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## Form 990-PF

## Return of Private Foundation

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

OMB No 1545-0052 **2016** 

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

Open to Public Inspection

Fo	calen	dar year 2016 or tax year beginning $06/01/16$ ,	and ending 05/3	31/17			
		pundation			A Empl	oyer identification number	
		en Family Charitable Foundati	ion				
		Marc Mangen			06	-1519384	
		nd street (or P O box number if mail is not delivered to street address)	F	toom/suite		phone number (see instruction	ns)
_		East Melanie Drive			86	0-426-9581	
		n, state or province, country, and ZIP or foreign postal code  Preek AZ 85331			C If exe	mption application is pending	, check here
			- <del></del>		}	· · · · · · · · · · · · · · · · · · ·	· -
G	Check		rn of a former public c	harity	D 1 F	oreign organizations check h	ere •
		Final return Amended				oreign organizations meeting	r ·
		X Address change Name cha			85	5% test, check here and attack	h computation
H	Check	type of organization. X Section 501(c)(3) exempt private	foundation		E If priv	ate foundation status was teri	minated under
	Sectio	n 4947(a)(1) nonexempt charitable trust Other taxab	le private foundation	· · · · · · · · · · · · · · · · · · ·	section	on 507(b)(1)(A), check here	<b>&gt;</b>
I F	air ma	rket value of all assets at J Accounting method	X Cash Acc	crual	F If the	foundation is in a 60-month te	ermination
e	nd of y	ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check h	nere ►
	ne 16)	▶ \$ 1,038,012 (Part I, column (d) must	be on cash basis )				
i, P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net inv		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)			N. 353	\$ 2 E S	(CEST DESIS ONLY)
	2	Check ► X if the foundation is <b>not</b> required to attach Sch B	48 14		<del>`</del> ;		
	3	interest on savings and temporary cash investments	4,133		<u>*</u> 3	4,133	* * * * * * * * * * * * * * * * * * * *
	4	Dividends and interest from securities	23,739		23,739		<del> </del>
	5a	Gross rents		<del> </del>	,		3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
4	b	Net rental income or (loss)	2 A. N. C.	12 , 14	·		
ž	6a	Net gain or (loss) from sale of assets not on line 10 Stmt 1	21,378		74.74 A		** * * * * * * * * * * * * * * * * * * *
Revenue	b	Gross sales price for all assets on line 6a 257, 255		1 2, 2,			
é	7	Capital gain net income (from Part IV, line 2)	,* , ,	<u> </u>	461		7.4 ** * * * * *
4	8	Net short-term capital gain	27 50 110	3- 3, 3	, )	0.	
	9	Income modifications		\$ . ts.	, wy .		
	10a			*	3 × 4(x - x)		7 - 4 . 7
	b	Gross sales less returns and allowances  Less Cost of goods sold		2 3 3	*		<del></del>
	C	Gross profit or (loss) (attach schedule)	y** ** * * * * * * * * * * * * * * *	* 34 3	·		<del></del>
	11	Other income (attach schedule)	<del></del>	- · · · · · · · · · · · · · · · · · · ·			
	12	Total. Add lines 1 through 11	49,250	<del>                                     </del>	24,203	27,872	
	13		49,230	<del></del>	24,203	21,012	
penses	ľ	Compensation of officers, directors, trustees, etc		<del> </del>			<del></del>
ns	14	Other employee salaries and wages  Pension plans, employee benefits					
	l						/FD
ΞЩ	16a	Legal fees (attach schedule)  Accounting fees (attach schedule)  Stmt 2	1,824			RECE	INFO
9	b	Accounting fees (attach schedule) Stmt 2 Other professional fees (attach schedule)	1,024				
a E	C 47	, ,		<u> </u>		AUG 7	1 2017   3
štr	17	Interest Taxes (attach schedule) (see instructions) Stmt 3	126	<del> </del>		AUG 2	
. <u>:</u>	18	, , , , ,	120			000	N, UT
! <u>E</u>	19	Depreciation (attach schedule) and depletion				000	11/1
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	20	Occupancy					
Operating and Administrative Ex	21	Travel, conferences, and meetings					<del></del>
ğ	22	Printing and publications Other expenses (att sch) Stmt 4	10 040		0.450		
ng	23	· · · · · ·	12,242	ļ <u>-</u>	0,458		<del></del>
# C	24	Total operating and administrative expenses.	14 100		0.450	٨	
ğ c	25	Add lines 13 through 23	14,192		.0,458	0	0
ŏ	25	Contributions, gifts, grants paid	50,000		0.450		50,000
	26	Total expenses and disbursements. Add lines 24 and 25	64,192	1.4	0,458	0	50,000
	27	Subtract line 26 from line 12	14 040	_	1		*
	a	Excess of revenue over expenses and disbursements	-14,942		3 745		
	b	Net investment income (if negative, enter -0-)		<u> </u>	.3,745	27 872	
		ACCUSED BELLDCOME (It headstyle Anter alla)			ı	<i>&gt;   \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	

