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Form 990-PF

## **Return of Private Foundation**

OMB No 1545-0052

DLN: 93491133001177

| 19 Depreciation (attach schedule) and depletion  | -                                     |   | f the Treasury<br>nue Service  | ▶ Do not   | ection 4947(a)(1) Tr<br>enter social security nur<br>n about Form 990-PF an   | nbers on this form                                  | as it ı | may be made į   | public.  | 2016  pen to Public Inspection |
|--|---------------------------------------|---|--|--|---|---|---------|---|--|--------------------------------|
| Discontinuous and proposed process country, and 219 of forago possis cade  | or                                    | caler   | ndar year 20   | 16, or tax yea   | r beginning 01-01-20  | )16 , ar  | nd er   | nding 12-31-  | 2016   |                                |
| The comment of the co | DI                                    | LLON FO   | OUNDATION  |  |   |   |         | ' '   | entification numbe   | er                             |
| 20 yet form, slate or anomone, comon, and 2P or freequip posed once   Check that depty   |                                       |   |  | ox number if mail is r   | not delivered to street address)  | Room/suite  |         |   | ·  | ns)                            |
| Institute   Address change   Name change   Plame    |                                       |   |  | e, country, and ZIP o  | r foreign postal code   | 1   |         | <b>C</b> If exemption   | application is pendir  | ng, check here                 |
| of amountam columns (b), (c), and (s) may not necessarily equal the amounts in columns (c), (c), and (s) may not necessarily equal the amounts in columns (a) (see sestimons)  1 Contributions, gifts, grants, etc., received (attach schedule)  2 Check   if the foundation is not required to attach Sch. B.  3 Interest on savings and temporary cash investments  4 Dividends and interest from securities  5 Gross rents  Net rental income or (loss)  6 Net gain or (loss) from sale of assets not on line 10  b Gross sales price for all assets on line 6a  2 246,445  7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain  9 Income modifications  10 Gross price for (s) (s) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 11  13 Compensation of officers, directors, trustees, etc  14 Other employee salanes and wages  15 Accounting fees (attach schedule)  16 Legal fees (attach schedule)  17 Interest  18 Taxes (attach schedule)  20 Cocupanoy  20 Cocupanoy  21 Travel, conferences, and meetings  22 Total operating and administrative expenses.  Add lines 33 through 23  23 Other expenses (attach schedule)  24 Total expenses and disbursements. Add lines 24 and disbursements  25 Excess of revenue over expenses and disbursements. Add lines 24 and disbursements  27,95,415  28 Excess of revenue over expenses and disbursements. Add lines 24 and disbursements   | Fa<br>of                              | neck ty<br>Section<br>ir mark<br>year (f                                      | pe of organizati<br>1 4947(a)(1) no<br>ket value of all a<br>from Part II, col   | Final return Address char on Section nexempt charitab assets at end  | Amended return nge Name change  501(c)(3) exempt private le trust Other taxable  J Accounting method Other (specify)                                  | foundation<br>private foundation  Cash Accru        | al      | Foreign of test, check      If private for under section      If the foundary | rganizations meeting k here and attach coundation status was n 507(b)(1)(A), che | the 85% mputation              |
| 2   Check  | Pa                                    | rt I  | of amounts in c  | olumns (b), (c), and   | (d) may not necessarily   | expenses per  | (b)     |   |  | for charitable purposes        |
| 15 Pension plans, employee benefits  | Keverkie                              | 2<br>3<br>4<br>5a<br>b<br>6a<br>b<br>7<br>8<br>9<br>10a<br>b<br>c<br>11<br>12 | Schedule)  Check In Interest on say Dividends and Gross rents  Net rental inconnection of the properties of the properti | of the foundation is a vings and temporal interest from sections of the foundation of the following sections of the follow | s not required to attach ary cash investments urities  ssets not on line 10 an line 6a  246,445 art IV, line 2)  swances anedule)  ors, trustees, etc | 77,879<br>783,973<br>246,445                        |         | 783,973<br>246,445  |  |                                |
| 27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements  -1,485,729  | Operating and Auministrative Expenses | 15<br>16a<br>b<br>c<br>17<br>18<br>19<br>20<br>21<br>22<br>23<br>24           | Pension plans, Legal fees (att Accounting fee Other profession Interest Taxes (attach Depreciation (a) Occupancy . Travel, confere Printing and poor Other expense Total operati Add lines 13 th Contributions, Total expense  | employee benefit ach schedule) . es (attach schedule) onal fees (attach : schedule) (see insattach schedule) a attach schedule) a ences, and meetin ublications es (attach schedule) ng and administ nrough 23 gifts, grants paid  | e)  | 32,920<br>32,920<br>133,094<br>202,193<br>2,593,222 |         | 132,898<br>147,718  |  |                                |
|  |                                       | a   | Subtract line 2  Excess of rev disbursemen   | enue over expe<br>ts   |   |   |         |   |  | 2,333,222                      |

36,647,298

36,647,298

36,647,298

35.161.569

35,161,569 35,161,569

2

3 4

5

6

36,647,298

-1,485,729

35,161,569

35,161,569 Form **990-PF** (2016)

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

19

20

21

22

23

24

25

28

29

31 Part III Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

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

Capital stock, trust principal, or current funds . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Other liabilities (describe -\_

Unrestricted . . . .

Permanently restricted . . . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . .

Other increases not included in line 2 (itemize) ▶ \_\_\_\_\_

Temporarily restricted

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

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

col (k), but not less than -0-) or Losses (from col (h)) 246,445 Part V (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income ) If section 4940(d)(2) applies, leave this part blank Yes V No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part (a) (d) Distribution ratio Base period years Calendar Adjusted qualifying distributions Net value of noncharitable-use assets year (or tax year beginning in) (col (b) divided by col (c))

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

54,530,169

39,930,463

33,958,982

28,901,628

27,532,460

2

3

4

5

6

7

8

1,864,100

1,681,453

1,432,640

1,153,008

1,431,912

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

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

8 Enter qualifying distributions from Part XII, line 4

2015

2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

Form 990-PF (2016)

0 034185

0 042110

0 042187

0 039894

0 052008

0 210384

0 042077

63,076,922

2,654,088

2,663,694

2,593,222

9,606

Page 3

(d)

| Form 990-PF (2016)  Information About Officers, Directors, Trustees,   | Foundation Managers, Highly                   | Page 7 Paid Employees.   |
|--|---|--------------------------|
| and Contractors (continued)  | . canadas i i anagere, ingini,                | Tara Emproyecs,          |
| 3 Five highest-paid independent contractors for professional service   | es (see instructions). If none, en            | ter "NONE".              |
| (a) Name and address of each person paid more than \$50,000  | (b) Type of service                           | (c) Compensation         |
| NONE   |   |                          |
|  |   |                          |
|  |   |                          |
|  |   |                          |
|  |   |                          |
|  |   |                          |
|  |   |                          |
|  |   |                          |
|  |   |                          |
| Tabal number of others recover a control of the professional common  |   | <b>&gt;</b>              |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities |   |                          |
| List the foundation's four largest direct charitable activities during the tax year. Include rele                          | evant statistical information such as the nun | nher of                  |
| organizations and other beneficiaries served, conferences convened, research papers produc                                 |   | Expenses                 |
| 1  |   |                          |
|  |   |                          |
|  |   |                          |
| 2  |   |                          |
|  |   |                          |
|  |   |                          |
| 3  |   |                          |
|  |   |                          |
|  |   |                          |
| 4  |   |                          |
|  |   |                          |
| Part IX-B Summary of Program-Related Investments (see  | nstructions)                                  |                          |
| Describe the two largest program-related investments made by the foundation during th                                      |   | Amount                   |
| 1 N/A  | le tax year off filles I and 2                | Amount                   |
| 2  |   |                          |
|  |   |                          |
|  |   |                          |
| All other program-related investments See instructions   |   |                          |
| 3  |   |                          |
|  |   |                          |
|  |   |                          |
| Total. Add lines 1 through 3   |   | . ▶                      |
|  |   | Form <b>990-PF</b> (2016 |

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

1a

1b

2

За 3b

4

5

2,593,222

2.593.222

2,593,222

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Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

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

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

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

income Enter 1% of Part I, line 27b (see instructions).

1

2

3

4

5

b

3,134,634

Form **990-PF** (2016)

2,593,222

| Form 990-PF (2016)   |               |                            |             | Page <b>9</b>        |
|--|---------------|----------------------------|-------------|----------------------|
| Part XIII Undistributed Income (see instruction                                    | ons)          |                            |             |                      |
|  | (a)<br>Corpus | (b)<br>Years prior to 2015 | (c)<br>2015 | ( <b>d</b> )<br>2016 |
| Distributable amount for 2016 from Part XI, line 7                                 |               |                            |             | 3,134,634            |
| 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only |               |                            | 2,593,222   |                      |
| <b>b</b> Total for prior years 20  |               |                            |             |                      |
| <b>3</b> Excess distributions carryover, if any, to 2016                           |               |                            |             |                      |
| a From 2011  |               |                            |             |                      |
| <b>b</b> From 2012   |               |                            |             |                      |
| c From 2013  |               |                            |             |                      |
| d From 2014  |               |                            |             |                      |

e From 2015. . . . .

same amount must be shown in column (a) )

6 Enter the net total of each column as

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) . . .

9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . .

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. .

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount —see instructions . . . . . . . . . . . . e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must

indicated below:

f Total of lines 3a through e. . . . .

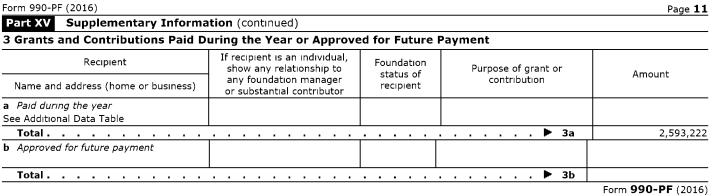
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election

required—see instructions). . . . . . . **d** Applied to 2016 distributable amount. . . e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines

factors N/A



| nter gross amounts unless otherwise indicated  | Unrelated bus                                 | siness income        | Excluded by section                   | 512, 513, or 514     | (e)<br>Related or exemp              |
|--|---|----------------------|---------------------------------------|----------------------|--------------------------------------|
| L Program service revenue  | (a)<br>Business code                          | <b>(b)</b><br>Amount | (c)<br>Exclusion code                 | <b>(d)</b><br>Amount | function income<br>(See instructions |
| a<br>b   |   |                      |                                       |                      |                                      |
| c  | -   |                      |                                       |                      |                                      |
| d  |   |                      |                                       |                      |                                      |
| e  |   |                      |                                       |                      |                                      |
| f  |   |                      |                                       |                      |                                      |
| <b>g</b> Fees and contracts from government agencies   |   |                      |                                       |                      |                                      |
| Membership dues and assessments  Interest on savings and temporary cash  |   |                      |                                       |                      |                                      |
| investments  |   |                      | 14                                    | 77,879               |                                      |
| Dividends and interest from securities   |   |                      | 14                                    | 783,973              |                                      |
| Net rental income or (loss) from real estate   |   |                      |                                       |                      |                                      |
| a Debt-financed property   |   |                      |                                       |                      |                                      |
| <b>b</b> Not debt-financed property Net rental income or (loss) from personal property   |   |                      |                                       |                      |                                      |
| Other investment income  |   |                      |                                       |                      |                                      |
| Gain or (loss) from sales of assets other than   |   |                      |                                       |                      |                                      |
| inventory  |   |                      | 18                                    | 246,445              |                                      |
| Net income or (loss) from special events   |   |                      |                                       |                      |                                      |
| Gross profit or (loss) from sales of inventory Other revenue a   | -   |                      |                                       |                      |                                      |
| b  |   |                      |                                       |                      |                                      |
| с  |   |                      |                                       |                      |                                      |
| d  |   |                      |                                       |                      |                                      |
| e  |   |                      |                                       |                      |                                      |
|  |   |                      |                                       |                      |                                      |
|  |   |                      | 1                                     | 1,108,297            |                                      |
| Total. Add line 12, columns (b), (d), and (e)  |   |                      | 13                                    | 1,108,297<br>3       |                                      |
| Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculationart XVI-B Relationship of Activities to the second secon    | ons )<br>ne Accomplishr                       | nent of Exem         | ıpt Purposes                          | 3                    | 1,108,29                             |
| Total. Add line 12, columns (b), (d), and (e)  | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
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| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes<br>of Part XVI-A contribu | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes of Part XVI-A contribu    | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  e worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second section of the foundation of the foun | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes of Part XVI-A contribu    | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second sec | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes of Part XVI-A contribu    | Bted importantly to  | 1,108,29                             |
| rotal. Add line 12, columns (b), (d), and (e).  ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the second sec | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes of Part XVI-A contribu    | Bted importantly to  | 1,108,29                             |
| the accomplishment of the foundation's e   | ons )<br>ne Accomplishr<br>income is reported | ment of Exem         | pt Purposes of Part XVI-A contribu    | Bted importantly to  | 1,108,29                             |

