

Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

2015

Open to Public Inspection

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.

For calendar year 2015 or tax year beginning **07/01/15**, and ending **06/30/16**

Name of foundation PLUMMER MEMORIAL FOUNDATION		A Employer identification number 01-0211803
Number and street (or P.O. box number if mail is not delivered to street address) 11 MAIN STREET	Room/suite	B Telephone number (see instructions) 207-924-7359
City or town, state or province, country and ZIP or foreign postal code DEXTER ME 04930		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 631,478 (Part I, column (d) must be on cash basis)	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part 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 investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	12,739	12,739		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	50,860			
	b Gross sales price for all assets on line 6a	152,660			
	7 Capital gain net income (from Part IV, line 2)		50,860		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	63,599	63,599	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule) SEE STMT 1	685	343		342
	b Accounting fees (attach schedule) STMT 2	653	327		326
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) STMT 3	823			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications	49	25		24
	23 Other expenses (att sch) STMT 4	215	74		141
	24 Total operating and administrative expenses. Add lines 13 through 23	2,425	769	0	833
25 Contributions, gifts, grants paid	52,749			52,749	
26 Total expenses and disbursements. Add lines 24 and 25	55,174	769	0	53,582	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	8,425				
b Net investment income (if negative, enter -0-)		62,830			
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

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Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation DAVID NEAL PENNINGTON FOUNDATION		A Employer identification number 01-0684612	
Number and street (or P O box number if mail is not delivered to street address) 633 N BELARDO ROAD		Room/suite	B Telephone number (see instructions) (949) 760-6670
City or town, state or province, country, and ZIP or foreign postal code PALM SPRINGS, CA 92262			
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 260,103		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)			

Part I Analysis of Revenue and Expenses		Revenue and expenses per books		Net investment income		Adjusted net income		Disbursements for charitable purposes	
		(a)		(b)		(c)		(d) (cash basis only)	
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)		20,000					
	2	Check if the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments		30		30			
	4	Dividends and interest from securities		2,204		2,204			
	5a	Gross rents							
	b	Net rental income or (loss)							
	6a	Net gain or (loss) from sale of assets not on line 10		1,311					
	b	Gross sales price for all assets on line 6a		1,311					
	7	Capital gain net income (from Part IV, line 2)				1,311			
	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
Operating and Administrative Expenses	b	Less Cost of goods sold							
	c	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)		12		12			
	12	Total. Add lines 1 through 11		23,557		3,557			
	13	Compensation of officers, directors, trustees, etc		0		0		0	
	14	Other employee salaries and wages							
	15	Pension plans, employee benefits							
	16a	Legal fees (attach schedule).							
	b	Accounting fees (attach schedule).		250		250		0	
	c	Other professional fees (attach schedule)		2,178		2,178		0	
	17	Interest							
	18	Taxes (attach schedule) (see instructions)		42		42		0	
	19	Depreciation (attach schedule) and depletion							
	20	Occupancy							
	21	Travel, conferences, and meetings.							
	22	Printing and publications							
	23	Other expenses (attach schedule).							
	24	Total operating and administrative expenses.							
		Add lines 13 through 23		2,470		2,470		0	
	25	Contributions, gifts, grants paid		13,608				13,608	
	26	Total expenses and disbursements. Add lines 24 and 25		16,078		2,470		13,608	
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses and disbursements		7,479					
	b	Net investment income (if negative, enter -0-)				1,087			
	c	Adjusted net income (if negative, enter -0-)							

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For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation BSG FAMILY FOUNDATION		A Employer identification number 01-0713216	
Number and street (or P O box number if mail is not delivered to street address) 100 MONTICELLO AVE		B Telephone number (see instructions) (215) 668-2220	
City or town, state or province, country, and ZIP or foreign postal code ANNAPOLIS, MD 21401		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 944,744		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part 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))		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	0			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	6	6		
	4 Dividends and interest from securities	21,910	21,910		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-1,439			
	b Gross sales price for all assets on line 6a 454,021				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	20,477	21,916		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	3,300	3,300		0
	c Other professional fees (attach schedule)	10,285	10,285		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	380	380		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).				
	24 Total operating and administrative expenses. Add lines 13 through 23	13,965	13,965		0
	25 Contributions, gifts, grants paid	66,050			66,050
	26 Total expenses and disbursements. Add lines 24 and 25	80,015	13,965		66,050
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-59,538			
	b Net investment income (if negative, enter -0-)		7,951		
	c Adjusted net income (if negative, enter -0-) . . .				

