No," attach explanation | | 8b | Х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary | or | OU | | |
| 3 | year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV | | 9 | | v |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | 10 | | X |
| 10 | DIG BITY POLICION OCCUPIES SUBSTITUTE CONTRIBUTIONS OUT THE LICE LOS YEAR ! IF "Yes," ATTACH A SCHEDULE LISTING THEIR NAMES AND ADDRESSES | | <u> </u> |)_PF | |
| | | | · VIIII VV | | 14010/ |

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|------|---|--------------|-----|----------|
| Pa | ort VII-A Statements Regarding Activities (continued) | | | |
| | out of the second of the secon | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| - 11 | | 11 | | х |
| | section 512(b)(13)? If "Yes," attach schedule (see instructions) | ''- | | |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | 10 | | v |
| | If "Yes," attach statement (see instructions) | 12 | X | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Δ | |
| | Website address ► N/A | 200 | 007 | <u></u> |
| 14 | The books are in care of ► SARAH SUNG YOON HARTMANN Telephone no. ► (217) | | | 4 |
| | Located at ► 710 W PARK AVENUE, CHAMPAIGN, IL ZIP+4 ►6. | L <u>820</u> | | |
| 15 | | | ,_▶ | لـــا |
| | and enter the amount of tax-exempt interest received or accrued during the year | 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, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | <u>X</u> |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | İ |
| | foreign country | | | |
| Pa | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1: | 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? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | Vec V No | | | |
| | (1) 12) components, or pay a comment of the comment of the components of the componen | İ | | |
| | (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)? | | | l |
| | · · · · · · · · · · · · · · · · · · · | | | ĺ |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | 1 |
| | If the foundation agreed to make a grant to or to employ the official for a period after | | | |
| | termination of government service, if terminating within 90 days.) | | | |
| ı | olf 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 | | <u> </u> |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| (| 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 operating foundation | | | |
| | defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| | 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 | | | ĺ |
| | before 2016? Yes X No | | | ł |
| | 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) (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 | | |
| | the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| | • | | | |
| 9 | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| 3 | | | | |
| | | | ! | |
| | 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.) N/A | 3b | | |
| | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | _4a_ | ļ | X |
| | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | 1 | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2016? | 4b | 1 | X |

| • | | | | |
|--|--|-----------------------------|--|----------------------------|
| Form 990-PF (2016) HARTMANN FAMILY FOUNDATI | ON | | 81-46752 | 61 Page 6 |
| Part VII-B Statements Regarding Activities for Which F | orm 4720 May Be F | Required (continu | ued) | |
| 5a During the year did the foundation pay or incur any amount to: | | | | |
| (1) Garry on propaganda, or otherwise attempt to influence legislation (section | n 4945(e))? | Ye | s X No | |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | | | |
| ` any voter registration drive? | | Ye | s X No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | Ye | s X No | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | | |
| 4945(d)(4)(A)? (see instructions) | | ☐ Ye | s X No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or t | for | | |
| the prevention of cruelty to children or animals? | | | s X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | der the exceptions described | ın Regulatıons | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | ctions)? | | N/A | 5b |
| Organizations relying on a current notice regarding disaster assistance check h | ere . | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi | rom the tax because it mainta | ıned | | |
| expenditure responsibility for the grant? | <i>y</i> | I/A 🗌 Ye | s No | |
| If "Yes," attach the statement required by Regulations section 53 4945 | 5-5(d). | | | 1 1 |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | | |
| a personal benefit contract? | | ☐ Ye | s X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | 6b X |
| If "Yes" to 6b, file Form 8870. | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Ye | s X No | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | N/A | 7b |
| Part VIII Information About Officers, Directors, Trust | | nagers, Highly | <i>,</i> | • |
| Paid Employees, and Contractors | | | | |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | ·, | | |
| t Maria and address | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| (a) Name and address | to position | (If not paid, enter -0-) | and deferred compensation | allowances |
| QUESNELL JACOB HARTMANN | PRESIDENT | | | |
| 710 W PARK AVENUE | | | | |
| CHAMPAIGN, IL 61820 | 1.25 | 0. | 0. | 0. |
| SARAH SUNG YOON HARTMANN | SECRETARY/TRE | ASURER | | |
| 710 W PARK AVENUE | | | | |
| CHAMPAIGN, IL 61820 | 1.25 | 0. | 0. | 0. |
| | DIRECTOR | | | |
| 2703 24TH STREET | | | | |
| LUBBOCK, TX 79410 | 0.50 | 0. | 0. | 0. |
| | | | | |
| | 1 | | | |
| | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | | enter "NONE." | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| (a) Name and address of each employee paid more than \$50,000 | devoted to position | (C) Compensation | and deferred compensation | allowances |
| NONE | | | | |
| | | | | |
| | | | | · |
| | | | | |
| |] | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | 1 | | |
| Total number of other employees paid over \$50,000 | | | | 0 |

