

For calendar year **2015** or tax year beginning , **2015**, and ending , **20**

Name of foundation <b>SKEES FAMILY FOUNDATION</b>		<b>A Employer identification number</b> 83-0411607
Number and street (or P.O. box number if mail is not delivered to street address) <b>FOUNDATION SOURCE 501 SILVERSIDE RD</b>	Room/suite	<b>B Telephone number (see instructions)</b> (800) 839-1754
City or town, state or province, country, and ZIP or foreign postal code <b>WILMINGTON, DE 19809-1377</b>		<b>C</b> If exemption application is pending, check here. <input type="checkbox"/>
<b>G</b> Check all that apply:		<b>D</b> 1. Foreign organizations, check here. <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation. <input type="checkbox"/>
<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 checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here. <input type="checkbox"/>
<b>H</b> 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		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$ 2,321,205.</b>	<b>J</b> 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.)	

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)				
<b>Revenue</b>				
1 Contributions, gifts, grants, etc., received (attach schedule) . . . . .	25,000.			
2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B. . . . .				
3 Interest on savings and temporary cash investments . . . . .	452.	452.		
4 Dividends and interest from securities . . . . .	45,629.	45,629.		
5a Gross rents . . . . .				
b Net rental income or (loss) _____				
6a Net gain or (loss) from sale of assets not on line 10	85,179.			
b Gross sales price for all assets on line 6a <b>725,278.</b>				
7 Capital gain net income (from Part IV, line 2) . . . . .		85,179.		
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) <b>ATCH 1</b> . . . . .	5,114.			
12 <b>Total.</b> Add lines 1 through 11 . . . . .	161,374.	131,260.		
<b>Operating and Administrative Expenses</b>				
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) . . . . .				
c Other professional fees (attach schedule) <b>[ 2 ]</b> . . . . .	43,247.	8,247.		35,000.
17 Interest . . . . .				
18 Taxes (attach schedule) (see instructions) <b>[ 3 ]</b> . . . . .	1,103.	3.		
19 Depreciation (attach schedule) and depletion . . . . .				
20 Occupancy . . . . .				
21 Travel, conferences, and meetings . . . . .	5,276.			5,276.
22 Printing and publications . . . . .				
23 Other expenses (attach schedule) <b>ATCH 4</b> . . . . .	18,162.			18,085.
24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23. . . . .	67,788.	8,250.		58,361.
25 Contributions, gifts, grants paid . . . . .	181,483.			181,483.
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25 . . . . .	249,271.	8,250.		239,844.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements . . . . .	-87,897.			
b <b>Net investment income</b> (if negative, enter -0-) . . . . .		123,010.		
c <b>Adjusted net income</b> (if negative, enter -0-) . . . . .				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1	Cash - non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	71,069.	201,800.	201,800.
	3	Accounts receivable ▶ _____			
		Less: allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____			
		Less: allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____			
		Less: allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments - U.S. and state government obligations (attach schedule) . .			
	b	Investments - corporate stock (attach schedule) <b>ATCH 5</b> . . . . .	2,345,206.	2,071,541.	2,064,788.
	c	Investments - corporate bonds (attach schedule) . . . . .			
	11	Investments - land, buildings, and equipment: basis ▶ _____			
	Less: accumulated depreciation (attach schedule) ▶ _____				
12	Investments - mortgage loans . . . . .				
13	Investments - other (attach schedule) . . . . <b>ATCH 6</b> . . . .		25,037.	24,617.	
14	Land, buildings, and equipment: basis ▶ _____				
	Less: accumulated depreciation (attach schedule) ▶ _____				
15	Other assets (describe ▶ _____ <b>ATCH 7</b> )		30,000.	30,000.	
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .	2,416,275.	2,328,378.	2,321,205.	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons . .			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____ )			
23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0.	0.		
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> . <input type="checkbox"/>				
	<b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> . <input checked="" type="checkbox"/>				
	<b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .			
28	Paid-in or capital surplus, or land, bldg., and equipment fund . . . . .				
29	Retained earnings, accumulated income, endowment, or other funds . .	2,416,275.	2,328,378.		
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	2,416,275.	2,328,378.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	2,416,275.	2,328,378.		

