Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Fo	r cale	ndar year 2015 or tax year beginning	, 20)15, and	ending		, 20
		pundation	•			er identification numbe	
Sil	verbac	k Educational Foundation for the Arts, Dance and Athletic	s			46-4902114	
		nd street (or P.O. box number if mail is not delivered to street address)		om/suite	B Telephor	ne number (see instructi	ons)
38	11 Wes	st Chester Pike, Bdlg. 2,		200		484-420-0225	
		n, state or province, country, and ZIP or foreign postal code	····		C If exempt	tion application is pendi	ng check here >
Ne	wtown	Square, PA 19073			- ii oxomp	tion application to pondi	ing, check hale P
			of a former pub	lic charity	D 1 Foreign	n organizations, check I	nero b 🗔
		☐ Final return ☐ Amended					
		☐ Address change ☐ Name cha	nae			n organizations meeting here and attach compu	
$\overline{\mathbf{H}}$	Check	k type of organization: Section 501(c)(3) exempt p		n	E If private	foundation status was t	erminated under
\Box		on 4947(a)(1) nonexempt charitable trust Other tax			section 5	07(b)(1)(A), check here	▶□
亍		narket value of all assets at J Accounting method			1		
•		of year (from Part II, col. (c), Other (specify)	040	, 1001 441		ndation is in a 60-montl ction 507(b)(1)(B), check	
		6) ► \$ 477,000 (Part I, column (d) must be	on cash basis.)				
	art I	Analysis of Revenue and Expenses (The total of					(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		t investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books		ncome	income	purposes (cash basis only)
—	1	Contributions, gifts, grants, etc., received (attach schedule)	E20 C4	19 15 15 15		at year Nicesan and All	
	2	Check ► if the foundation is not required to attach Sch. B	520,64	13			
	3	Interest on savings and temporary cash investments	tan fira industrijandenis.		0	0	
	4	Dividends and interest from securities		0	0		ACT C POWER MEDICAL CONTRACT
	5a	Gross rents				-	Anna an each ann an
	b	Net rental income or (loss)		0	0	0	
ø.	6a	Net gain or (loss) from sale of assets not on line 10	V	•			
Ž	b	Gross sales price for all assets on line 6a 0	Barra and an all with the total	U produce	A CONTRACTOR NAME OF		The state of the s
ē	l _	· · · · · · · · · · · · · · · · · · ·				e e ar se so so so	
Revenue	7	Capital gain net income (from Part IV, line 2)	4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4	165 25 37 55 36	0		
_	8	Net short-term capital gain	1000000		ute o transfer	0	A CONTRACTOR
	I	Income modifications	CALCADO CONTRACTOR O	75 Sept. 50 (1)		0	
	10a	Gross sales less returns and allowances 0 Less: Cost of goods sold 0	and the second second	Mariana Carana	a production of the second	Report of the second second	
	Ь			· 第75 6			
	11	Gross profit or (loss) (attach schedule)		0		0	
	12	Other income (attach schedule)		0	0		
	13	Total. Add lines 1 through 11	520,64		0		the second second second
es	14	Compensation of officers, directors, trustees, etc.		0	0		
S	15	Other employee salaries and wages		0	0		
Expenses	16a	Legal fees (attach schedule)		0	0	· · · ·	
Ж	b	Accounting fees (attach schedule)	9,86	_	0	 	9,863
Š	-	Other professional fees (attach schedule)		0	0	· · · · · · · · · · · · · · · · · · ·	
Operating and Administrative	17	Interest	20,00		0		20,000
str	18	Taxes (attach schedule) (see instructions)		0	0		
Ë	19	Depreciation (attach schedule) and depletion		0	0		
Ē	20	Occupancy		0	0		entral (ministration)
Ă	21	Travel, conferences, and meetings		0	0		
P	22	Printing and publications		0			
ē	23	Other services (attended at the service)	2 74	_	0	 -	9.700
Ĭ.	24	Total operating and administrative expenses.	3,78	10		 	3,780
rat		Add lines 13 through 23	33.0	12		1	22.040
e C	25	Contributions, gifts, grants paid	33,64	2 - 32 5 7	<u> </u>	0 	33,643
ō	26	Total expenses and disbursements. Add lines 24 and 25	10,00		<u>- 20 y 140 y 150 P</u> -	Tagares C. A. a.K. Terra pel	10,000
	27	Subtract line 26 from line 12:	43,64	1 3		O Toleran Salkini Charles Sal	43,643
		Excess of revenue over expenses and disbursements					
	a	Net investment income (if negative, enter -0-)	477,00	IV .	<u>a emerijing .</u> •		
	b	Adjusted net income (if negative, enter -0-) .			0	<u> </u>	<u>n en 100 avek fransk</u> List fransk fransk fra
			 A substitute for the contract of the contract of	4 6 6 6 6	the second of the second		 The second of the second of the