| 3 Five highest-paid independent contractors for professional services. If none, enter "NON (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|--|----------------------|------------------|
| NONE | (b) Type of Scryles | (c) compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | İ |
| | | |
| | | |
| | | - 0 |
| Fotal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | <u>▶</u> 0 |
| | | _ . |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, e | erration such as the | Expenses |
| 1 N/A | | |
| I N/A | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Part IV.R. Common of Drawn Deleted Investments | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1: | and 2 | Amount |
| 1 N/A | | |
| I N/A | | |
| The state of the s | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | 1 | |
| 3 | | |
| | | |
| | | |
| | | |
| | | |
| Total, Add lines 1 through 3 | • | 0. |

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, s | ee instructions) |
|----|--|-----------------|------------------|
| 1 | 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 | 1a | 0. |
| b | Average of monthly cash balances | 1b | 389,000. |
| C | Fair market value of all other assets | 1c | |
| ď | Total (add lines 1a, b, and c) | 1d | 389,000. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 389,000. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 5,835. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 383,165. |
| 6 | Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD | 6 | 577. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here ▶ ☐ and do not complete this part.) | id certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 577. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 | | |
| b | Income tax for 2016. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 577. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 577. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7_ | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 577. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 0. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Surtability test (prior IRS approval required) | 3a | |
| þ | 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 | 4 | 0. |
| 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 | 5 | <u> </u> |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 0. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | qualifies for t | he section |
| | 4940(e) reduction of tax in those years. | | |

Form **990-PF** (2016)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2015 | (c) 2015 | (d) 2016 |
|--|---------------|----------------------------|-------------|---------------------------|
| 1 Distributable amount for 2016 from Part XI, | | | | |
| line 7 | | | | 577. |
| 2 Undistributed income, if any, as of the end of 2016 | | | | |
| a Enter amount for 2015 only | | | 0. | |
| b Total for prior years: | | | | |
| 5 Fuence distributions engineering if any to 2016: | | 0. | | |
| 3 Excess distributions carryover, if any, to 2016: | | | | |
| a From 2011 | | | | |
| b From 2012 | | | | |
| c From 2013 | | | | , |
| d From 2014 | | | | |
| e From 2015 | 0. | | | |
| f Total of lines 3a through e | | | | <u> </u> |
| 4 Qualifying distributions for 2016 from Part XII, line 4: ► \$ 0. | | | | |
| · · · · · · · · · · · · · · · · · · · | | 1 | 0. | |
| a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2016 distributable amount | | | | 0. |
| e Remaining amount distributed out of corpus | 0. | | | |
| | 0. | | | 0. |
| Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a)) | <u> </u> | | | . |
| 6 Enter the net total of each column as indicated below: | | | | |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5 | <u> </u> | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | <u> </u> | |
| 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 | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | } |
| e Undistributed income for 2015. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2016. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2017 | | | | 577. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | 0. | <u> </u> | | |
| 8 Excess distributions carryover from 2011 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2017. | | | | |
| Subtract lines 7 and 8 from line 6a | <u> </u> | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2012 | | } | | |
| b Excess from 2013 | | | | |
| c Excess from 2014 | | | | |
| d Excess from 2015 | | | | |
| e Excess from 2016 | | <u> </u> | l | Form 990-PF (2016) |
| | | | | corm www.la.e/F (20176) |