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1 2,416,275.
2	Enter amount from Part I, line 27a . . . . .	2 -87,897.
3	Other increases not included in line 2 (itemize) ▶ _____	3
4	Add lines 1, 2, and 3 . . . . .	4 2,328,378.
5	Decreases 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 2,328,378.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b> SEE PART IV SCHEDULE					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2</b> Capital gain net income or (net capital loss) <span style="font-size: 2em;">{</span> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 <span style="font-size: 2em;">}</span>			<b>2</b>	85,179.	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 <span style="font-size: 2em;">}</span>			<b>3</b>	0.	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	208,276.	2,528,294.	0.082378
2013	123,992.	2,439,602.	0.050825
2012	223,048.	2,373,681.	0.093967
2011	160,921.	2,536,865.	0.063433
2010	138,908.	2,504,338.	0.055467
<b>2</b> Total of line 1, column (d)			<b>2</b> 0.346070
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0.069214
<b>4</b> Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			<b>4</b> 2,425,376.
<b>5</b> Multiply line 4 by line 3			<b>5</b> 167,870.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 1,230.
<b>7</b> Add lines 5 and 6			<b>7</b> 169,100.
<b>8</b> Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			<b>8</b> 269,844.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. . . . . Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b. . . . .	<b>1</b>	1,230.
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . . . .	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	1,230.
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . . . .	<b>4</b>	0.
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	1,230.
<b>6</b>	Credits/Payments:		
<b>a</b>	2015 estimated tax payments and 2014 overpayment credited to 2015. . . . .	<b>6a</b>	1,589.
<b>b</b>	Exempt foreign organizations - tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868). . . . .	<b>6c</b>	953.
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d . . . . .	<b>7</b>	2,542.
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached . . . . .	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	1,312.
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2016 estimated tax</b> <input type="checkbox"/> 1,312. <b>Refunded</b> <input type="checkbox"/> <b>11</b>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
<b>1b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		X
<b>1c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ _____ (2) On foundation managers. <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>		X
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
<b>4b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	X	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>		X
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	X	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CA, _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation</i> . . . . .	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV.</i> . . . . .		X
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .		X

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 covering questions about controlled entities, distributions, public inspection requirements, and foreign country interests.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with 3 columns: Question, Yes, No. Rows 1a-4b covering questions about disqualifying acts, taxes on failure to distribute income, and business enterprise interests.

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No  
 Organizations relying on a current notice regarding disaster assistance check here

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No  
 If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No  
 If "Yes" to 6b, file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 8		0.	0.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total number of other employees paid over \$50,000.**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, 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	(c) Compensation
NONE		0.
<b>Total number of others receiving over \$50,000 for professional services</b> . . . . . ▶		

**Part IX-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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount	
1 WCCN MISSION IS TO ASSIST LOW-INCOME LATIN AMERICAN ENTREPRENEURS BY SUSTAINING PARTNERSHIPS WITH MICROFINANCE INSITITUTIONS & FAIR TRADE AGRICULTURE ORGANIZATIONS	30,000.	
2		
All other program-related investments. See instructions.		
3 NONE		
<b>Total.</b> Add lines 1 through 3 . . . . . ▶		30,000.

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	2,355,561.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	82,673.
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	24,077.
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	2,462,311.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	2,462,311.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	36,935.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	2,425,376.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	121,269.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	121,269.
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5 . . . . .	<b>2a</b>	1,230.
<b>b</b>	Income tax for 2015. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	1,230.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	120,039.
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	120,039.
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	120,039.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	239,844.
<b>b</b>	Program-related investments - total from Part IX-B . . . . .	<b>1b</b>	30,000.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	269,844.
<b>5</b>	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) . . . . .	<b>5</b>	1,230.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	268,614.