P	art II	Ralance Sheets	Attached schedules and amounts in the description	column	Beginning of year	End o	of year	
		Dalarioc Oriccia	Attached schedules and amounts in the description should be for end-of-year amounts only. (See instru	ctions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash non-interest-l	•	-	0	477,000	477,000	
	2	Savings and tempora	ary cash investments		0	0		
	3	Accounts receivable		0				
		Less: allowance for o	loubtful accounts ►	0	0	0		
	4	Pledges receivable ▶	•	0				
		Less: allowance for o	loubtful accounts ►	0	0	0	(
	5	Grants receivable .			0	0		
	6		m officers, directors, trustees, and o					
		disqualified persons	(attach schedule) (see instructions) .		О	0		
	7	Other notes and loans re	eceivable (attach schedule) ▶	0	公共的公司公司			
şţ		Less: allowance for dou	ubtful accounts ▶	0	0	0	(
	8	Inventories for sale o	ruse		0	0		
Assets	9	Prepaid expenses an	d deferred charges		0	0		
As	10a	Investments-U.S. and	state government obligations (attach sche	dule)	0	0		
	b	Investments-corpor	ate stock (attach schedule)		0	0	<u> </u>	
	С		ate bonds (attach schedule)		0	0		
	11		lings, and equipment: basis ▶					
		Less: accumulated depre	ciation (attach schedule) ▶	0	0	0		
	12		age loans		0	0		
	13	=	attach schedule)		0	0		
	14	Land, buildings, and eq				Maragara State Crown Francis		
			reciation (attach schedule) >	0	0	one de la companie de	0	
	15	Other assets (describ		1	0	0		
	16		be completed by all filers-see	the		· ·		
		instructions. Also, se	e page 1, item I)		o	477,000	477,000	
	17		d accrued expenses		0	417,000	477,000	
	18	· · · · · · · · · · · · · · · · · · ·			0	0	er steere are	
<u>ë</u>	19				0	0		
Liabilities	20		ectors, trustees, and other disqualified pers		0	0		
ap	21		notes payable (attach schedule)		0	0	Manager Commission	
ב	22	Other liabilities (descri	, , ,	٠,	0	0	Safe Elisabeth (1996)	
	23		lines 17 through 22)	′	0	0	Application and the second	
_			liow SFAS 117, check here ▶		0	<u> </u>		
Balances		and complete lines	24 through 26 and lines 30 and 31.	· 🖭			eneral contra	
2	24	Unrestricted			0	95,400		
프	25	Temporarily restricted		•	0	381,600	(1)	
	26	Permanently restricte		•	0	301,000		
Net Assets or Fund		•	not follow SFAS 117, check here ▶	1	<u> </u>	<u> </u>	5 (C) 7 (S) (E) (S) (S) (S)	
Z		and complete lines		` <u> </u>			MYSTER STATE OF THE	
Ö	27		rincipal, or current funds		o	0		
23	28		plus, or land, bldg., and equipment fur	uq.	0	0		
Se	29		umulated income, endowment, or other fu		0	0	Marketon and a service of the con-	
As	30	-	und balances (see instructions)	,	0	-	Water and the control of the first	
et	31		nd net assets/fund balances			477,000		
Ž	Ψ.					477.000		
Pa	rt III	Analysis of Chan	iges in Net Assets or Fund Balar	1066	0	477,000		
			alances at beginning of year—Part II		mn (a) line 30 (mue	t agree with		
•			d on prior year's return)				_	
2		r amount from Part I, I					0	
_	Otha	r amount nom Fait I, i	ad in line 2 (itemize) > 8	٠.		2	477,000	
3	Othe Add	i increases not include lines 1-2 and 2	ed in line 2 (itemize) 0			4	0	
4	D		line 3 (itemire)				477,000	
5 6	Dech Total	eases not included in I net assets or fund ba	line 2 (itemize) ► liances at end of year (line 4 minus line	5)_ r	Part II. column (b) III	5	0	
	i Utal	mer assers of Julia Da	nances at end of year (line 4 minus line	- 0/-	- cart II, Colult III (D), III	ne 30 6	477,000	