Part XVII

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

|            |                |                | Exempt Organi                                       | zations          |         |              |                          |         |                 |       |                          |             |               |            |      |
|------------|----------------|----------------|---|------------------|---------|--------------|--------------------------|---------|-----------------|-------|--------------------------|-------------|---------------|------------|------|
|            |                |                | inization directly or in-<br>ode (other than sectio |                  |         |              |                          |         |                 |       |                          | on 501      |               | Yes        | No   |
| a '        | Transfe        | rs fro         | om the reporting foun                               | dation to a n    | oncha   | ırıtable ex  | empt organizat           | ion (   | of              |       |                          |             |               |            |      |
|            | <b>(1)</b> Ca  | sh.            |   |                  |         |              |                          |         |                 |       |                          | . [         | 1a(1)         |            | No   |
|            | (2) Ot         | her a          | assets  |                  |         |              |                          |         |                 |       |                          | · [         | 1a(2)         |            | No   |
| b          | Other tr       | ransa          | actions   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                | f assets to a nonchari                              | •                | _       |              |                          |         |                 |       |                          | · [:        | 1b(1)         |            | No   |
|            | <b>(2)</b> Pu  | ırcha          | ses of assets from a n                              | oncharitable     | exem    | npt organiz  | zation                   |         |                 |       |                          |             | 1b(2)         |            | No   |
|            | <b>(3)</b> Re  | ental          | of facilities, equipmer                             | it, or other a   | ssets.  |              |                          |         |                 | •     |                          | · ·         | 1b(3)         |            | No   |
|            | <b>(4)</b> Re  | eimbu          | ırsement arrangemen                                 | ts               |         |              |                          |         |                 | •     |                          | · [         | 1b(4)         |            | No   |
|            | ( <b>5)</b> Lo | ans o          | or loan guarantees.                                 |                  |         |              |                          | •       |                 |       |                          | . [3        | 1b(5)         |            | No   |
|            | <b>(6)</b> Per | form           | ance of services or m                               | embership or     | r fund  | raising sol  | icitations               | •       |                 | •     |                          | . [         | 1b(6)         |            | No   |
|            | _              |                | acilities, equipment, n                             |                  |         | •            |                          |         |                 |       |                          |             | 1c            |            | No   |
|            |                |                | er to any of the above<br>s, other assets, or serv  |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                | s, otner assets, or sen<br>action or sharing arra   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            | ,              |                | <b>y</b>  |                  |         |              | ,                        |         | <b>3,</b>       |       | <b>,</b>                 |             |               |            |      |
| (a)        | Line No        | <del>  '</del> | ( <b>b)</b> Amount involved                         | (c) Name of      | noncha  | arıtable exe | mpt organization         | _       | (d) Description | on of | transfers, transactions, | and sharı   | ng arrar      | ngemen     | its  |
|            |                | <u> </u>       |   |                  |         |              |                          | $\perp$ |                 |       |                          |             |               |            |      |
|            |                | -              |   |                  |         |              |                          | +       |                 |       |                          |             |               |            |      |
|            |                | <del> </del>   |   |                  |         |              |                          | +       |                 |       |                          |             |               |            |      |
|            |                | -              |   |                  |         |              |                          | +       |                 |       |                          |             |               |            |      |
|            |                | +              |   |                  |         |              |                          | +       |                 |       |                          |             |               |            |      |
|            |                | +              |   |                  |         |              |                          | +       |                 |       |                          |             |               |            |      |
|            |                | 1              |   |                  |         |              |                          | +       |                 |       |                          |             |               |            |      |
|            |                | 1              |   |                  |         |              |                          | T       |                 |       |                          |             |               |            |      |
|            |                | 1              |   |                  |         |              |                          | $\top$  |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          | ┸       |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
| <b>2</b> a | Is the fo      | ound           | ation directly or indire                            | ectly affiliated | d with  | , or relate  | d to, one or m           | ore t   | ax-exempt or    | rganı | zations                  | _           |               | _          |      |
|            | describe       | ed ın          | section 501(c) of the                               | Code (other      | than    | section 50   | 01(c)(3)) or in          | secti   | on 527?         |       |                          | L           | Yes           | <b>✓</b> N | lo   |
| b          | If "Yes,       | " con          | nplete the following so                             | hedule           |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                | (a) Name of organization                            | n                |         | (1           | <b>b)</b> Type of organı | zatio   | n               |       | (c) Description          | of relation | ship          |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
|            | 111            | Inder          | penalties of perjury,                               | I declare tha    | t I hav | Ve evamin    | ed this return           | ınclı   | uding accomp    | anvii | na echedulee and et      | atements    | e and t       | o the      | hect |
|            |                |                | knowledge and belief                                |                  |         |              |                          |         |                 |       |                          |             |               |            |      |
| Sig        | ın 🗆 w         | hich           | preparer has any kno                                | wledge           |         |              |                          |         |                 |       | _                        |             |               |            |      |
|            | re             | **             | ****  |                  |         |              | 2017-05-04               |         | ****            | *     |                          | lay the IR  |               |            |      |
|            |                |                | gnature of officer or ti                            | rustos           |         |              | Date                     |         | — ▶ <del></del> |       |                          | vith the pr |               |            |      |
|            |                | باد            | gnature or officer or ti                            | ustee            |         |              | Date                     |         | , ricie         |       |                          | see instr ) | , <b>(</b> Y  | es ⊔ N     | lo   |
|            |                |                | Print/Type preparer's                               | name             | Prep    | arer's Sıgr  | nature                   |         | Date            |       |                          | PTIN        |               |            |      |
|            |                |                |   |                  |         |              |                          |         |                 |       | Check if self-           |             | 00295         | 222        |      |
|            |                |                | BRUCE A HOCKING                                     | :                |         |              |                          |         | 2017-05-0       | 20    | employed ▶ 🏻             |             | 00233         | 233        |      |
| Pa         | id             |                | 3 22 110 GMING                                      | •                |         |              |                          |         | 2017-03-0       | ور    |                          |             |               |            |      |
|            | epare          |                | Firm's name ► HOC                                   | KING & SCHU      | JLENE   | BERG LLC     |                          |         | I .             |       |                          | Francis 571 | N <b>F</b> 47 | 00000      |      |
| Us         | e On           |                |   |                  |         |              |                          |         |                 |       |                          | Fırm's EI   | N ▶4/-        | U8U60      | J82  |
|            |                |                | Fırm's address ► 57                                 | 57 SO 34TH       | ST S    | JITE 100     |                          |         |                 |       |                          |             |               |            |      |
|            |                |                | I TI  | NCOLN, NE        | 68516   | <b>;</b>     |                          |         |                 |       |                          | Phone no    | (402)         | 441-0      | 0140 |
|            |                |                | L11   |                  |         | •            |                          |         |                 |       |                          |             |               |            |      |