**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.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
<b>1</b> Distributable amount for 2015 from Part XI, line 7 . . . . .				120,039.
<b>2</b> Undistributed income, if any, as of the end of 2015:				
<b>a</b> Enter amount for 2014 only. . . . .				
<b>b</b> Total for prior years: 20 <u>13</u> , 20 <u>12</u> , 20 <u>11</u> . . . . .				
<b>3</b> Excess distributions carryover, if any, to 2015:				
<b>a</b> From 2010 . . . . .	14,791.			
<b>b</b> From 2011 . . . . .	35,976.			
<b>c</b> From 2012 . . . . .	106,650.			
<b>d</b> From 2013 . . . . .	3,999.			
<b>e</b> From 2014 . . . . .	34,883.			
<b>f</b> Total of lines 3a through e . . . . .	196,299.			
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4: ▶ \$ <u>269,844.</u>				
<b>a</b> Applied to 2014, but not more than line 2a . . . . .				
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .				
<b>d</b> Applied to 2015 distributable amount. . . . .				120,039.
<b>e</b> Remaining amount distributed out of corpus. . . . .	149,805.			
<b>5</b> Excess distributions carryover applied to 2015. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	346,104.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .				
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions . . . . .				
<b>e</b> Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .				
<b>f</b> Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016. . . . .				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .				
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) . . . . .	14,791.			
<b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	331,313.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2011 . . . . .	35,976.			
<b>b</b> Excess from 2012 . . . . .	106,650.			
<b>c</b> Excess from 2013 . . . . .	3,999.			
<b>d</b> Excess from 2014 . . . . .	34,883.			
<b>e</b> Excess from 2015 . . . . .	149,805.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9) NOT APPLICABLE

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling . . . . . ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test - enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test - enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> Gross investment income . . . . .					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

SUZANNE SKEES

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

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

**Part XV** Supplementary Information *(continued)*

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
ATCH 9				
<b>Total</b> .....				<b>▶ 3a</b> 181,483.
<b>b Approved for future payment</b>				
<b>Total</b> .....				<b>▶ 3b</b>



**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of:
    - (1) Cash . . . . . **1a(1)**  Yes  No
    - (2) Other assets . . . . . **1a(2)**  Yes  No
  - b** Other transactions:
    - (1) Sales of assets to a noncharitable exempt organization . . . . . **1b(1)**  Yes  No
    - (2) Purchases of assets from a noncharitable exempt organization . . . . . **1b(2)**  Yes  No
    - (3) Rental of facilities, equipment, or other assets . . . . . **1b(3)**  Yes  No
    - (4) Reimbursement arrangements . . . . . **1b(4)**  Yes  No
    - (5) Loans or loan guarantees . . . . . **1b(5)**  Yes  No
    - (6) Performance of services or membership or fundraising solicitations . . . . . **1b(6)**  Yes  No
  - c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . . **1c**  Yes  No
  - d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
	N/A		N/A

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3) or in section 527? . . . . .  Yes  No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**      Signature of officer or trustee      Date      Title

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	JEFFREY D HASKELL	JEFFREY D HASKELL	08/01/2016	<input checked="" type="checkbox"/>	P01345770
	Firm's name ▶ FOUNDATION SOURCE	Firm's address ▶ ONE HOLLOW LN, STE 212 LAKE SUCCESS, NY 11042		Firm's EIN ▶ 510398347	Phone no. 8008391754

# Schedule of Contributors

**2015**

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization  
SKEES FAMILY FOUNDATION

Employer identification number  
83-0411607

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

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

<b>Name of organization</b> SKEES FAMILY FOUNDATION	<b>Employer identification number</b> 83-0411607
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**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SKEES, SUZANNE  FOUNDATION SOURCE 501 SILVERSIDE RD  WILMINGTON, DE 19809-1377	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **SKEES FAMILY FOUNDATION**

Employer identification number

83-0411607

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____



Name of organization **SKEES FAMILY FOUNDATION**

Employer identification number

83-0411607

**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	

# Underpayment of Estimated Tax by Corporations

**2015**

▶ Attach to the corporation's tax return.  
 ▶ Information about Form 2220 and its separate instructions is at [www.irs.gov/form2220](http://www.irs.gov/form2220).

Name: **SKEES FAMILY FOUNDATION** Employer identification number: **83-0411607**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

## Part I Required Annual Payment

<b>1</b>	Total tax (see instructions) . . . . .	<b>1</b>	1,230.
<b>2a</b>	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 . . . . .	<b>2a</b>	
<b>b</b>	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method . . . . .	<b>2b</b>	
<b>c</b>	Credit for federal tax paid on fuels (see instructions) . . . . .	<b>2c</b>	
<b>d</b>	<b>Total.</b> Add lines 2a through 2c . . . . .	<b>2d</b>	
<b>3</b>	Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty. . . . .	<b>3</b>	1,230.
<b>4</b>	Enter the tax shown on the corporation's 2014 income tax return (see instructions). <b>Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5</b> . . . . .	<b>4</b>	1,511.
<b>5</b>	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 . . . . .	<b>5</b>	1,230.

## Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions).

<b>6</b>	<input type="checkbox"/>	The corporation is using the adjusted seasonal installment method.
<b>7</b>	<input checked="" type="checkbox"/>	The corporation is using the annualized income installment method.
<b>8</b>	<input type="checkbox"/>	The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

## Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)
<b>9</b> <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year . . . . .	<b>9</b> 05/15/2015	06/15/2015	09/15/2015	12/15/2015
<b>10</b> <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column . . . . .	<b>10</b>	350.	282.	375.
<b>11</b> Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 . . . . .	<b>11</b> 689.	100.	400.	400.
<b>Complete lines 12 through 18 of one column before going to the next column.</b>				
<b>12</b> Enter amount, if any, from line 18 of the preceding column . . . . .	<b>12</b>	689.	439.	557.
<b>13</b> Add lines 11 and 12 . . . . .	<b>13</b>	789.	839.	957.
<b>14</b> Add amounts on lines 16 and 17 of the preceding column . . . . .	<b>14</b>			
<b>15</b> Subtract line 14 from line 13. If zero or less, enter -0- . . . . .	<b>15</b> 689.	789.	839.	957.
<b>16</b> If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- . . . . .	<b>16</b>			
<b>17</b> <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 . . . . .	<b>17</b>			
<b>18</b> <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column . . . . .	<b>18</b> 689.	439.	557.	

**Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.**

For Paperwork Reduction Act Notice, see separate instructions.

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). <i>(Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)</i> . . . . .	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19. . . . .	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2015 and before 7/1/2015	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{365}$ x 3%	<b>22</b>	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2015 and before 10/1/2015	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{365}$ x 3%	<b>24</b>	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2015 and before 1/1/2016	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{365}$ x 3%	<b>26</b>	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2015 and before 4/1/2016	<b>27</b>			
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{366}$ x 3%	<b>28</b>	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2016 and before 7/1/2016	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{366}$ x %	<b>30</b>	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2016 and before 10/1/2016	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{366}$ x %	<b>32</b>	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2016 and before 1/1/2017	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{366}$ x %	<b>34</b>	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2016 and before 2/16/2017	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365}$ x %	<b>36</b>	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 . . . . .	<b>37</b>	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 33; or the comparable line for other income tax returns . . . . .	<b>38</b>	\$		\$

\*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

**Part II Annualized Income Installment Method**

		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>3</u> months	First <u>6</u> months	First <u>9</u> months
<b>20</b> Annualization periods (see instructions) . . . . .	<b>20</b>				
<b>21</b> Enter taxable income for each annualization period (see instructions for the treatment of extraordinary items). . . . .	<b>21</b>	2,409.	5,815.	12,001.	17,636.
<b>22</b> Annualization amounts (see instructions) . . . . .	<b>22</b>	6.00000	4.00000	2.00000	1.33333
<b>23 a</b> Annualized taxable income. Multiply line 21 by line 22 . . . . .	<b>23a</b>	14,454.	23,260.	24,002.	23,515.
<b>b</b> Extraordinary items (see instructions) . . . . .	<b>23b</b>	14,738.	46,689.	60,176.	77,202.
<b>c</b> Add lines 23a and 23b. . . . .	<b>23c</b>	29,192.	69,949.	84,178.	100,717.
<b>24</b> Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2 (or comparable line of corporation's return) . . . . .	<b>24</b>	292.	699.	842.	1,007.
<b>25</b> Enter any alternative minimum tax for each payment period (see instructions). . . . .	<b>25</b>				
<b>26</b> Enter any other taxes for each payment period (see instructions) . . . . .	<b>26</b>				
<b>27</b> Total tax. Add lines 24 through 26 . . . . .	<b>27</b>	292.	699.	842.	1,007.
<b>28</b> For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c (see instructions). . . . .	<b>28</b>				
<b>29</b> Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0- . . . . .	<b>29</b>	292.	699.	842.	1,007.
<b>30</b> Applicable percentage . . . . .	<b>30</b>	25%	50%	75%	100%
<b>31</b> Multiply line 29 by line 30 . . . . .	<b>31</b>		350.	632.	1,007.