Part	(a) List and describe the	d Losses for Tax on Investment the kind(s) of property sold (e.g., real estate, use; or common stock, 200 shs. MLC Co.)	i income	(b) How acquired P—Purchase D—Donation		te acquired ., day, yr.)	(d) Date sold (mo., day, yr.)
1a	N/A						
<u> b</u>							
<u>c</u>			_				
<u>d</u>							
<u> </u>	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss) f) minus (g)
a							
b							
С							
d							
<u> e</u>							
	Complete only for assets sho	wing gain in column (h) and owned by the					(h) gain minus
	(I) F.M.V. as of 12/31/69	(i) Adjusted basis as of 12/31/69		s of col. (i) (j), if any		Losses (f	t less than -0-) or rom col. (h))
<u>a</u>							
<u>b</u>							<u>-</u>
d							
2	Capital gain net income o		enter in Par ter -0- in Par		2		
3	If gain, also enter in Part	n or (loss) as defined in sections 12: I, line 8, column (c) (see instruction	22(5) and (6): ns). If (loss),	: , enter -0- in)			<u> </u>
Part		er Section 4940(e) for Reduce			3		<u> </u>
Was t	s," the foundation does not	section 4942 tax on the distributabl qualify under section 4940(e). Do no	ot complete	this part.			☐ Yes 🗹 No
	The state of the s	ount in each column for each year; s	ee the instru	ictions before ma	aking a	ny entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) noncharitable-use a	ssets	Dis (col. (b)	(d) tribution ratio divided by col. (c))
	2014		0		0		0
	2013		0		0		0
	2012		0		0		0
	2011		0		0		0
2	2010 Total of line 1, column (d)					2	0
3		for the 5-year base period—divide t dation has been in existence if less t				3	
4	Enter the net value of none	charitable-use assets for 2015 from	Part X, line	5	. -	4	
5	Multiply line 4 by line 3				. -	5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			. -	6	
7	Add lines 5 and 6				.	7	
8		ns from Part XII, line 4			 hat pa	8 rt using a 1	% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se	e inst	ructio	ons)
1a				Ti
_	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	F		0
_	here ► ☐ and enter 1% of Part I, line 27b	Maria di. Maria	nting is North	
С	Part I, line 12, col. (b).		AL LIVE	233
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		(0
3	Add lines 1 and 2		(0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	——		0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	S + #1# **	(0
6	Credits/Payments:			
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 0			
b	Exempt foreign organizations—tax withheld at source 6b 0 Tax paid with application for extension of time to file (Form 8868) . 6c 0			
C d	Tax paid with application for extension of time to file (Form 8868) . 6c 0 Backup withholding erroneously withheld 6d 0			
7	Total credits and payments. Add lines 6a through 6d	Lindu <u>d</u>		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			_
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 0 Refunded ▶ 11			
Part	VII-A Statements Regarding Activities			<u></u>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it 🗔	Yes	No
	participate or intervene in any political campaign?	1a		1
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (se Instructions for the definition)?	e 1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material published or distributed by the foundation in connection with the activities.			Sec.
С	Did the foundation file Form 1120-POL for this year?	5426		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1c		
_	AND II C. LEI N. A. COLOR C. LEI	o		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	- King (4)		
	on foundation managers. ▶ \$	- 10 m		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	in action the	√
	If "Yes," attach a detailed description of the activities.	VA SE	916.8	i ila ma
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	of 🔯		2.00 A
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		✓
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	—	1
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	15 F055177-6	√
e	If "Yes," attach the statement required by General Instruction T.			
6	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 	at 🏰	3 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /	
	conflict with the state law remain in the governing instrument?	6	1	S LAVARE
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	_	1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	\$17.9g		Est Eu
	Pennsylvania			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	āĪ 📳	A.	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	/	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of		1421	
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,			
46	complete Part XIV	9	\bot	/
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the names and addresses		,	
-	names and addresses	10		