| Form 990PF Part XV Line 3 - Grant   | ts and Contributions Paid  | During the `                         | Year or Approved for Future      | Payment |
|---|--|--------------------------------------|----------------------------------|---------|
| Recipient  Name and address (home or business)  | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation<br>status of<br>recipient | Purpose of grant or contribution | Amount  |
| a Paid during the year  | or substantial contributor   |                                      |                                  |         |
| AMERICAN LUNG ASSOCIATION OF<br>NEBRAS<br>8990 WEST DODGE RD SUITE<br>OMAHA, NE 68114 | NONE   | 501(C)3                              | PROGRAM                          | 9,600   |
| BLESSED SACRAMENT SCHOOL<br>1725 LAKE STREET<br>LINCOLN, NE 68502                     | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 30,000  |
| BRIGHT LIGHTS INC<br>5561 SOUTH 48TH STREET<br>LINCOLN, NE 68516                      | NONE   | 501(C)3                              | PROGRAM                          | 10,000  |
| CATHEDRAL OF THE RISEN CHRIST<br>3245 S 37TH ST<br>LINCOLN, NE 68506                  | NONE   | 501(C)3                              | PROGRAM                          | 10,000  |
| DIOCESE OF LINCOLN PO BOX 80328<br>LINCOLN, NE 68501                                  | NONE   | 501(C)3                              | PROGRAM                          | 25,000  |
| CELEBRATING NEBRASKA STATEHOOD<br>INC<br>201 8TH STREET 215<br>LINCOLN, NE 68508      | NONE   | 501(C)3                              | PROGRAM                          | 10,000  |
| DURHAM WESTERN HERITAGE MUSEUM<br>801 SOUTH 10TH STREET<br>OMAHA, NE 68108            | NONE   | 501(C)3                              | PROGRAM                          | 20,000  |
| GIRL SCOUTS SPIRIT OF NEBRASKA<br>COUN<br>8230 BEECHWOOD DRIVE<br>LINCOLN, NE 68510   | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 15,000  |
| JUNIOR ACHIEVEMENT<br>285 SOUTH 68TH PLACE ST<br>LINCOLN, NE 68510                    | NONE   | 501(C)3                              | PROGRAM                          | 10,000  |
| LINCOLN CHILDREN'S ZOO<br>1222 SOUTH 27TH STREET<br>LINCOLN, NE 68502                 | NONE   | 501(C)3                              | PROGRAM                          | 30,000  |
| LINCOLN LITERACY 745 S 9TH STREET<br>LINCOLN, NE 68516                                | NONE   | 501(C)3                              | PROGRAM                          | 12,500  |
| LINCOLN MUNICIPAL BAND<br>315 SOUTH 9TH STREET SU<br>LINCOLN, NE 68508                | NONE   | 501(C)3                              | PROGRAM                          | 3,000   |
| MADONNA SCHOOL<br>6402 NORTH 71 PLAZA<br>OMAHA, NE 68104                              | NONE   | 501(C)3                              | PROGRAM                          | 20,000  |
| NEBRASKA TRUMPET ENSEMBLE<br>315 SOUTH 9TH STREET 11<br>LINCOLN, NE 68508             | NONE   | 501(C)3                              | PROGRAM                          | 1,000   |
| NORTH AMERICAN MARTYRS SCHOOL<br>1101 ISAAC DRIVE<br>LINCOLN, NE 68521                | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 20,000  |
|   |  |                                      |                                  |         |

2,593,222

Total .