	orm 990	-Pr (2016) Manges Lamily Challeable Foundation	Beginning of year	1	End (	of vear
المسا	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Valu		(c) Fair Market Value
_	1	Cash – non-interest-bearing				
٠	2	Savings and temporary cash investments	46,050		,970	16,97
	3	Accounts receivable ▶	annua a seducirament annun menten ir fin	المنظمة المستعدد	-	, '
	l	Less: allowance for doubtful accounts ▶		L		
•	4	Pledges receivable ▶	منسف مسلم مسلم	**, **, **, **, **, **, **, **, **, **,		Marian , in in
	Ì	Less. allowance for doubtful accounts ▶		<u>                                     </u>		
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other		}		
	}	disqualified persons (attach schedule) (see		ł		İ
	}	instructions)		{		}
	7	Other notes and loans receivable (att. schedule)			S (2)	4 44 44 44
	1	Less allowance for doubtful accounts ▶ 0		I was a state on and a bandium.		Manual was as a second
••	8	Inventories for sale or use	<del> </del>			<del> </del>
Assets	9	Prepaid expenses and deferred charges	<del> </del>	<u> </u>		<del>                                     </del>
155	10a	Investments – U S and state government obligations (attach schedule)				<del> </del>
_	b	Investments – corporate stock (attach schedule)  See Stmt 5	623,891	638	,029	1,021,033
	1	Investments – corporate bonds (attach schedule)				-/02-/00-
	C 44	Investments – land, buildings, and equipment basis			\$ 20p. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	gn.,* 1, 11 1, 2
	11	Less accumulated depreciation (attach sch.)	1. 25 St. W. Shanda Bran	. C. Sa. Landin	، هم شد	The state of the second of the second
	1 40			<del></del>		<del> </del>
	12	Investments – mortgage loans	ļ <del></del>	<del> </del>		
	13	Investments – other (attach schedule)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	***	<del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </del>	<del> </del>
	14	Land, buildings, and equipment basis		er wie the . I will will w		Maria Maria de Maria
	4-	Less accumulated depreciation (attach sch.)		<del></del>		<del> </del>
i	15	Other assets (describe )				
Ì	16	Total assets (to be completed by all filers – see the	669,941	654,	000	1 020 010
$\dashv$	4=	instructions. Also, see page 1, item I)	009,941	054,	999	1,038,012
	17	Accounts payable and accrued expenses				
s	18	Grants payable				
ţ.	19	Deferred revenue				1 2 1 1 1 1 1 1 1
悥	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)	<u> </u>			
_{	22	Other liabilities (describe > )		<del></del>		
$\dashv$	_23	Total liabilities (add lines 17 through 22)	0	<del></del>	0	
ļ		Foundations that follow SFAS 117, check here				
es		and complete lines 24 through 26 and lines 30 and 31.				
일	24	Unrestricted	ļ			
ह्य	25	Temporarily restricted	ļ			
빙	26	Permanently restricted	ļ			
S		Foundations that do not follow SFAS 117, check here			1	
Net Assets or Fund Balances		and complete lines 27 through 31.			1	
S	27	Capital stock, trust principal, or current funds	ļ	<del> </del>		
힗	28	Paid-in or capital surplus, or land, bldg., and equipment fund		· · · · · · · · · · · · · · · · · · ·		
Asi	29	Retained earnings, accumulated income, endowment, or other funds	669,941	654,		
ᇹ	30	Total net assets or fund balances (see instructions)	669,941	654,	999	
Z	31	Total liabilities and net assets/fund balances (see	Ì		Ì	
┙		instructions)	669,941	654,	999	<u> </u>
	Part II	<del></del>		<del></del>	<del></del>	
1	Total	net assets or fund balances at beginning of year – Part II, column (a), line 30 (mus	t agree with		}	
	end-o	f-year figure reported on prior year's return)		[	_1	669,941
2	Enter	amount from Part I, line 27a			2	-14,942
3	Other	ıncreases not included in line 2 (itemize) ▶			3	
4	Add I	nes 1, 2, and 3			4	654,999
5	Decre	ases not included in line 2 (itemize) ▶			_5_	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b	), line 30		6	654,999