Par	t VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	İ		ŀ
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	- 		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	-	
	Website address ▶ http://silverback-sefada.org	_ 13		
14	The books are in care of N William Romanelli	4-420	A225	
	Located at ▶ 3811 West Chester Pike, Bldg. 2, Ste. 200, Newtown Square, PA ZIP+4 ▶	1907		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	1907	<u></u>	
	and enterting account at the community of the control of the contr		•	▶⊔
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	N/A No
	over a bank, securities, or other financial account in a foreign country?		res	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16	া, একল	√
	the foreign country			40.00
Dar	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 0 to 15		
т сп		Cor scouse	34	
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):	34.24	V 00 E	33.0
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1.43.0	源大
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		arabaca Track	
	the benefit or use of a disqualified person)?	14	N1 94616	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after	9.55	e e	14 00 8
	termination of government service, if terminating within 90 days.)		100	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			Y
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	1974 3127 (1987)	wasinia ✓
	Organizations relying on a current notice regarding disaster assistance check here ▶□	基础	W-75248	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	光瓶		
	were not corrected before the first day of the tax year beginning in 2015?	1c		3582628300 ()
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		(25)a.a	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			A CONTRACT
	6e, Part XIII) for tax year(s) beginning before 2015?	fair.		224
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	差法		
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	13. 341		\$ 5.7.2
	all years listed, answer "No" and attach statement—see instructions.)	2b	Zide.	W(249.1)
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	EASSON	8945 E.	V-200-7-7-1
-	► 20 , 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			124
	at any time during the year?	70		
1.				
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	2		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess hydrogo in 2015.)			
_	foundation had excess business holdings in 2015.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		✓_
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		✓

Form 9	90-PF (2015)						Dono
	t VII-B Statements Regarding Activitie	s for Which Form	14720 May Be F	Required (contin	nued)		Page
5a	During the year did the foundation pay or incur						W. N. Yells
	 (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?						
	(3) Provide a grant to an individual for travel, str(4) Provide a grant to an organization other that section 4945(d)(4)(A)? (see instructions)	ın a charitable, etc.,	organization desc	Tyes	☑ No		
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to				✓ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice	ne transactions fail to	qualify under the	exceptions descr		20.00	
c	Organizations relying on a current notice regard If the answer is "Yes" to question 5a(4), does because it maintained expenditure responsibility	the foundation clain			► □ □ No	1754	
6a	If "Yes," attach the statement required by Regul Did the foundation, during the year, receive any on a personal benefit contract?		directly, to pay pre	emiums	☑ No		
b	Did the foundation, during the year, pay premiul If "Yes" to 6b, file Form 8870.	ms, directly or indire	ctly, on a persona	benefit contract	? .	6b	√
	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed				☑ No ì? .	7b	
	Information About Officers, Direct and Contractors					mploy	ees,
1	List all officers, directors, trustees, foundation						
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions employee benefit and deferred compe	plans		nse account, allowances
Steven	C. Graham	Chairman / 1 hr.	[
3811 W	/. Chester Pike, PA 19073	week	0		0	L	1
William	n J. Romanelli, Jr.	President / 1 hr.					
3811 W	/. Chester Pike, PA 19073	week	0		0		1
Sandra	Williamson	Secretary &					
3811 W	/. Chester Pike, PA 19073	Treasurer / 1 hr. we	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				_
~				
				<u> </u>
Tabel words and all according to the control of the			L	
Total number of other employees paid over \$50,000				0

Form **990-PF** (2015)

orm 990-PF (2015)		Page
Part VIII Information About Officers, Directors, Trustees, Four and Contractors (continued)	ndation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NO	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
one		
		
	-	
otal number of others receiving over \$50,000 for professional services .		0
art IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include releva	ant statistical information such as the number of	f
organizations and other beneficiaries served, conferences convened, research papers produced	d, etc.	Expenses
1		
2		
	=======================================	-
3		
		-
		-
4		
		-
		<u>- </u>
art IX-B Summary of Program-Related Investments (see insti		
Describe the two largest program-related investments made by the foundation during the tax ye	ear on lines 1 and 2.	Amount
1 None		-
		-
2		
		-
		-
All other program-related investments. See instructions.		
3		
		-
		-
otal. Add lines 1 through 3	· · · · · · · · · · · · · · ·	•

Form **990-PF** (2015)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	(
b	Average of monthly cash balances	1b	2,61
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	2,61
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	(
3	Subtract line 2 from line 1d	3	2,614
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	39
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,554
6	Minimum investment return. Enter 5% of line 5	6	120
Part		oundatio	าร
1	Minimum investment return from Part X, line 6	1	129
2a	Tax on investment income for 2015 from Part VI, line 5 2a	No.5	<u> </u>
ь		10 m	
C	Add lines 2a and 2b	2c	_ 129
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	129
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	129
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	129
Part	XII Qualifying Distributions (see instructions)	, , , , ,	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	43,643
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	100 Ti	_
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	43,643
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	43,643
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