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| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |  |                                      |                                     |           |  |  |  |
|--|--|--------------------------------------|-------------------------------------|-----------|--|--|--|
| Recipient  Name and address (home or business)   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |  |  |  |
| a Paid during the year   | or substantial contributor   |                                      |                                     |           |  |  |  |
| OUTLOOK NEBRASKA 4125 S 72ND ST<br>OMAHA, NE 68127   | NONE   | 501(C)3                              | PROGRAM                             | 10,000    |  |  |  |
| DIOCESE OF LINCOLN PO BOX 80328<br>LINCOLN, NE 68501   | NONE   | 501(C)3                              | PROGRAM                             | 7,000     |  |  |  |
| RESPECT2 820 SOUTH 75TH STREET<br>OMAHA, NE 68114  | NONE   | 501(C)3                              | PROGRAM                             | 3,450     |  |  |  |
| SACRED HEART SCHOOL<br>540 NORTH 31ST STREET<br>LINCOLN, NE 68503  | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS                | 12,910    |  |  |  |
| SCHOOL SISTERS OF CHRIST THE KING<br>4100 SW 56TH STREET<br>LINCOLN, NE 68522                            | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS                | 35,000    |  |  |  |
| SIENAFRANCIS HOUSE<br>1702 NICHOLAS STREET<br>OMAHA, NE 68102  | NONE   | 501(C)3                              | PROGRAM                             | 15,000    |  |  |  |
| AUDUBON NEBRASKA PO BOX 117<br>DENTON, NE 68339  | NONE   | 501(C)3                              | PROGRAM                             | 25,000    |  |  |  |
| ST JOHN THE APOSTLE SCHOOL<br>7601 VINE<br>LINCOLN, NE 68505   | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS                | 10,000    |  |  |  |
| ST PATRICK'S SCHOOL<br>4142 NORTH 61TH STREET<br>LINCOLN, NE 68504                                       | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS                | 37,500    |  |  |  |
| ST PETER'S SCHOOL<br>4500 DUXHALL DRIVE<br>LINCOLN, NE 68516   | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS                | 25,000    |  |  |  |
| ST TERESA'S SCHOOL<br>616 SOUTH 36TH STREET<br>LINCOLN, NE 68510   | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS                | 50,000    |  |  |  |
| TABITHA 4720 RANDOLPH STREET<br>LINCOLN, NE 68510  | NONE   | 501(C)3                              | PROGRAM                             | 45,000    |  |  |  |
| TEAMMATES 6801 O STREET<br>LINCOLN, NE 68510   | NONE   | 501(C)3                              | PROGRAM                             | 40,000    |  |  |  |
| CURE ALZHEIMER'S FUND<br>34 WASHINGTON STREET SUI<br>WELLESLEY HILLS, MA 02481                           | NONE   | 501(C)3                              | PROGRAM                             | 15,000    |  |  |  |
| ST LEO PARISH<br>28290 BEAUMONT ROAD<br>BONITA SPRINGS, FL 34131   | NONE   | 501(C)3                              | PROGRAM                             | 5,000     |  |  |  |
| Total  |  |                                      |                                     | 2,593,222 |  |  |  |

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST JOSEPH CATHOLIC CHURCH NONE 501(C)3 **PROGRAM** 2,500 7900 TRENDWOOD DRIVE LINCOLN, NE 68506 FOOD BANK OF LINCOLN NONE 501(C)3 **PROGRAM** 30,000 4840 DORIS BAIR CIRCLE LINCOLN, NE 68504 MATT TALBOT KITCHEN PO BOX 80935 NONE 501(C)3 PROGRAM 30,000 LINCOLN, NE 68501 PEOPLES CITY MISSION PO BOX 80636 NONE 501(C)3 PROGRAM 10,000 LINCOLN, NE 68501 NONE LINCOLN PUBLIC SCHOOLS 501(C)3 PROGRAM 15,000 **FOUNDATION** 5901 O STREET LINCOLN, NE 68510 KEVIN O'CONNOR SCHOLARSHIP FUND NONE 501(C)3 PROGRAM 10,000 ΙN 5432 N 160TH AVE CIR OMAHA, NE 68116 NONE 501(C)3 PROGRAM 5,000 SALVATION ARMY 2625 POTTER LINCOLN, NE 68503 U S O PO BOX 96860 NONE 501(C)3 PROGRAM 2,000 WASHINGTON, DC 200777677 REGIS UNIVERSITY NONE 100,000 501(C)3 PROGRAM 3333 REGIS BOULEVARD DENVER, CO 80221 DOANE COLLEGE 1014 BOSWELL NONE 501(C)3 **PROGRAM** 30,000 CRETE, NE 68333 NEBRASKA STATE HISTORICAL NONE CAPITAL IMPROVEMENTS 20,000 501(C)3 **FOUNDATIO** 128 N 13TH STREET 1010 LINCOLN, NE 68508 NONE CAPITAL IMPROVEMENTS HOLY ROSARY CATHOLIC CHURCH 501(C)3 10,000 1104 CHEYENNE ALLIANCE, NE 69301 ST AGNES ACADEMY FOUNDATION NONE CAPITAL IMPROVEMENTS 20,000 501(C)3 1104 CHEYENNE AVENUE ALLIANCE, NE 69301 BARTH SYNDROME FOUNDATION NONE 501(C)3 **PROGRAM** 2,500 PO BOX 618 LARCHMONT, NY 10538 NEBRASKA BRASS NONE 501(C)3 PROGRAM 1,500 315 SOUTH 9TH STREET SUI LINCOLN, NE 68508 Total . 2,593,222

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| Form 990PF Part XV Line 3 - Grant  | ts and Contributions Paid  | I During the '                       | Year or Approved for Future      | Payment   |
|--|--|--------------------------------------|----------------------------------|-----------|
| Recipient  | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation<br>status of<br>recipient | Purpose of grant or contribution | Amount    |
| Name and address (home or business)  | or substantial contributor   | ,                                    |                                  |           |
| a Paid during the year   |  |                                      |                                  |           |
| CORNHUSKER COUNCIL BOY SCOUTS<br>600 SOUTH 120TH<br>WALTON, NE 68461                 | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 20,000    |
| LUX CENTER FOR THE ARTS<br>2601 NORTH 48TH STREET<br>LINCOLN, NE 68504               | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 50,000    |
| CENTERPOINT 2633 P STREET<br>LINCOLN, NE 68503                                       | NONE   | 501(C)3                              | PROGRAM                          | 5,500     |
| CHILD GUIDENCE CENTER<br>2444 O STREET<br>LINCOLN, NE 68510                          | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 30,000    |
| COMMUNITY ACTION PARTNERSHIP<br>210 O STREET<br>LINCOLN, NE 68508                    | NONE   | 501(C)3                              | PROGRAM                          | 25,000    |
| EASTMONT TOWERS FOUNDATION<br>6315 O STREET<br>LINCOLN, NE 68510                     | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 50,000    |
| EPS PREGNANCY SERVICES<br>6220 MAPLE STREET<br>OMAHA, NE 68104                       | NONE   | 501(C)3                              | PROGRAM                          | 20,000    |
| LINCOLN CITY LIBRARY FOUNDATION<br>136 SOUTH 14TH STREET<br>LINCOLN, NE 68508        | NONE   | 501(C)3                              | PROGRAM                          | 10,000    |
| FRIENDSHIP HOME OF LINCOLN<br>POBOX 85358<br>LINCOLN, NE 68501                       | NONE   | 501(C)3                              | PROGRAM                          | 30,000    |
| NEW CASSEL FOUNDATION<br>900 NORTH 90TH STREET<br>OMAHA, NE 68114                    | NONE   | 501(C)3                              | PROGRAM                          | 10,000    |
| PHEASANTS FOREVER INC<br>PO BOX 6592<br>LINCOLN, NE 68506                            | NONE   | 501(C)3                              | PROGRAM                          | 1,250     |
| FRIENDS OF PIONEERS PARK NATURE<br>CEN<br>3201 S CODDINGTON AVE<br>LINCOLN, NE 68522 | NONE   | 501(C)3                              | PROGRAM                          | 4,000     |
| PROJECT KINDLE PO BOX 81147<br>LINCOLN, NE 68501                                     | NONE   | 501(C)3                              | PROGRAM                          | 10,000    |
| UNITED WAY OF LINCOLN-LANCASTER<br>CO<br>238 SOUTH 13TH STREET<br>LINCOLN, NE 68508  | NONE   | 501(C)3                              | PROGRAM                          | 10,000    |
| HUMANITIES NEBRASKA<br>215CENTENNIAL MALL SOUTH<br>LINCOLN, NE 68508                 | NONE   | 501(C)3                              | PROGRAM                          | 10,000    |
| Takal  |  |                                      | <b>▶</b> 1                       | 2 502 222 |