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

8 Enter qualifying distributions from Part XII, line 4

		00-1319364						Page 4
	art VI , Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	or 4948 – see instruc	tions	}				
1a		r "N/A" on line 1			١,	,	~	, ,
	Date of ruling or determination letter (attach copy of letter if necessar	ary—see instructions	)	`		·		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			1_1_	}			137
	here ▶ X and enter 1% of Part I, line 27b		j	*	13. 1 3		` `	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	of	٢	ه مد	المستشر	``````````````````````````````````````		
	Part I, line 12, col (b)			}	1			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Other	ers enter -0-)		2_				0
3	Add lines 1 and 2			_3_				137
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Other	ers enter -0-)		4_				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			5 ,				137
6	Credits/Payments	1			. 3	÷ ~	( 3	^
а	2016 estimated tax payments and 2015 overpayment credited to 2016	<del> </del>		8 . s		· · · · · · · ·		4 3
b	Exempt foreign organizations – tax withheld at source	<del> </del>		7 J	, , ,	» ` بر، ه		,s.* *
С	Tax paid with application for extension of time to file (Form 8868)  6c	<del></del>		1 300	, , , ,	**************************************	· . &	
_d	Backup withholding erroneously withheld 6d	<del></del>		اسم کسد	223	~~ · · ·		
7	Total credits and payments Add lines 6a through 6d			7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach	ed		8				100
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9				137
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>5</b> 6		10				
11	Enter the amount of line 10 to be Credited to 2017 estimated tax	Refunded	<u> </u>	11				
	rt VII-A. Statements Regarding Activities	to an analysis				185	1,4	Τ
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisla	tion or aid it					Yes	No X
_	participate or intervene in any political campaign?	/***				1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	(see				4		
	Instructions for the definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of a	any motoriala				1b	<del> </del>	X
	published or distributed by the foundation in connection with the activities	any matemats					* * *	
^	Did the foundation file Form 1120-POL for this year?					1c	. <i>"</i> !	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the ye	or				)»	2 3	
u	(1) On the foundation ▶ \$ (2) On foundation managers ▶					,		`
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditur			_			* 1	* ¢
·	on foundation managers > \$	e lax imposed				3×		< " <
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	32				2	`_ &	X
_	If "Yes," attach a detailed description of the activities					-	~ ~	* 7
3	Has the foundation made any changes, not previously reported to the IRS, in its governing ins	trument, articles of				ر پر	, , ,	1
-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the					3	mla use .	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	5				4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			1	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					5		X
	If "Yes," attach the statement required by General Instruction T				į	1	£ /	* .
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	г					4	, °,
	By language in the governing instrument, or						143 18 4	
	• By state legislation that effectively amends the governing instrument so that no mandatory d	irections that				* * * *	1.7	to '''
	conflict with the state law remain in the governing instrument?					6_	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comple	te Part II, col (c), and	Part X	(V		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	<b>&gt;</b>				. «	` - ]	· ~
	CT					,	y5 1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	rney General				٠,. اعتمار	aa	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation				ĺ	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section	on 4942(j)(3) or				المدائمة	}	
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Pa	art XIV)? If "Yes,"					ļ	
	complete Part XIV				ļ	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	ıle lıstıng their				-		
	names and addresses	···				10		X
					Fo	om 99	u-PF	(2016)

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?