**Part III Required Installments**

		1st installment	2nd installment	3rd installment	4th installment
<b>Note:</b> Complete lines 32 through 38 of one column before completing the next column.					
<b>32</b> If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the <b>smaller</b> of the amounts in each column from line 19 or line 31. . . . .	<b>32</b>		350.	632.	1,007.
<b>33</b> Add the amounts in all preceding columns of line 38 (see instructions). . . . .	<b>33</b>			350.	632.
<b>34 Adjusted seasonal or annualized income installments.</b> Subtract line 33 from line 32. If zero or less, enter -0- . . . . .	<b>34</b>		350.	282.	375.
<b>35</b> Enter 25% of line 5 on page 1 of Form 2220 in each column. <b>Note:</b> "Large corporations," see the instructions for line 10 for the amounts to enter. . . . .	<b>35</b>	308.	308.	308.	306.
<b>36</b> Subtract line 38 of the preceding column from line 37 of the preceding column. . . . .	<b>36</b>		308.	266.	292.
<b>37</b> Add lines 35 and 36 . . . . .	<b>37</b>	308.	616.	574.	598.
<b>38 Required installments.</b> Enter the <b>smaller</b> of line 34 or line 37 here and on page 1 of Form 2220, line 10 (see instructions) . . . . .	<b>38</b>		350.	282.	375.

ATTACHMENT 1FORM 990PF, PART I - OTHER INCOME

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>
K-1 INC/LOSS JIBU, L3C	5,114.
TOTALS	<u>5,114.</u>

ATTACHMENT 2FORM 990PF, PART I - OTHER PROFESSIONAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>CHARITABLE PURPOSES</u>
INVESTMENT MANAGEMENT SERVICES	8,247.	8,247.	
PHILANTHROPIC CONSULTING SRVCS	30,000.		30,000.
WEBSITE DEVELOPMENT	5,000.		5,000.
TOTALS	<u>43,247.</u>	<u>8,247.</u>	<u>35,000.</u>

FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
990-PF ESTIMATED TAX FOR 2015	1,100.	
FOREIGN TAX PAID	3.	3.
TOTALS	<u>1,103.</u>	<u>3.</u>

ATTACHMENT 4FORM 990PF, PART I - OTHER EXPENSES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>CHARITABLE PURPOSES</u>
ADMINISTRATIVE FEES	16,135.	16,135.
FOUNDATION DUES & MEMBERSHIPS	750.	750.
K-1 EXP JIBU, L3C	77.	
WEBSITE HOSTING/SUPPORT	1,200.	1,200.
TOTALS	<u>18,162.</u>	<u>18,085.</u>



ATTACHMENT 5FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
AETNA INC	5,168.	6,920.
ALLIANCEBERN DISCOVERY GROWTH	23,049.	24,355.
ALLIANCEBERN DISCOVERY VALUE F	24,953.	24,383.
ALLIANCEBERNSTEIN REIT INSTL F	80,508.	104,663.
ALLSTATE CORP	13,256.	12,045.
ALPHABET INC CL A	1,854.	3,890.
ALPHABET INC CL C	8,575.	15,178.
AMDOCS LIMITED	3,238.	4,475.
AMERICAN ELECTRIC POWER INC	5,245.	5,536.
AMPHENOL CORPORATION	3,478.	4,283.
ANSYS INC	4,398.	5,273.
ANTHEM INC	5,771.	6,833.
APPLE INC	14,276.	20,210.
APPLIED MATERIALS INC	9,200.	8,980.
BALL CP	5,413.	6,837.
BANK OF AMERICA CORP	10,563.	12,151.
BERNSTEIN EMERGING MARKETS	367,316.	318,846.
BERNSTEIN INTERMEDIATE DURATIO	640,879.	626,659.
BERNSTEIN TAX-MANAGED INTERNAT	448,746.	394,431.
BIOGEN INC	3,764.	6,433.
CAPITAL ONE FINANCIAL CORP	5,043.	5,991.
CF INDUSTRIES HOLDINGS, INC	10,184.	7,754.
CHARTER ONE FINL INC	5,422.	5,395.
COMCAST CORP	7,906.	9,311.
COSTCO WHOLESALE CORPORATION	4,138.	5,653.
CVS CAREMARK CORP	7,482.	9,875.
DANAHER CORP	7,647.	9,938.
DELTA AIR LINES INC	4,880.	6,133.
DISCOVER FINL SVCS	6,980.	6,327.