2,593,222

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GREAT PLAINS TRAILS NETWORK NONE 501(C)3 CAPITAL IMPROVEMENTS 5,000 5000 NORTH 7TH STREET LINCOLN, NE 68521 SHELDON MUSEUM OF ART NONE 501(C)3 **PROGRAM** 20,000 UNIVERSITY OF NEBRASKA AT LINCOLN, NE 68588 UNIVERSITY OF NEBRASKA NONE 501(C)3 **PROGRAM** 176,000 **FOUNDATION** 1010 LINCOLN MALL SUIT LINCOLN, NE 68508 CEDARS HOME FOR CHILDREN NONE 501(C)3 **PROGRAM** 30,000 6601 PIONEERS BLVD SUITE LINCOLN, NE 68506 CONCORDIA UNIVERSITY NONE 501(C)3 **PROGRAM** 40,000 800 NORTH COLUMBIA AVE SEWARD, NE 68434 PIUS X ST LEO'S SCHOOL NONE 501(C)3 CAPITAL IMPROVEMENTS 20,000 6905 BLONDO STREET OMAHA, NE 68104 AMERICAN RED CROSS NONE 501(C)3 **PROGRAM** 15,000 220 OAKCREEK DRIVE LINCOLN, NE 68501 CATHOLIC CHARITIES OF OMAHA NONE 501(C)3 **PROGRAM** 10,000 3300 NORTH 60TH STREET OMAHA, NE 68104 CRISTO REY CATHOLIC CHURCH NONE 501(C)3 CAPITAL IMPROVEMENTS 10,000 4245 J STREET LINCOLN, NE 68510 LINCOLN SYMPHONY ORCHESTRA NONE 501(C)3 **PROGRAM** 20,000 233 SOUTH 13TH ST SUIT LINCOLN, NE 68508 **MILKWORKS** NONE 501(C)3 **PROGRAM** 10,000 5930 SOUTH 58TH ST SUITE LINCOLN, NE 68516 ST THOMAS AQUINAS CHURCH NONE 501(C)3 CAPITAL IMPROVEMENTS 50,000 320 NORTH 16TH LINCOLN, NE 68508 OPEN DOOR MISSION NONE 501(C)3 **PROGRAM** 10,000 2828 NORTH 23RD STREET EA OMAHA, NE 68110 VILLA MARIE NONE 501(C)3 CAPITAL IMPROVEMENTS 18,000 7205 NORTH 112TH STREET WAVERLY, NE 68462 NONE ANGELS AMONG US 501(C)3 **PROGRAM** 20,000 3516 N 163RD PLZ SUITE

2,593,222

OMAHA, NE 68138 Total.

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| Form 990PF Part XV Line 3 - Grant   | ts and Contributions Paid  | During the                           | Year or Approved for Future F    | Payment   |
|---|--|--------------------------------------|----------------------------------|-----------|
| Recipient  Name and address (home or business)                                      | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or contribution | Amount    |
| a Paid during the year  |  |                                      |                                  |           |
| ST JAMES SCHOOL<br>525 EAST 14TH STREET<br>CRETE, NE 68333                          | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 50,000    |
| PIUS X FOUNDATION 6000 A STREET LINCOLN, NE 68510                                   | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 500,000   |
| OMAHA STREET SCHOOL<br>3223 NORTH 45TH<br>OMAHA, NE 68104                           | NONE   | 501(C)3                              | PROGRAM                          | 10,000    |
| LINCOLN ARTS COUNCIL<br>1701 S 17TH ST STE 1A<br>LINCOLN, NE 68502                  | NONE   | 501(C)3                              | PROGRAM                          | 10,000    |
| NEBRASKA WESLEYAN UNIVERSITY<br>5000 SAINT PAUL AVENUE<br>LINCOLN, NE 68504         | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 50,000    |
| OUR LADY OF GOOD COUNSEL RETREAT<br>HO<br>7303 NORTH 112TH<br>WAVERLY, NE 68462     | NONE   | 501(C)3                              | PROGRAM                          | 20,000    |
| NEBRASKA CULTURAL ENDOWMENT<br>1004 FARNAM ST PLAZA LEV<br>OMAHA, NE 68102          | NONE   | 501(C)3                              | PROGRAM                          | 5,000     |
| CASA FOR LANCASTER COUNTY<br>1141 H STREET SUITE C<br>LINCOLN, NE 68508             | NONE   | 501(C)3                              | PROGRAM                          | 15,000    |
| CARNEGIE ARTS CENTER<br>204 WEST 4TH STREET<br>ALLIANCE, NE 69301                   | NONE   | 501(C)3                              | PROGRAM                          | 8,000     |
| NEBRASKA LUTHERAN CAMPUS<br>MINISTRY<br>535 N 16TH STREET<br>LINCOLN, NE 68508      | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 25,000    |
| UNIVERSITY OF NEBRASKA<br>FOUNDATION<br>1010 LINCOLN MALL SUIT<br>LINCOLN, NE 68508 | NONE   | 501(C)3                              | PROGRAM                          | 250,000   |
| RONCALLI CATHOLIC HIGH SCHOOL<br>6401 SORENSEN PARKWAY<br>OMAHA, NE 68152           | NONE   | 501(C)3                              | CAPITAL IMPROVEMENTS             | 25,000    |
| CATHOLIC SOCIAL SERVICES<br>2241 O STREET<br>LINCOLN, NE 68510                      | NONE   | 501(C)3                              | PROGRAM                          | 20,000    |
| CATHOLIC FOUNDATION OF LINCOLN<br>PO BOX 80328<br>LINCOLN, NE 68510                 | NONE   | 501(C)3                              | PROGRAM                          | 15,012    |
| Total   |  |                                      |                                  | 2,593,222 |