X

X

4a

4h

Form 990-PF (2016) Mangen Fam.					Page
Part VII-B Statements Rega	rding Activities for Which F	orm 4720 May Be F	Required (con	tinued)	·
5a During the year did the foundation pay	y or incur any amount to		-		
<ol><li>Carry on propaganda, or otherwis</li></ol>	e attempt to influence legislation (se	ction 4945(e))?		Yes 🏻 No	
(2) Influence the outcome of any spec	cific public election (see section 495	5), or to carry on,			
directly or indirectly, any voter reg	istration drive?			Yes X No	
(3) Provide a grant to an individual fo	r travel, study, or other similar purpo-	ses?		Yes X No	1. 1.
(4) Provide a grant to an organization	i other than a charitable, etc , organiz	zation described in		<u></u>	
section 4945(d)(4)(A)? (see instru	ctions)			Yes 🗓 No	
(5) Provide for any purpose other that	=	ary, or educational	·	<u></u>	
purposes, or for the prevention of	·			Yes 🗓 No	
b If any answer is "Yes" to 5a(1)–(5), did	-	•	scribed in	(-	
Regulations section 53 4945 or in a cu		•		N/A	5b
Organizations relying on a current not				▶ [_]	
c If the answer is "Yes" to question 5a(4		on from the tax	·- /- □	<u> </u>	
because it maintained expenditure res			N/A 🗌	Yes No	
If "Yes," attach the statement required	• •				
6a Did the foundation, during the year, re	ceive any funds, directly or indirectly	, to pay premiums		<u></u>	
on a personal benefit contract?			LJ	res 🗓 No	
b Did the foundation, during the year, pa	ly premiums, directly or indirectly, on	a personal benefit contra	ct?		6b X
If "Yes" to 6b, file Form 8870			r .	. 🖘	
7a At any time during the tax year, was th	• • •			res X No	
b If "Yes," did the foundation receive any				N/A	7b
,	Officers, Directors, Trustee	s, Foundation Man	agers, Hignly	Paid Employ	ees,
and Contractors  List all officers, directors, trustees, for	oundation managers and their core	mpaneation /ean instruc	tione)		
List all Officers, directors, trustees, it	Auton managers and their con	inpensation (see instruc		(d) Contributions to	<del></del>
(a) Name ar	od addrese	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit	(e) Expense account
(u) Hame a	14 254/555	devoted to position	enter -0-)	plans and deferred compensation	other allowances
Marc Mangen	Cave Creek	Trustee		55	<del> </del>
4703 East Melanie Drive	AZ 85331	0.00	o	o	,
					<del> </del>
					1
				<del> </del>	<del> </del>
					1
					1
					1
2 Compensation of five highest-paid ( "NONE."	employees (other than those inclu	ided on line 1 – see inst	ructions). If non-	e, enter	
					<del></del>
		(h) Title, and average		(d) Contributions to	
(a) Name and address of each employe	e paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	
	e paid more than \$50,000		(c) Compensation		(e) Expense account other allowances
(a) Name and address of each employe	ee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
(a) Name and address of each employe	эе paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
(a) Name and address of each employs	эе paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
(a) Name and address of each employe	эе paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
(a) Name and address of each employe	ee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
(a) Name and address of each employe	e paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
(a) Name and address of each employe	ee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
(a) Name and address of each employe	ee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
(a) Name and address of each employe	ee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	
	ee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other allowances

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Part VIII Information About Officers, Directors, Trustees, Foundation	flanagers, Highly Paid E	mployee	s,
and Contractors (continued)  3 Five highest-paid independent contractors for professional services (see instructions).	If none enter "NONE "		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	lc lc	) Compensation
NONE	(5, 1),2 5 5 5 5 5		Compensation
	_		
	<del></del>		<del></del>
		}	
	<del></del>		
Total number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·		
Part X-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the organizations and other beneficiaries served, conferences convened, research papers produced, etc.	umber of		Expenses
1 N/A			
		}	
		<b></b>	
2			
3		<del> </del>	
		ĺ	
			<del></del>
4	I		
Part IX-B Summary of Program-Related Investments (see instructions)		<del></del>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Α	mount
1 N/A			
2		l	
All other program-related investments. See instructions		<del></del>	
3			
	<del></del>		
Total. Add lines 1 through 3	<u> </u>		000 PF
		Form	990-PF (2016)

	m 990-PF (2016) Mangen Family Charitable Foundation 06-1519384		Page
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn foun	dations,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1 .	
	purposes	\\	
а	Average monthly fair market value of securities	1a	977,488
þ	Average of monthly cash balances	1b	31,515
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,009,003
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	in Such	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,009,003
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see	1	-
	instructions)	4	15,135
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	993,868
6	Minimum investment return. Enter 5% of line 5	6	49,693
_ Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ▶ and do not complete this part )	founda	tions
-		11	49,693
1	Minimum investment return from Part X, line 6  Tax on investment income for 2016 from Part VI, line 5	** **	49,093
2a		6.33	
b	Income tax for 2016 (This does not include the tax from Part VI)		127
C	Add lines 2a and 2b	2c	137
3	Distributable amount before adjustments Subtract line 2c from line 1	3	49,556
4	Recoveries of amounts treated as qualifying distributions	4	40 556
5	Add lines 3 and 4	5	49,556
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	49,556
		<del></del>	40,000
	Qualifying Distributions (see instructions)	<del></del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	*	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	50,000
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	, M	
а	Suitability 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	50,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	137
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,863