| | N FAMILY FO | | | 81-46 | 75261 Page 10 |
|---|------------------------------|------------------------------|---------------------------|-----------------------------|---------------|
| Part XIV Private Operating F | oundations (see in | structions and Part VII | -A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | | | 1 | | |
| foundation, and the ruling is effective for | r 2016, enter the date of t | the ruling | ▶ <u></u> | | |
| b Check box to indicate whether the found | lation is a private operatii | ng foundation described i | n section | 4942(j)(3) or 49 | 942(1)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | <u> </u> | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | L |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | İ |
| exempt activities . | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | 1 | |
| Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets | | | | ! | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | ! | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Info | | | if the foundation | had \$5,000 or mo | ore in assets |
| at any time during t | he year-see insti | ructions.) | | | |
| Information Regarding Foundatio List any managers of the foundation wh year (but only if they have contributed in NONE | o have contributed more | | ributions received by the | foundation before the clos | se of any tax |
| b List any managers of the foundation who ther entity) of which the foundation has | | | or an equally large portu | on of the ownership of a pa | artnership or |
| NONE | - | | | | |
| 2 Information Regarding Contribution Check here ► X if the foundation o | nly makes contributions | to preselected charitable | organizations and does r | | |
| the foundation makes gifts, grants, etc. | (see instructions) to indiv | viduals or organizations u | nder other conditions, co | omplete items 2a, b, c, and | <u>l d</u> |
| a The name, address, and telephone num | ber or e-mail address of t | the person to whom appli | cations should be addre | ssed: | |
| b The form in which applications should b | e submitted and informa | tion and materials they st | nould include: | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographic | al areas, charitable fields, | kinds of institutions, or | other factors: | |
| | | | | | |

623601 11-23-16

Form **990-PF** (2016)

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Amount Name and address (home or business) a Paid during the year NONE ▶ 3a Total_ 0. **b** Approved for future payment NONE **▶** 3b Total

Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | Unrelate | ed business income | | ded by section 512, 513, or 514 | (e) |
|--|-----------------|--------------------------|--|---|--|
| • | (a) Business | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | code | | code | | 101000110 |
| â | <u> </u> | | ├ | | |
| b | ļ | | | <u> </u> | |
| c | ļ | | | <u> </u> | ļ |
| d | | | <u> </u> | | |
| e | | | <u> </u> | | <u> </u> |
| f | | | <u> </u> | | |
| g Fees and contracts from government agencies | | | <u> </u> | | |
| 2 Membership dues and assessments | | | <u></u> | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | L | <u> </u> | | |
| 4 Dividends and interest from securities | | | | | |
| 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 | | | ļ · | | |
| property | | | į | | |
| 7 Other investment income | | | · · | _ | |
| 8 Gain or (loss) from sales of assets other | | | i – | | |
| | 1 | | ł | | |
| than inventory | | | | | |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue: | | | ļ | | |
| . | | | ├ | | |
| b | | | | | |
| C | <u> </u> | | ├ | | |
| d | | | | | |
| e | | | _ | | |
| 2 Subtotal. Add columns (b), (d), and (e) | | 0. | ـــــــــــــــــــــــــــــــــــ | | 0. |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | <u> </u> |
| See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities to | o the Acc | omplishment of Ex | cemp | t Purposes | |
| | | | | | |
| Line No. Explain below how each activity for which income | | | contri | outed importantly to the accor | nplishment of |
| the foundation's exempt purposes (other than | by providing it | ings for such purposes). | | | |
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| | | Exempt Organi | izations | | | | | | | |
|-------|-----------------|---------------------------------------|---------------------------|---------------------|--|-------------------------|---------------------------------------|-------------------------------|----------------------|------------|
| 1 | Did the o | rganization directly or indir | ectly engage in any | of the followin | g with any other organiza | tion described in sect | ion 501(c) of | j | Yes | No |
| • | the Code | (other than section 501(c) | (3) organizations) o | r in section 52 | 7, relating to political org | anizations? | | | | |
| a | Transfers | s from the reporting founda | ation to a noncharita | ble exempt or | ganization of: | | | | | |
| | (1) Casl | า | | | | | | 1a(1) | | <u>X</u> _ |
| | (2) Othe | er assets | | | | | | 1a(2) | | _X_ |
| b | Other tra | nsactions: | | | | | | | | |
| | (1) Sale | s of assets to a noncharital | ble exempt organıza | tion | | | | 1b(1) | | _X_ |
| | (2) Puro | chases of assets from a nor | ncharitable exempt o | organization | | | | 1b(2) | | _X_ |
| | (3) Rent | tal of facilities, equipment, o | or other assets | | | | | 1b(3) | | <u>x</u> |
| | (4) Rein | nbursement arrangements | | | - | | | 1b(4) | | _X_ |
| | (5) Loai | ns or loan guarantees | | | | | | 1b(5) | | <u>X</u> |
| | (6) Perf | ormance of services or me | mbership or fundrai | sing solicitatio | ns . | | | 1b(6) | | <u>X</u> _ |
| C | Sharing | of facilities, equipment, mai | ılıng lısts, other asse | ets, or paid em | ployees | | | 1c_ | | X |
| d | If the ans | swer to any of the above is | "Yes," complete the | following sche | dule. Column (b) should : | always show the fair r | narket value of the g | oods, other ass | ets, | |
| | or servic | es given by the reporting fo | oundation. If the fou | ndation receive | ed less than fair market va | llue in any transactior | ı or sharıng arrangeı | ment, show in | | |
| | column (| d) the value of the goods, o | other assets, or serv | rices received. | | | | | | |
| (a)Lı | ne no | (b) Amount involved | (c) Name of | | exempt organization | (d) Description | of transfers, transaction | ns, and sharing ar | rangeme | nts |
| | | | | <u> N/A</u> | | | | | | |
| | | | | | | | | | | |
| | | | <u></u> | | | | | | | |
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| | - - | | | - | | | | | | |
| 22 | le the for | undation directly or indirect | the affiliated with or | related to one | or more tay-evennt orga | nizations described | | | | |
| Za | | n 501(c) of the Code (other | , | • | | inizations acourbed | | Yes | X | No |
| ь | | complete the following sch | = |)(0)) 01 III 300I | 3011 027 1 | • | | | _44 | _ 140 |
| | 11 100, 1 | (a) Name of org | | | (b) Type of organization | n] | (c) Description of re | lationship | | |
| | | N/A | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | استما | er penalties of perjury, I declare to | | | ig accompanying schedules ar n taxpayer) is based on all info | | | May the IRS | discuss t | his |
| Sig | gn (📞 | belief, it is true, correct, and con | noteter Declaration of pr | reparer (outer that | | 7 | , , | return with th shown below | e prepar (see_ins | er tr)? |
| He | re | Morrally 10 | Mun | | 5-2-201 | PRESII | DENT | _ X Yes | |] No |
| | Sıç | mature of officer or trustee | <u> </u> | | Date | Title | | | | |
| | | Print/Type preparer's na | ame | Preparer's s | ignature | Date | | PTIN | | |
| _ | | 1 | | 1 | | 1 | self- employed | _ | | |
| Pa | | MARK E. CZ | | MARK E | | 04/27/17 | ., | P00088 | | |
| | eparer | | TIN HOOD | FRIESE | & ASSOC LL | С | Firm's EIN ► 3' | 7-11197 | 90 | |
| US | e Only | <u> </u> | | | | | | | | |
| | | Firm's address ► 25 | | | | | | | | _ |
| | | Сн | AMPAIGN, | <u>IL 618</u> | 20 | | Phone no. (2) | <u> 17)351-</u> | | |
| | | | | | | | | Form 99 0 |)-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, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not 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 private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, Ine 1 Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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