| efile GRAPHIC print - DO NOT PRO | CESS | As Filed D | ata - |                      |                        | DLN: 93491133001177                         |  |  |  |  |
|----------------------------------|------|------------|-------|----------------------|------------------------|---|--|--|--|--|
| TY 2016 Accounting Fees Schedule |      |            |       |                      |                        |   |  |  |  |  |
|                                  |      |            |       |                      |                        |   |  |  |  |  |
| Name: DILLON FOUNDATION          |      |            |       |                      |                        |   |  |  |  |  |
| C/O JOSEPH KERRIGAN              |      |            |       |                      |                        |   |  |  |  |  |
|                                  | EIN: | 91-1805    | 591   |                      |                        |   |  |  |  |  |
| Category                         | Amo  | ount       |       | Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |  |  |  |
| ACCOUNTING FEES                  |      | 4,679      |       |                      |                        |   |  |  |  |  |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data -     | DLN: 93491133001177 |
|--------------------------------------|---------------------|---------------------|
| TY 2016 Investments Corpora          | ite Stock Schedule  |                     |
| Name:                                | DILLON FOUNDATION   |                     |
|                                      | C/O JOSEPH KERRIGAN |                     |
| EIN:                                 | 91-1805591          |                     |

| <b>EIN:</b> 91-1805591      |                           |                                  |
|-----------------------------|---------------------------|----------------------------------|
| Name of Stock               | End of Year Book<br>Value | End of Year Fair<br>Market Value |
| CORPORATE STOCK INVESTMENTS | 34,872,152                | 69,874,248                       |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data -                      |                          | DLN:                   | 93491133001177                              |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|
| TY 2016 Other Expenses Schedule      |                                      |                          |                        |   |
|                                      |                                      |                          |                        |   |
| Name: DILLON FOUNDATION              |                                      |                          |                        |   |
| C/O JOSEPH KERRIGAN                  |                                      |                          |                        |   |
| <b>EIN:</b> 91-1805591               |                                      |                          |                        |   |
| Other Expenses Schedule              |                                      |                          |                        |   |
| Description                          | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
| EXPENSES                             |                                      |                          |                        |   |
| INVESTMENT EXPENSE                   | 132,898                              | 132,898                  |                        |   |
| MISCELLANEOUS EXPENSE                | 196                                  |                          |                        |   |

| efile GRAPHIC print - DO NOT F | PROCESS As | Filed Data · | -              | DL           | N: 93491133001177          |
|--------------------------------|------------|--------------|----------------|--------------|----------------------------|
| TY 2016 Taxes Schedule         |            |              |                |              |                            |
|                                |            |              |                |              |                            |
| Name: DILLON FOUNDATION        |            |              |                |              |                            |
| C/O JOSEPH KERRIGAN            |            |              |                |              |                            |
| <b>EIN:</b> 91-1805591         |            |              |                |              |                            |
| Category                       | Amou       | nt           | Net Investment | Adjusted Net | Disbursements              |
| Judge,                         |            |              | Income         | Income       | for Charitable<br>Purposes |
| FOREIGN TAX                    | 1          | 14,820       | 14,820         |              |                            |
| FEDERAL TAX                    |            | 18,100       |                |              |                            |

| efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491133001177   |  |  |   |  |  |  |
|--|--|--|---|--|--|--|
| Schedule B<br>(Form 990, 990-EZ,   | Schedule of Contributors   |  | OMB No 1545-0047  |  |  |  |
| or 990-PF)  Department of the Treasury Internal Revenue Service  | ► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instruction www.irs.gov/form990.  | ons is at  | 2016  |  |  |  |
| Name of the organizat<br>DILLON FOUNDATION   | ion  | Employer id  | lentification number  |  |  |  |
| C/O JOSEPH KERRIGAN  |  | 91-1805591   |   |  |  |  |
| Organization type (che   | eck one)   |  |   |  |  |  |
| Filers of:   | Section:   |  |   |  |  |  |
| Form 990 or 990-EZ   | 501(c)( ) (enter number) organization  | 501(c)( ) (enter number) organization  |   |  |  |  |
|  | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundate   | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation |   |  |  |  |
|  | ☐ 527 political organization   |  |   |  |  |  |
| Form 990-PF  | ☑ 501(c)(3) exempt private foundation  |  |   |  |  |  |
|  | 4947(a)(1) nonexempt charitable trust treated as a private foundation  |  |   |  |  |  |
|  | 501(c)(3) taxable private foundation   |  |   |  |  |  |
| <b>V</b>   | ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributi<br>r property) from any one contributor Complete Parts I and II See instructions for   | •  | •   |  |  |  |
| Special Rules  |  |  |   |  |  |  |
| under sections to under sections to under sections to the under sections at the under sections to the under se | tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> 3% s 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pary one contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 ne 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II   | art II, line 13,   | 16a, or 16b, and that   |  |  |  |
| 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  |  |  |   |  |  |  |
| during the year, If this box is che purpose Do not   | tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an excomplete any of the parts unless the <b>General Rule</b> applies to this organization by table, etc., contributions totaling \$5,000 or more during the year | tributions tota<br>exclusively re<br>ecause it rece                              | led more than \$1,000<br>ligious, charitable, etc,<br>eived <i>nonexclusively</i> |  |  |  |
| 990-EZ, or 990-PF), bu   | on that is not covered by the General Rule and/or the Special Rules does not file S<br>tit <b>must</b> answer "No" on Part IV, line 2, of its Form 990, or check the box on line I<br>form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of  | H of its   |   |  |  |  |
| For Paperwork Reduction of for Form 990, 990-EZ, or 99   |  | le B (Form 990,  | , 990-EZ, or 990-PF) (2016)   |  |  |  |