ATTACHMENT 5 (CONT'D)FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
DOLLAR GENERAL CORP	7,230.	7,978.
DR PEPPER SNAPPLE GROUP, INC	8,130.	11,836.
EBAY INC	4,011.	4,534.
EDISION INTL	5,828.	6,099.
EOG RESOURCES INC	7,077.	6,088.
ESTEE LAUDER COMPANIES INC	5,081.	5,988.
F5 NETWORKS, INC	1,738.	1,551.
FACEBOOK INC	8,506.	12,141.
FISERV INC	3,278.	4,664.
GAMESTOP CORP	3,486.	2,860.
GILEAD SCIENCES INC	7,224.	10,423.
HESS CORP	5,387.	3,345.
HEWLETT PACKARD ENTERPRISE CO	4,139.	4,530.
HOME DEPOT INC	6,049.	12,167.
HP INC	3,765.	3,528.
ING US INC	5,154.	4,466.
INTUITIVE SURGICAL	5,019.	6,554.
ITT CORP	6,576.	5,593.
JETBLUE AIRWAYS CORP	2,965.	2,922.
JOHNSON & JOHNSON	5,399.	8,834.
KIMBERLY CLARK CORP	4,764.	5,474.
KROGER CO	2,253.	6,233.
L BRANDS, INC	3,219.	3,258.
L-3 COMMUNICATIONS CORP	7,293.	7,290.
LYONDELLBASELL INDUSTRIES NV	7,549.	8,516.
MAGNA INTERNATIONAL INC	4,078.	3,123.
MCDONALD'S CORP	4,625.	5,671.
MCKESSON CORP	4,515.	4,142.
MEDTRONIC PLC	4,695.	4,769.

ATTACHMENT 5 (CONT'D)FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
MERCK & CO INC	3,475.	3,803.
MICROSOFT CORP	14,333.	17,032.
MOBILEYE NV	1,782.	2,029.
MONSTER BEVERAGE CORP	1,759.	3,575.
MURPHY OIL CP HLDG	7,401.	3,749.
NIKE INC-CL B	6,381.	9,875.
NORTHROP GRUMMAN CORP	8,440.	10,007.
ORACLE CORP	5,215.	4,822.
PEPSICO INC	13,229.	14,289.
PFIZER INC	7,224.	9,781.
PPL CORPORATION	7,226.	7,372.
PRICELINE.COM INCORPORATED	3,686.	5,100.
PUBLIC STORAGE INC	3,273.	3,716.
ROCKWELL COLLINS INC	2,620.	2,584.
ROSS STORES, INC	7,204.	7,695.
SCHLUMBERGER LTD	4,643.	3,627.
SEALED AIR CORP	5,680.	4,817.
SERVICE NOW	1,249.	2,164.
SHERWIN-WILLIAMS CO	3,799.	4,932.
STARBUCKS CORP	4,936.	7,864.
SYNCHRONY FINANCIAL	4,111.	4,105.
UNION PACIFIC	3,138.	3,519.
UNITED TECHNOLOGIES CORP	4,870.	3,939.
UNITEDHEALTH GROUP INC	10,837.	11,293.
US BANCORP	7,585.	7,638.
VALERO ENERGY CORP	3,459.	4,808.
VERIZON COMMUNICATIONS	4,442.	4,391.
VISA INC	5,342.	11,245.
WALT DISNEY HOLDINGS CO	6,809.	8,511.