Part	Undistributed income (see instructi	ons)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
2 a	line 7			0	129
ь 3	Total for prior years: 20,20,20 Excess distributions carryover, if any, to 2015:		0		
a b	From 2010				
c d e	From 2012		St.		
f 4	Total of lines 3a through e	0			
a b	Applied to 2014, but not more than line 2a. Applied to undistributed income of prior years (Election required—see instructions)		0	0	
C	Treated as distributions out of corpus (Election required—see instructions)	0			
d e 5	Applied to 2015 distributable amount Remaining amount distributed out of corpus Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0 0	The Secretary Control of the Control		43,643 0
6	Enter the net total of each column as indicated below:		Editoria del 11. Editoria		alian, maa ka
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract line 4b from line 2b	0	0	inches Augusta	Page 1 and 1 and 1
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	200	0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
е	Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)	.0			
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) .	0			
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0			
10 a b c	Analysis of line 9: Excess from 2011 Excess from 2012 Excess from 2013				
d e	Excess from 2014 Excess from 2015				

Form 9	90-PF (2015)	rtione (acc instr	untions and Day	LV(I) A sussian (2)	Page 1 0
	If the foundation has received a rulin foundation, and the ruling is effective for	g or determination	n letter that it is a	private operating		
ь	Check box to indicate whether the fou		_		N/ ection	
2a	Enter the lesser of the adjusted net	Tax year	T	Prior 3 years		
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
c	85% of line 2a					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
Ь	"Endowment" alternative test—enter 2/s of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
D1	(4) Gross investment income					
Part	Supplementary Information any time during the year-			the foundation h	iad \$5,000 or mo	ore in assets at
- 1	Information Regarding Foundation		115.)			
а	List any managers of the foundation before the close of any tax year (but of	who have contrib				by the foundation
Steven	C. Graham					
b	List any managers of the foundation ownership of a partnership or other e					ge portion of the
None	Information B	A		· -		
2	Information Regarding Contribution					al- , ,
	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the other conditions, complete items 2a,	foundation makes				
a	The name, address, and telephone nu		ddress of the pers	son to whom applic	ations should be a	ddressed:
Willian	n J. Romanelli, Jr. 3811 W. Chester Pike,	Bldg. 2, Ste. 200, I	Newtown Square, F	PA 19073 484-420-02	225 / bromanelli@gr	ahampartners.net
b	The form in which applications should	d be submitted an	d information and	materials they sho	ould include:	
Email -	no specific information or materials req	uired.				

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

c Any submission deadlines:

factors:

None

None

3	Grants and Contributions Paid During	If recipient is an individual			- T
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
Waldr 513 M	on Mercy Academy ontgomery Avenue, Merion Station, PA 19066	N/A	501(c)(3) Pullic Charring	Educational support	10,000
			į		
		:			
			:		
	Total				
	Total	<u> </u>	 I	<i> ,</i> . >	3a 10,000
J	Applored for luture payment				
	Total	;			
	LOTAL				3h

Pa	rt XVI	-A Analysis of Income-Producing Ac	ctivities			-	
Ente	r gros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	ion 512, 513, or 514	(e)
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	-	ram service revenue:					
	а Ь				ļ	_	
	ຼັ –				-		
	q –		-	-			_
	~ –				-		-
	f -						
	G F	ees and contracts from government agencies					
2	_	bership dues and assessments		.	 		
3		est on savings and temporary cash investments					
4		ends and interest from securities					
5		ental income or (loss) from real estate:					
		ebt-financed property	A TWYN I LYNNE I' NE	<u> Lagra Maria, ja ja Karting ar terret</u>		and the contract of the contra	<u> Propins a material de la prima del la prima de a pr</u>
		ot debt-financed property				-	
6		ental income or (loss) from personal property				-	
7		r investment income					
8	Gain o	or (loss) from sales of assets other than inventory					
9	Net in	ncome or (loss) from special events					
10	Gross	s profit or (loss) from sales of inventory					
11	Other	revenue: a N/A					
	b _						
	c _						
	d _						_
	e _					· ·-	
12	e	otal. Add columns (b), (d), and (e)				0	0
13	e Subto	. Add line 12, columns (b), (d), and (e)				13	0
13 (See	e Subto Total. works	Add line 12, columns (b), (d), and (e)					
13 (See Par	e Subto Total works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	e Subto Total. works	Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
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13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 (See Pat Lin	eSubto Total. works t XVI-	Add line 12, columns (b), (d), and (e) Beneet in line 13 instructions to verify calculation Beneet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	t Purposes	13	0