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For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation The Salt Queen Foundation		A Employer identification number 01-0733312	
Number and street (or P O box number if mail is not delivered to street address) c/o E Werner 15 Broad St 2112		B Telephone number (see instructions) (917) 499-1029	
City or town, state or province, country, and ZIP or foreign postal code New York, NY 10005		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 10,224		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	5,450			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)		2		
	12 Total. Add lines 1 through 11	5,450	2		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	450			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.	480			
	22 Printing and publications				
	23 Other expenses (attach schedule).	3,148			
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	4,078	0		0
	25 Contributions, gifts, grants paid	0			0
	26 Total expenses and disbursements. Add lines 24 and 25	4,078	0		0
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,372			
	b Net investment income (if negative, enter -0-)		2		
	c Adjusted net income (if negative, enter -0-)				

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Name of foundation SPECTEMUR AGENDO INC		A Employer identification number 01-0751046	
Number and street (or P O box number if mail is not delivered to street address) 122 MARYLAND AVE NE		Room/suite	B Telephone number (see instructions) (202) 546-3732
City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20002		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 8,090,845		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	3,463	3,463		
	4 Dividends and interest from securities	457,603	457,603		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	18,047			
	b Gross sales price for all assets on line 6a 603,507				
	7 Capital gain net income (from Part IV, line 2) . . .		18,047		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	61,580	61,580		
	12 Total. Add lines 1 through 11	540,693	540,693		
	13 Compensation of officers, directors, trustees, etc	127,454	12,745		114,709
	14 Other employee salaries and wages	132,197	0		132,197
	15 Pension plans, employee benefits	67,100	2,714		64,386
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	27,200	5,440		19,040
	c Other professional fees (attach schedule)				
	17 Interest	930	930		0
	18 Taxes (attach schedule) (see instructions) . . .	21,314	2,055		19,259
	19 Depreciation (attach schedule) and depletion . . .	479	0		
	20 Occupancy	1,600	0		1,600
	21 Travel, conferences, and meetings.	13,113	0		13,113
	22 Printing and publications				
	23 Other expenses (attach schedule).	108,444	52,560		55,884
	24 Total operating and administrative expenses. Add lines 13 through 23	499,831	76,444		420,188
	25 Contributions, gifts, grants paid	959,751			959,751
	26 Total expenses and disbursements. Add lines 24 and 25	1,459,582	76,444		1,379,939
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-918,889			
	b Net investment income (if negative, enter -0-)		464,249		
	c Adjusted net income (if negative, enter -0-) . . .				

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Open to Public Inspection

For calendar year 2015 or tax year beginning , and ending

Name of foundation BRUNELLI FAMILY FOUNDATION		A Employer identification number 01-0769386
Number and street (or P O box number if mail is not delivered to street address) 1128 EDITH CIRCLE	Room/suite	B Telephone number (see instructions) 972-437-4846
City or town, state or province, country, and ZIP or foreign postal code RICHARDSON TX 75080		C If exemption application is pending, check here ▶ <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 351,619	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>

Part I Analysis of Revenue and Expenses		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	7,703	7,703		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	7,124			
	b Gross sales price for all assets on line 6a	45,632			
	7 Capital gain net income (from Part IV, line 2)		7,124		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	14,827	14,827	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	5,000	1,250		3,750
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) STMT 1	500	125		375
	c Other professional fees (attach schedule) STMT 2	4,770	4,770		
	17 Interest				
	18 Taxes (attach schedule) (see instructions) STMT 3	374	84		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	1,100	275		825
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	11,744	6,504	0	4,950
	25 Contributions, gifts, grants paid	20,638			20,638
26 Total expenses and disbursements. Add lines 24 and 25	32,382	6,504	0	25,588	
27 Subtract line 26 from line 12	-17,555				
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)		8,323			
c Adjusted net income (if negative, enter -0-)			0		

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OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 07-01-2014 , and ending 06-30-2015