ATTACHMENT 5 (CONT'D)FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
WELLS FARGO & CO	12,036.	16,091.
XEROX CP	6,992.	7,080.
TOTALS	<u>2,071,541.</u>	<u>2,064,788.</u>

ATTACHMENT 6FORM 990PF, PART II - OTHER INVESTMENTS

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
JIBU, L3C	25,037.	24,617.
TOTALS	<u>25,037.</u>	<u>24,617.</u>

ATTACHMENT 7FORM 990PF, PART II - OTHER ASSETS

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
PRI LOAN TO WORKING CAPITAL	30,000.	30,000.
TOTALS	<u>30,000.</u>	<u>30,000.</u>

**FORM 990-PF - PART IV  
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
725,278.		PUBLICLY-TRADED SECURITIES 640,099.					85,179.	
TOTAL GAIN(LOSS) .....							<u>85,179.</u>	

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 8

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
ELISABETH DEOGRACIAS FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DIR/VP OF COMMUN-GRANT RELTNS 1.00	0.	0.	0.
BRIENNE SKEES FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DIR/VP OF RESEARCH & DATA MGMT 8.00	0.	0.	0.
HUGH B SKEES FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	TRUSTEE EMERITUS 1.00	0.	0.	0.
JASMINE P SKEES FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 *REMOVED FROM POSITION IN 2015	DIR*/SR TRUSTEE / VP OF GIVING 1.00	0.	0.	0.
SHELLY SKEES FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DIR / CFO 1.00	0.	0.	0.



FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 8 (CONT'D)

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
SUZANNE SKEES FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	PRES / CHAIRMAN /DIR/ TRUSTEE 40.00	0.	0.	0.
SALLY SKEES-HELLY FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DIR / SEC 20.00	0.	0.	0.
	GRAND TOTALS	<u>0.</u>	<u>0.</u>	<u>0.</u>