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

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

1,302

Excess from 2015
Excess from 2016

Part XV Supplementary Information (co	ontinued)			
Part XV Supplementary Information (co 3 Grants and Contributions Paid During the		Future Payment	<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Various Charities				
				50,0
				50,0
			}	
			1	
		1		
			}	
		}		
			}	
1				
		1		
Total		<u> </u>	<b>▶</b> 3a	50,00
b Approved for future payment		T	7 3 1	20,00
N/A				
		1		
				•
		1	<del></del>	
Total			▶ 3b	

_	Part XVI-A ter gross am	ounts unless otherwise indicated		business income	Excluded	by section 512, 513, or 514	(0)
			(a)	(b)	(c)	(d)	(e) Related or exempt
1	Program se	rvice revenue.	Business code	Amount	Exclusion	Amount	function income (See instructions)
•	•	Trice revenue.					· · · · · · · · · · · · · · · · · · ·
					1		<del></del>
	f		_				
	g Fees ar	nd contracts from government agencies			1		
		dues and assessments	<u> </u>		11		
3		savings and temporary cash investments	<del></del>	<del></del>	14	4,133	<del></del>
4		nd interest from securities	\-\(\frac{1}{2}\)	<del></del>	14	23,739	
5		come or (loss) from real estate	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
		anced property	<del> </del>	<del></del>			
_		t-financed property	<del> </del>	<del></del>	+		<del></del>
		come or (loss) from personal property			+		
_		tment income		<del></del>			21 250
	· ·	s) from sales of assets other than inventory or (loss) from special events	<del>  -</del>	<del></del>	+		21,378
		or (loss) from sales of inventory			+	<del></del>	<del></del>
		ue a	1		<del>                                     </del>	<del></del>	
• •			-		+		
							<del></del>
				·	11		
				<del></del>	<del></del>		
	е		l l		1 1	í	
12	e	d columns (b), (d), and (e)	7 4 4		0 🖟	27,872	21,378
	eSubtotal Ad	d columns (b), (d), and (e) ine 12, columns (b), (d), and (e)	14 15		0 🖟	27,872	21,378 49,250
13 Se	e Subtotal Ad Total. Add l e worksheet	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )	· · · · · · · · · · · · · · · · · · ·			13	
13 Se F	Subtotal Ad Total. Add I e worksheet art*XVI-B	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations ) Relationship of Activities to the A	Accomplishme	nt of Exempt F	urpose	13 S	
13 Se F	eSubtotal Ad Total. Add I e worksheet Part*XVI-B	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations ) Relationship of Activities to the A	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add I e worksheet Part*XVI-B	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
13 Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250
Se F	eSubtotal Ad Total. Add l e worksheet Part∗XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations )  Relationship of Activities to the A  Explain below how each activity for which incom	Accomplishme	nt of Exempt F	urposes	13s	49,250

Form 990-PF (2016)