Name of foundation THE HERITAGE FUND INC		A Employer identification number 01-0782316	
% HOWE D WHITMAN		B Telephone number (see instructions) (863) 688-1201	
Number and street (or P O box number if mail is not delivered to street address) 3067 Grasslands Drive		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code Lakeland, FL 33803		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input checked="" type="checkbox"/> \$ 1,252,718		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part 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 investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	0			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	14,870	14,870		
	4 Dividends and interest from securities.	6,504	6,504		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . .				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	21,374	21,374		
	13 Compensation of officers, directors, trustees, etc	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,500	1,500	0	0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	198	198		
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	1,698	1,698	0	0
	25 Contributions, gifts, grants paid	71,500			71,500
	26 Total expenses and disbursements. Add lines 24 and 25	73,198	1,698	0	71,500
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-51,824			
	b Net investment income (if negative, enter -0-)		19,676		
	c Adjusted net income (if negative, enter -0-)				

Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation REVISION MINISTRIES		A Employer identification number 01-0801962	
Number and street (or P O box number if mail is not delivered to street address) 3910 AIRLINE ROAD		B Telephone number (see instructions) (404) 788-2028	
City or town, state or province, country, and ZIP or foreign postal code MCDONOUGH, GA 30252		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 1,789	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	15,500			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . .				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	15,500	0		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	525			525
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	343			343
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.	415			415
	22 Printing and publications				
	23 Other expenses (attach schedule).	16,580			16,580
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	17,863	0		17,863
	25 Contributions, gifts, grants paid	0			0
	26 Total expenses and disbursements. Add lines 24 and 25	17,863	0		17,863
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-2,363			
	b Net investment income (if negative, enter -0-)		0		
	c Adjusted net income (if negative, enter -0-) . . .				

Form 990-PF

Department of the Treasury
Internal Revenue Service

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

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OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 07-01-2015, and ending 06-30-2016

Name of foundation GARIPPA FOUNDATION INC		A Employer identification number 01-0846118	
Number and street (or P O box number if mail is not delivered to street address) 925 ADMIRALTY PARADE		B Telephone number (see instructions) (239) 649-7710	
City or town, state or province, country, and ZIP or foreign postal code NAPLES, FL 34102		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 758,438	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	157,190			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	57	57		
	4 Dividends and interest from securities	8,527	8,527		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-3,332			
	b Gross sales price for all assets on line 6a 125,320				
	7 Capital gain net income (from Part IV, line 2) . . .		33,482		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	162,442	42,066		
	13 Compensation of officers, directors, trustees, etc	8,250	8,250		
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	600	600		
	19 Depreciation (attach schedule) and depletion . . .	837	837		
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	25,397	25,397		
	24 Total operating and administrative expenses. Add lines 13 through 23	35,084	35,084		0
	25 Contributions, gifts, grants paid	166,450			166,450
	26 Total expenses and disbursements. Add lines 24 and 25	201,534	35,084		166,450
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-39,092			
	b Net investment income (if negative, enter -0-)		6,982		
	c Adjusted net income (if negative, enter -0-) . . .				

Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation BETTY & JAMES MUNS FOUNDATION		A Employer identification number 01-0885745	
Number and street (or P O box number if mail is not delivered to street address) 6301 PRESTON ROAD NO 700		B Telephone number (see instructions) (972) 403-7676	
City or town, state or province, country, and ZIP or foreign postal code PLANO, TX 75024		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 2,551,606		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	231,703			
	2 Check ▶ <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	59,483	59,483		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	3,825			
	b Gross sales price for all assets on line 6a 275,522				
	7 Capital gain net income (from Part IV, line 2)		3,825		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total.Add lines 1 through 11	295,011	63,308		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	1,600	1,600		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	435	0		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	10,216	10,216		0
	24 Total operating and administrative expenses. Add lines 13 through 23	12,251	11,816		0
	25 Contributions, gifts, grants paid	120,000			120,000
	26 Total expenses and disbursements.Add lines 24 and 25	132,251	11,816		120,000
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	162,760			
	b Net investment income (if negative, enter -0-)		51,492		
	c Adjusted net income(if negative, enter -0-)				

Form

990-PF

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Return of Private Foundation

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OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation SWESTKA FAMILY FOUNDATION		A Employer identification number 01-0904291	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 282		B Telephone number (see instructions) (563) 569-8240	
City or town, state or province, country, and ZIP or foreign postal code PROTIVIN, IA 52163		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 19,461		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,000			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	884	884	884	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	1,884	884	884	
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	5			5
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	3			3
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	8	0		8
	25 Contributions, gifts, grants paid	0			0
	26 Total expenses and disbursements. Add lines 24 and 25	8	0		8
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,876			
	b Net investment income (if negative, enter -0-)		884		
	c Adjusted net income (if negative, enter -0-)			884	

Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation THE PETE & RUTH LESLIE FOUNDATION		A Employer identification number 01-0931287	
Number and street (or P O box number if mail is not delivered to street address) BOX 871		B Telephone number (see instructions) (580) 327-1609	
City or town, state or province, country, and ZIP or foreign postal code ALVA, OK 73717		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 551,652		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	495,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	541	541		
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	495,541	541		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	1,746	0		1,746
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	3	0		3
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	1,749	0		1,749
	25 Contributions, gifts, grants paid	100,000			100,000
	26 Total expenses and disbursements. Add lines 24 and 25	101,749	0		101,749
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	393,792			
	b Net investment income (if negative, enter -0-)		541		
	c Adjusted net income (if negative, enter -0-) . . .				

Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**

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

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OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015 or tax year beginning

09/01, 2015, and ending

08/31, 2016

Name of foundation

JOSEPH L BARNUM TRUST U/W 10-0023600

Number and street (or P.O. box number if mail is not delivered to street address)

KEYBANK, 4900 TIEDEMAN RD. OH-01-49-0150

City or town, state or province, country, and ZIP or foreign postal code

BROOKLYN, OH 44144-2302

G Check all that apply:

☐

Initial return

☐

Final return

☐

Address change

☐

Initial return of a former public charity

☐

Amended return

☐

Name change

H Check type of organization:

☒

Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust☐

Other taxable private foundation

I Fair market value of all assets at

end of year (from Part II, col. (c), line

16) ▶ \$ 248,021.

J Accounting method:

☒

Cash

☐

Accrual

☐ Other (specify)

(Part I, column (d) must be on cash basis.)

A Employer identification number

01-6007099

B Telephone number (see instructions)

866-238-8650

C If exemption application is pending, check here. ▶ ☐D 1. Foreign organizations, check here. ▶ ☐2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐E If private foundation status was terminated under section 507(b)(1)(A), check here. ▶ ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. ▶ ☐**Part 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 investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)				
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	5,634.	5,634.		STMT 1
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	-5,430.			
b Gross sales price for all assets on line 6a	142,720.			
7 Capital gain net income (from Part IV, line 2)				
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less: Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	204.	5,634.		
13 Compensation of officers, directors, trustees, etc.	4,000.	3,000.		1,000.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule)	1,000.			1,000.
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions)	2,125.			
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings		NONE	NONE	
22 Printing and publications		NONE	NONE	
23 Other expenses (attach schedule)				
24 Total operating and administrative expenses. Add lines 13 through 23.	7,125.	3,000.	NONE	2,000.
25 Contributions, gifts, grants paid	3,136.			3,136.
26 Total expenses and disbursements. Add lines 24 and 25	10,261.	3,000.	NONE	5,136.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-10,057.			
b Net investment income (if negative, enter -0-)		2,634.		
c Adjusted net income (if negative, enter -0-)				

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Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 05-01-2015, and ending 04-30-2016

Name of foundation AVERILL GEORGE & FRANCES-TRUST		A Employer identification number 01-6011128	
Number and street (or P O box number if mail is not delivered to street address) P O BOX 1802		B Telephone number (see instructions) (888) 866-3275	
City or town, state or province, country, and ZIP or foreign postal code PROVIDENCE, RI 029011802		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input type="checkbox"/> Section 501(c)(3) exempt private foundation <input checked="" type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 876,119		J Accounting method <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part 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))		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	20,562	20,462		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	36,362			
	b Gross sales price for all assets on line 6a 125,289				
	7 Capital gain net income (from Part IV, line 2) . . .		36,362		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)		1		
	12 Total. Add lines 1 through 11	56,924	56,825		
	13 Compensation of officers, directors, trustees, etc	11,343	6,806		4,537
	14 Other employee salaries and wages		0	0	0
	15 Pension plans, employee benefits		0	0	
	16a Legal fees (attach schedule).				0
	b Accounting fees (attach schedule).	1,250	0	0	1,250
	c Other professional fees (attach schedule)				0
	17 Interest				0
	18 Taxes (attach schedule) (see instructions) . . .	591	266		0
	19 Depreciation (attach schedule) and depletion . .	0	0		
	20 Occupancy				
	21 Travel, conferences, and meetings.		0	0	
	22 Printing and publications		0	0	
	23 Other expenses (attach schedule).	200	269		
	24 Total operating and administrative expenses. Add lines 13 through 23	13,384	7,341	0	5,787
	25 Contributions, gifts, grants paid	39,996			39,996
	26 Total expenses and disbursements. Add lines 24 and 25	53,380	7,341	0	45,783
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	3,544			
	b Net investment income (if negative, enter -0-)		49,484		
	c Adjusted net income (if negative, enter -0-) . . .			0	

Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation Douglas A Thom Memorial Corporation		A Employer identification number 01-6019126	
Number and street (or P O box number if mail is not delivered to street address) P O Box 332		B Telephone number (see instructions) (207) 236-4333	
City or town, state or province, country, and ZIP or foreign postal code Camden, ME 04843		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input checked="" type="checkbox"/> \$ 452,593	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	8,211	8,211	8,211	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-423			
	b Gross sales price for all assets on line 6a 21,735				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain			61	
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	7,788	8,211	8,272	
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).				
	c Other professional fees (attach schedule)	3,184	1,250	1,934	1,934
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	41	41		
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	714		714	714
	24 Total operating and administrative expenses. Add lines 13 through 23	3,939	1,291	2,648	2,648
	25 Contributions, gifts, grants paid	0			0
	26 Total expenses and disbursements. Add lines 24 and 25	3,939	1,291	2,648	2,648
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	3,849			
	b Net investment income (if negative, enter -0-)		6,920		
	c Adjusted net income (if negative, enter -0-)			5,624	

Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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OMB No 1545-0052

2015

Open to Public Inspection






For calendar year 2015, or tax year beginning 05-01-2015, and ending 04-30-2016

Name of foundation SHELDON UNA E - TRUST		A Employer identification number 01-6019683	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 831041		Room/suite	B Telephone number (see instructions) (800) 357-7094
City or town, state or province, country, and ZIP or foreign postal code DALLAS, TX 752831041		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change	
H Check type of organization <input type="checkbox"/> Section 501(c)(3) exempt private foundation <input checked="" type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 113,626		J Accounting method <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	2,760	2,708		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-2,036			
	b Gross sales price for all assets on line 6a 27,958				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	82			
	12 Total. Add lines 1 through 11	806	2,708		
	13 Compensation of officers, directors, trustees, etc	2,366	1,420		947
	14 Other employee salaries and wages		0	0	0
	15 Pension plans, employee benefits		0	0	
	16a Legal fees (attach schedule).				0
	b Accounting fees (attach schedule).				
	c Other professional fees (attach schedule)				0
	17 Interest				0
	18 Taxes (attach schedule) (see instructions) . . .	75	75		0
	19 Depreciation (attach schedule) and depletion . . .	0	0		
	20 Occupancy				
	21 Travel, conferences, and meetings.		0	0	
	22 Printing and publications		0	0	
	23 Other expenses (attach schedule).	34	62		
	24 Total operating and administrative expenses. Add lines 13 through 23	2,475	1,557	0	947
	25 Contributions, gifts, grants paid	5,091			5,091
	26 Total expenses and disbursements. Add lines 24 and 25	7,566	1,557	0	6,038
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-6,760			
	b Net investment income (if negative, enter -0-)		1,151		
	c Adjusted net income (if negative, enter -0-) . . .			0	

For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation DENTAQUEST FOUNDATION INC		A Employer identification number 04-3265080	
Number and street (or P O box number if mail is not delivered to street address) 465 MEDFORD STREET		Room/suite	B Telephone number (see instructions) (617) 886-1700
City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02129		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 56,292,835	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part 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 investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	205,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	329,151	329,151		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	286,892			
	b Gross sales price for all assets on line 6a _____ 25,292,447				
	7 Capital gain net income (from Part IV, line 2) . . .		286,892		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	 180,517	180,517		
	12 Total. Add lines 1 through 11	1,001,560	796,560		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages	1,135,432	0		1,135,432
	15 Pension plans, employee benefits	208,811	0		208,811
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	 20,500	0		20,500
	c Other professional fees (attach schedule)	 2,821,343	86,219		2,735,124
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	 104,781	0		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy	1,222	0		1,222
	21 Travel, conferences, and meetings	1,830,709	0		1,830,709
	22 Printing and publications	19,719	0		19,719
	23 Other expenses (attach schedule)	 190,018	0		190,018
	24 Total operating and administrative expenses. Add lines 13 through 23	6,332,535	86,219		6,141,535
	25 Contributions, gifts, grants paid	15,379,056			15,379,056
	26 Total expenses and disbursements. Add lines 24 and 25	21,711,591	86,219		21,520,591
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-20,710,031			
	b Net investment income (if negative, enter -0-)		710,341		
c Adjusted net income (if negative, enter -0-) . . .					