| Name of organization<br>DILLON FOUNDATION<br>C/O JOSEPH KERRIGAN |   | Employer identification<br>91-1805591 | Employer identification number<br>91-1805591  |  |  |
|--|---|---------------------------------------|---|--|--|
| Part I   | Contributors (see instructions) Use duplicate copies of Part I if add | ditional space is needed              |   |  |  |
| (a)  | (b)   | (c)                                   | (d)   |  |  |
| No.  | Name, address, and ZIP + 4  | Total contributions                   | Type of contribution                          |  |  |
|  |   |                                       | Person  |  |  |
| 1  | DONALD F DILLON   |                                       | Payroll                                       |  |  |
|  | 110 ST EUSTACIUS LANE   | \$ 201,389                            | Noncash 🗔                                     |  |  |
|  | BAREFOOT BEACH, FL341348513   |                                       | Noncasn                                       |  |  |
|  | B/((E) 001 BE/(E)), 123 13 103 13                                     |                                       | (Complete Part II for noncash contributions ) |  |  |
| (a)  | (b)   | (c)                                   | (d)   |  |  |
| No.  | Name, address, and ZIP + 4  | Total contributions                   | Type of contribution                          |  |  |
|  |   |                                       | Person  |  |  |
| -  |   |                                       | Payroll                                       |  |  |
|  |   | \$                                    | Noncash                                       |  |  |
|  | -   |                                       |   |  |  |
|  |   |                                       | (Complete Part II for noncash contributions ) |  |  |
| (a)  | (b)   | (C)                                   | (d)   |  |  |
| No.  | Name, address, and ZIP + 4  | Total contributions                   | Type of contribution  Person                  |  |  |
| _  |   |                                       |   |  |  |
|  | -   |                                       | Payroll                                       |  |  |
|  |   | \$                                    | Noncash                                       |  |  |
|  |   |                                       | (Complete Part II for noncash contributions ) |  |  |
| (a)  | (b)   | (c)                                   | (d)   |  |  |
| No.  | Name, address, and ZIP + 4  | Total contributions                   | Type of contribution                          |  |  |
|  |   |                                       | Person  |  |  |
| •  |   |                                       | Payroll                                       |  |  |
|  |   | \$                                    | Noncash                                       |  |  |
|  |   |                                       | (Complete Part II for noncash                 |  |  |
|  |   |                                       | contributions)                                |  |  |
| (a)<br>No.   | (b)<br>Name, address, and ZIP + 4                                     | (c)<br>Total contributions            | (d)<br>Type of contribution                   |  |  |
|  |   |                                       | Person  |  |  |
| -  | -   |                                       | Payroll                                       |  |  |
|  |   | \$                                    | Noncash                                       |  |  |
|  |   |                                       | (Complete Part II for noncash contributions)  |  |  |
| (a)  | (b)   | (c)                                   | (d)   |  |  |
| No.  | Name, address, and ZIP + 4  | Total contributions                   | Type of contribution                          |  |  |
|  |   |                                       | Person  |  |  |
| -  |   |                                       | Payroll                                       |  |  |
|  |   | <u>\$</u>                             | Noncash                                       |  |  |
|  |   |                                       | (Complete Part II for noncash                 |  |  |
|  |   |                                       | contributions )                               |  |  |

| Schedule B (Forr                       | n 990, 990-EZ, or 990-PF) (2016)   |  | Page <b>3</b>                 |  |
|--|--|--|-------------------------------|--|
| Name of organization DILLON FOUNDATION |  | Employer identification number           |                               |  |
| C/O JOSEPH KERR                        |  | 91-18                                    | 05591                         |  |
| Part II                                | Noncash Property   |  |                               |  |
| (a)<br>No.from Part I                  | (see instructions) Use duplicate copies of Part II if additional space is needed<br>(b)<br>Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d)<br>Date received          |  |
| 1                                      | SECURITIES   | \$ 201 389                               | 2016-11-30                    |  |
| (a)<br>No.from Part I                  | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (see instructions) | (d)<br>Date received          |  |
|  |  |  |                               |  |
| (a)<br>No.from Part I                  | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (see instructions) | (d)<br>Date received          |  |
|  |  | \$                                       |                               |  |
| (a)<br>No.from Part I                  | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (see instructions) | (d)<br>Date received          |  |
|  |  | \$                                       |                               |  |
| (a)<br>No.from Part I                  | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (see instructions) | (d)<br>Date received          |  |
|  |  | \$                                       |                               |  |
| (a)<br>No.from Part I                  | (b)<br>Description of noncash property given   | (c) FMV (or estimate) (see instructions) | (d)<br>Date received          |  |
|  |  | \$                                       |                               |  |
|  |  | Schedule B (Form 9                       | 90, 990-EZ, or 990-PF) (2016) |  |

| Schedule B (Form 9   | 990, 990-EZ, or 990-PF) (2016)           |  | Page <b>4</b>  |
|--|--|--|--|
| Name of organizat<br>DILLON FOUNDATIO<br>C/O JOSEPH KERRIG | N  |  | Employer identification number 91-1805591  |
| than \$1,<br>organiza<br>the year                          | 000 for the year from any one contributo | r. Complete columns (a) throu<br>of exclusively religious, charit<br>ctions.) ▶ \$ | d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for |
| (a)<br>No.from Part I                                      | (b) Purpose of gift                      | (c) Use of gift  | (d) Description of how gift is held  |
|  | Transferee's name, address, and          | (e) Transfer of gift   | Relationship of transferor to transferee   |
|  |  |  |  |
| (a)<br>No.from Part I                                      | (b) Purpose of gift                      | (c) Use of gift  | (d) Description of how gift is held  |
|  | Transferee's name, address, and          | (e) Transfer of gift ZIP 4 F   | Relationship of transferor to transferee   |
| (a)<br>No.from Part I                                      | (b) Purpose of gift                      | (c) Use of gift  | (d) Description of how gift is held  |
|  | Transferee's name, address, and          | (e) Transfer of gift ZIP 4   | Relationship of transferor to transferee   |
|  |  |  |  |
| (a)<br>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          | ` ,  | Relationship of transferor to transferee   |
|  |  |  |  |

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