Part	XVII	Exempt Organiz	_	ransters to a	na Transactio	ons and Relationships i	with Noncharitat	)(e		
1 D	d the oras			ge in any of the fo	llowing with any o	ther organization described	<del></del>	T	Yes	No
	_			-	•	ction 527, relating to political			1.03	1.00
	ganization	• • • • • • • • • • • • • • • • • • • •	). India 3001	on our (o)(o) orga	meanons, or in sec	Storr ozr, relating to position		$\frac{1}{1}$	l	1
	-	om the reporting found	lation to a ni	oncharitable exem	npt organization of			ì		],
	) Cash			0.,0	.p. 4.9424.6 0.			1a(1)		X
	) Other a	ssets						1a(2)		X
•	ther transa							J ,	, , , , ,	1
		f assets to a noncharita	able exemnt	organization				1b(1)	· ·-	X
•	•	ses of assets from a no	•	_	tion			1b(2)		X
	•	of facilities, equipment,						1b(3)	<b></b>	X
•	•	rsement arrangements						1b(4)		X
	-	r loan guarantees						1b(5)		x
	-	ance of services or me	embership o	r fundraising solic	citations			1b(6)		X
• •	•	acilities, equipment, ma	•	•				1c		X
d If i	he answe	r to any of the above is	s "Yes," com	plete the following	g schedule Colum	in (b) should always show the f	aır market			
						he foundation received less that				
		=	_		_	he goods, other assets, or sen				
	ine no	(b) Amount involved		ne of noncharitable exe			, transactions, and sharing ar	rangeme	nts	
N/A										
				<del></del>	<del></del>					
					<del></del>		<del>~ </del>			
					<del> </del>					
				<del></del>	·		<del></del>			
					<del> </del>	 	- <del></del>			
						 <del> </del>	···			
						<del></del>	<del> </del>			
						<del></del>				
		<del></del>				<del></del>				
			L			<del></del>				
2alst	he founda	ation directly or indirect	lly affiliated v	with, or related to,	one or more tax-e	exempt organizations				
des	scribed in	section 501(c) of the C	Code (other i	than section 501(	c)(3)) or in section	527?		Ye	s X	No
b_lf "\	Yes," com	plete the following sch	edule	<del>,</del>	<del></del>		<del></del>			
		Name of organization	<del></del>	(b) Type of	organization	(c) Desc	ription of relationship			
N/2	<u> </u>	<del> </del>		<u> </u>						
				<del></del>						
				<del> </del>						
		<del></del>				<del></del>				
<del></del>	I Inder pens	alias of popular I declare that	I have evamine	ad this return, including	accompanying schedu	les and statements, and to the best of n	ny knowledne and halief it is	Inve		
Ī						ch preparer has any knowledge				<del></del>
							May the IRS discu			Ì
ign		, /	•		_		(see instructions)?			No
lere		1-1			S	-15-17 Tru				لــــــــــــــــــــــــــــــــــــــ
1	Sannat	ture of officer or trustee			late	Title	stee			
	- Grynat	Section of the sectio			ate	<del></del>	<del></del>			
	PrintTyp	e preparer's name			Preparer's agnature	100	Date		Check	
aid	John	J. LaBanca, C	מס		11/1/2	1 Banen Cl	2 7/0/	ا 🖍	self-empl	oyed
reparer		<del> </del>		anca, CP	June of	our wines	DOM BOO	568	923	
se Only	Firm's na		vine P		<del>v</del>			1360		
	Firm's ad			06460-	7785			-874		

06-1519384	Federal	Federal Statements		
State	Statement 1 - Form 990-PF	- Form 990-PF, Part I, Line 6a - Sale of Assets	of Assets	
Description	How Received	w ived		
g	Date Sale Sold Price	Cost	Expense Depreciation	Net on Gain / Loss
US Trust Various Vari	Purchase \$ 256,794 \$ \$ 256,794 \$	1se 235,877 \$ 235,877 \$ 235,877 \$	\ \s\ \s\ \	\$ 20,917
Statement 2	- Form 990-PF,	Part I, Line 16b - Accounting Fees	unting Fees	
Description Indirect Accounting Fees	Total 1,	Net Investment	Adjusted Net	Charitable Purpose
Total	\$ 1,824	O.	O	O
	Statement 3 - Form 99	Form 990-PF, Part I, Line 18 - Taxes	Taxes	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Taxes Total	\$ 126	\$\sqrt{0}\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$ \$	0 N
State	Statement 4 - Form 990-PF	n 990-PF, Part I, Line 23 - Other Expenses	r Expenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses Investment Fees Total	\$ 12,242	\$ 10,458	s, s	\$ \$
				4-1

		Fair Market Value	\$ 1,021,033 \$ 1,021,033
	Investments	Basis of Valuation	Cost
ıts	orporate Stock	End of Year	638,029
Federal Statements	Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	Beginning of Year	w w
Fec	5 - Form 990-PF, F	Be	w w
	Statement	Description	
06-1519384			US Trust Total

6-1519384	Federal Stateme	ents	
Form 990-PF, Part XV, Lin	e 1a - Managers Who	Contributed Over	· 2% or \$5,000
Name of Mana	ager	Amo	ount
arc Mangen		\$	
Total		\$	0