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Form 990-PF

Department of the Treasury
Internal Revenue Service

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

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Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation
The Herbert & Nell Singer Foundation Inc

% Foundation Source

Number and street (or P O box number if mail is not delivered to street address)
Foundation Source 501 Silverside Rd

Room/suite

City or town, state or province, country, and ZIP or foreign postal code
Wilmington, DE 198091377

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 65,512,250

J Accounting method

☒ Cash

☐ Accrual

☐ Other (specify) (Part I, column (d) must be on cash basis)

A Employer identification number
13-3151548

B Telephone number (see instructions)
(800) 839-1754

C If exemption application is pending, check here

D 1. Foreign organizations, check here

2 Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part 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 investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	0		
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	46,083	46,083	
	4 Dividends and interest from securities	1,498,769	1,498,769	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	2,642,840		
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		2,642,840	
	8 Net short-term capital gain			
	9 Income modifications			
	10a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	1,309	1,309		
12 Total. Add lines 1 through 11	4,189,001	4,189,001		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	75,000		75,000
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits	5,738		5,738
	16a Legal fees (attach schedule)			
	b Accounting fees (attach schedule)			
	c Other professional fees (attach schedule)	374,380	374,380	
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	85,695	6,650	
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings	19,589		19,589
	22 Printing and publications			
	23 Other expenses (attach schedule)	109,318	484	108,834
	24 Total operating and administrative expenses. Add lines 13 through 23	669,720	381,514	209,161
25 Contributions, gifts, grants paid	2,936,579		2,936,579	
26 Total expenses and disbursements. Add lines 24 and 25	3,606,299	381,514	3,145,740	
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	582,702		
	b Net investment income (if negative, enter -0-)		3,807,487	
c Adjusted net income (if negative, enter -0-)				





For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

For calendar year 2018, or tax year beginning 07-01-2018, and ending 06-30-2019

Name of foundation E A MOOS FOUNDATION		A Employer identification number 13-3156433	
Number and street (or P O box number if mail is not delivered to street address) 19 MORaine PLACE		Room/suite	B Telephone number (see instructions) (973) 467-1459
City or town, state or province, country, and ZIP or foreign postal code SHORT HILLS, NJ 07078		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here ▶ <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 665,586	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>	

Part 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 investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	18			
	4 Dividends and interest from securities	13,671			
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 	62,516			
	b Gross sales price for all assets on line 6a _____ 259,380				
	7 Capital gain net income (from Part IV, line 2)		62,516		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	76,205	62,516		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule) 	4,791			
	17 Interest				
	18 Taxes (attach schedule) (see instructions) 	375			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) 	26			
	24 Total operating and administrative expenses. Add lines 13 through 23	5,192	0		0
	25 Contributions, gifts, grants paid	71,000			71,000
	26 Total expenses and disbursements. Add lines 24 and 25	76,192	0		71,000
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	13			
	b Net investment income (if negative, enter -0-)		62,516		
c Adjusted net income (if negative, enter -0-)					

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation COHEN FAMILY FOUNDATION INC C/O SHADE TREE KNAPP % ADRIENNE KNAPP SHADE TREE		A Employer identification number 13-3183001	
Number and street (or P O box number if mail is not delivered to street address) 268 BROADWAY 101B		Room/suite	B Telephone number (see instructions) (518) 290-9460
City or town, state or province, country, and ZIP or foreign postal code SARATOGA SPRINGS, NY 12866			
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 288,119		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)			

Part 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 investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	0			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	75	75		
	4 Dividends and interest from securities	1,779	1,779		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	158,687			
	b Gross sales price for all assets on line 6a	497,468			
	7 Capital gain net income (from Part IV, line 2)		158,687		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	9	9		
	12 Total. Add lines 1 through 11	160,550	160,550		
	13 Compensation of officers, directors, trustees, etc	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	4,301	4,301	0	0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	3,100			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	2,396	187		
	24 Total operating and administrative expenses. Add lines 13 through 23	9,797	4,488	0	0
	25 Contributions, gifts, grants paid	263,836			263,836
	26 Total expenses and disbursements. Add lines 24 and 25	273,633	4,488	0	263,836
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-113,083			
	b Net investment income (if negative, enter -0-)		156,062		
c Adjusted net income (if negative, enter -0-)					