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 9

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ADVANCING GIRLS EDUCATION IN AFRICA INC 6612 KENNEDY DR CHEVY CHASE, MD 20815	N/A PC	GENERAL & UNRESTRICTED	10,000.
AGORA PARTNERSHIPS 419 7TH ST NW 3RD FL WASHINGTON, DC 20004	N/A PC	GENERAL & UNRESTRICTED	5,000.
AID TANZANIA 208 RIVER RANCH RD EDWARDS, CO 81632	N/A PC	GENERAL & UNRESTRICTED	5,000.
AID TANZANIA 208 RIVER RANCH RD EDWARDS, CO 81632	N/A PC	KIRETONO RESOURCE CENTER	6,788.
AMERICAN FRIENDS OF NEVE SHALOM-WAHAT AL-SALAM 229 N CENTRAL AVE FL 4 401 GLENDALE, CA 91203	N/A PC	THE SCHOOL FOR PEACE PROGRAM	1,500.
ASANTE AFRICA FOUNDATION INC 1334 CARLTON PL LIVERMORE, CA 94550	N/A PC	GENERAL & UNRESTRICTED	1,500.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 9 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ASYLUM ACCESS PO BOX 14205 SAN FRANCISCO, CA 94114	N/A PC	GENERAL & UNRESTRICTED	1,000.
ATLAS ECONOMIC RESEARCH FOUNDATION ATLAS 1201 L ST NW 2ND FL WASHINGTON, DC 20005	N/A PC	TEACH NORTH KOREAN REFUGEES	2,000.
BATONGA FOUNDATION 2000 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	N/A PC	GENERAL & UNRESTRICTED	5,000.
CHARLOTTE CATHOLIC HIGH SCHOOL ATHLETIC ASSOCIATI 7702 PINEVILLE MATTHEWS RD CHARLOTTE, NC 28226	N/A PC	GENERAL & UNRESTRICTED	3,700.
DIGITAL NEST INC 17 ASPEN WAY WATSONVILLE, CA 95076	N/A PC	GENERAL & UNRESTRICTED	3,000.
DRAGONFLY FOUNDATION PO BOX 334 MASON, OH 45040	N/A PC	GENERAL & UNRESTRICTED	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 9 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
EDUCATE LANKA FOUNDATION INC 12728 MIDDLEVALE LN SILVER SPRING, MD 20906	N/A PC	GENERAL & UNRESTRICTED	10,000.
EMILY GRIFFITH FOUNDATION INC 1860 LINCOLN ST STE 605 DENVER, CO 80203	N/A PC	EMILY GRIFFITH SCHOOL	1,000.
HAND IN HAND AMERICAN FRIENDS OF CNTR FOR JEWISH-A P.O. BOX 80102 PORTLAND, OR 97280	N/A PC	GENERAL & UNRESTRICTED	4,000.
HEROES INC 1200 29TH ST NW WASHINGTON, DC 20007	N/A PC	GENERAL & UNRESTRICTED	1,500.
HOLY TRINITY MIDDLE SCHOOL 3100 PARK RD CHARLOTTE, NC 28209	N/A PC	GENERAL & UNRESTRICTED	200.
HOLY TRINITY MIDDLE SCHOOL 3100 PARK RD CHARLOTTE, NC 28209	N/A PC	PTO PROGRAM	200.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 9 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
HOPE FOR HONDURAN CHILDREN FOUNDATION 19020 SHAKER BLVD SHAKER HTS, OH 44122	N/A PC	GENERAL & UNRESTRICTED	5,000.
JOLKONA FOUNDATION 1904 3RD AVE., STE 417 SEATTLE, WA 98101	N/A PC	JAAGO FOUNDATION	25,000.
LIVE OAK EDUCATION FOUNDATION INC 1651 SHIRLEY LN SANTA CRUZ, CA 95062	N/A PC	GENERAL & UNRESTRICTED	2,000.
LIVELYHOODS 11766 WILSHIRE BLVD FL 9 LOS ANGELES, CA 90025	N/A PC	GENERAL & UNRESTRICTED	1,000.
MEDHA CORP 47 S ST NATICK, MA 01760	N/A PC	GENERAL & UNRESTRICTED	5,000.
MINI MERMAID RUNNING CLUB 464 HAMPSTEAD WAY SANTA CRUZ, CA 95062	N/A PC	GENERAL & UNRESTRICTED	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 9 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
NORTHSTAR CHURCH PO BOX 158 CLIFTON PARK, NY 12065	N/A PC	GENERAL & UNRESTRICTED	2,595.
PAN MASSACHUSETTS CHALLENGE TRUST 77 4TH AVE NEEDHAM HGTS, MA 02494	N/A PC	GENERAL & UNRESTRICTED	2,000.
PRECIOUS BLOOD MINISTRY OF RECONCILIATION NFP PO BOX 9379 CHICAGO, IL 60609	N/A PC	GENERAL & UNRESTRICTED	10,000.
PRESS INSTITUTE FOR WOMEN IN THEDEVELOPING WORLD 25 TAYLOR ST STE 207 SAN FRANCISCO, CA 94102	N/A PC	GENERAL & UNRESTRICTED	10,000.
PROJECT AKILAH INC 195 PLYMOUTH ST, STE 2/4 BROOKLYN, NY 11201	N/A PC	GENERAL & UNRESTRICTED	15,000.
RESONATE WORKSHOPS PO BOX 582 ALBION, CA 95410	N/A PC	GENERAL & UNRESTRICTED	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 9 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ROMAN CATHOLIC DIOCESE OF CHARLOTTE NC 1123 S CHURCH ST CHARLOTTE, NC 28203	N/A PC	GENERAL & UNRESTRICTED	1,500.
SAN FRANCISCO AIDS FOUNDATION 1035 MARKET ST, STE 400 SAN FRANCISCO, CA 94103	N/A PC	AIDS LIFECYCLE DIVISION	1,000.
SANTA CRUZ LESBIAN AND GAY COMMUNITY CENTER PO BOX 8280 SANTA CRUZ, CA 95061	N/A PC	GENERAL & UNRESTRICTED	1,000.
SCHOOL FUND 455 COLERIDGE AVE PALO ALTO, CA 94301	N/A PC	GENERAL & UNRESTRICTED	5,000.
TOMORROWS YOUTH ORGANIZATION 1356 BEVERLY RD STE 200 MCLEAN, VA 22101	N/A PC	GENERAL & UNRESTRICTED	5,000.
UNITED CHARITABLE PROGRAMS 6201 LEESBURG PIKE STE 405 FALLS CHURCH, VA 22044	N/A PC	TEACH FOR HAITI PROGRAM	5,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 9 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
UPAYA SOCIAL VENTURES 500 YALE ST STE 369 SEATTLE, WA 98109	N/A PC	GENERAL & UNRESTRICTED	20,000.
WAMC 318 CENTRAL AVE ALBANY, NY 12206	N/A PC	GENERAL & UNRESTRICTED	1,000.
		TOTAL CONTRIBUTIONS PAID	<u>181,483.</u>