Page 2

Name of organization

Employer identification number

| HARTMANN | FAMILY | FOUNDATION |
|----------|--------|------------|
|----------|--------|------------|

| <u>HARTM</u> | ANN FAMILY FOUNDATION | | 4675261 |
|--------------|---|--------------------------------|--|
| Part I | Contributors (See instructions). Use duplicate copies of Part I | if additional space is needed. | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | QUESNELL AND SARAH HARTMANN 710 W PARK AVENUE CHAMPAIGN, IL 61820 | \$ <u>389,000</u> . | Person X Payroll |
| (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 Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Omnocash Complete Part II for noncash contributions) |
| 523452 10-1 | 8-16 | Schedule B (Form | 990, 990-EZ, or 990-PF) (2016) |

Employer identification number

HARTMANN FAMILY FOUNDATION

81-4675261

| Part II | Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed. | | |
|------------------------------|--|--|--------------------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | _ | |
| | | _ \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | _ \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | _ | |
| 623453 10-18 | | Schedule B / Form | 990, 990-EZ, or 990-PF) (2016) |

| me of organi | orm 990, 990-EZ, or 990-PF) (2016) zation | | Employer identification number | |
|--------------------------|---|---|--|--|
| ARTMAN Part III | N FAMILY FOUNDATION Exclusively religious, charitable, etc., continuous from any one contributor. Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional | olumns (a) through (e) and the followin s, charitable, etc , contributions of \$1,000 or les | 81-4675261 section 501(c)(7), (8), or (10) that total more than \$1,000 for g line entry. For organizations s for the year (Enter this info once) \$ | |
| 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, ar | nd ZIP + 4 | Relationship of transferor to transferee | |
| (a) No. | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| Part I - | | | | |
| - | | (e) Transfer of gift | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relationship of transferor to transferee | |
|) No. rom art I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| | | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
|) No. rom | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | |
| _ - | | | | |
| | | (e) Transfer of gift | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee | |
| - | | | | |