Part	XVII		n Regarding T rganizations	ransfers	To and Tra	nsactio	ns and	Relationsh	ips With I	Nonchar	ritab		.90
1	in se	the organization o ection 501(c) of th nizations?	directly or indirec ne Code (other th	tly engage an section	in any of the 501(c)(3) org	following ganization	g with ar s) or in s	ny other organ section 527, i	nization de relating to	scribed political		Yes	No
а	(1) (Cash	porting foundatio								1a(1)		_
b	Othe	Other assets . er transactions: Sales of assets to	a noncharitable	· · · · exempt or	ganization						1a(2) 1b(1)	erio Process Luciand	→
	(3) F	Rental of facilities	ets from a noncha , equipment, or o rrangements	ther assets	s				 		1b(2) 1b(3) 1b(4)		√ √
c	(5) L (6) P	oans or loan gua Performance of se		 ership or fu	 Indraising so	 licitations					1b(5) 1b(6) 1c		√ √ √
d	If the	e answer to any or of the goods, or	of the above is " ther assets, or se on or sharing arra	Yes," com ervices give	plete the folen	lowing so porting fo	hedule. undation	Column (b) s	should alw lation rece	ays show ived less	the than	fair m	arket arket
(a) Line		(b) Amount involved			exempt organiza			ription of transfe					
													_
				-									
		_											
											_		
							•						
		_	****					_		-			
			-						<u>-</u>				
								-		·			
	desc	ribed in section 5	ectly or indirectly 501(c) of the Code of following schedu	e (other tha	with, or relat an section 50	ed to, or 11(c)(3)) or	e or mo	re tax-exempon 527? .	ot organiza	ations	Yes	☑ 1	 Vo
		(a) Name of organi			(b) Type of or	ganization			(c) Descriptio	n of relation	ship		
						<u> </u>					_		
					,,,,,,								
								w					_
Sign Here	сотте	or penalties of perjury, I ct, and complete. Declar ature of officer or trus	declare that I have exar aration of preparer (othe	nined this return than taxpaye	rn, including according is based on all in	nformation o	hedules and f which prep sident	d statements, and parer has any know	to the best of wledge.	May the IR: with the pro (see instruct	S discus eparer s	s this r	eturn oelow
Paid Prepa		Print/Type preparer		Prepare	er's signature	nue		Date		k ☐ if mployed	ΓIÑ		
Use C	Only	Firm's name							Firm's EIN ▶				
		Firm's address ▶							Phone no.				

Silverback Educational Foundation for the Arts, Dance and Athletics Form 990PF For calendar year 2015 Part I - Operating and Administrative Expenses Detail

Line 16a - Legal Fees

Description	Amount		
Drinker Biddle & Reath, LLP	9,605		
Corporation Service Company	258		

Total	9,863		

Line 16c - Other professional fees

Description	Amount
Consulting fees	20,000
Total	20,000

Line 23 - Other Expenses

Description	Amount
Insurance	3,443
State registration fees	315
Postage & Shipping	22
Total	3,780

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

Silverback Educational Fou	ndation for the Arts, Dance and Athletics	46-4902114
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	d 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	
	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both th	e General Rule and a Special Rule. See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during or property) from any one contributor. Complete Parts contributions.	
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-E sections 509(a)(1) and 170(b)(1)(A)(vi), that checked School that received from any one contributor, during the year the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	edule A (Form 990 or 990-EZ), Part II, line ar, total contributions of the greater of (1)
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 99 the year, total contributions of more than \$1,000 exclusional purposes, or for the prevention of cruelty to children	ively for religious, charitable, scientific,
contributor, during contributions tota during the year fo General Rule app	n described in section 501(c)(7), (8), or (10) filing Form 90 the year, contributions exclusively for religious, charital ded more than \$1,000. If this box is checked, enter here are an exclusively religious, charitable, etc., purpose. Do not lies to this organization because it received nonexclusive more during the year	ble, etc., purposes, but no such the total contributions that were received ot complete any of the parts unless the rely religious, charitable, etc., contributions
Caution. An organization to	nat is not covered by the General Rule and/or the Specia	al 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).

Name of organization
Silverback Educational Foundation for the Arts, Dance & Athletics

Employer identification number
46-4902114

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (d) No. Type of contribution Name, address, and ZIP + 4 **Total contributions** 1 Graham Partners, Inc. Person ~ Payrol1 3811 West Chester Pike, Bldg. 2, Suite 200 477,000 \$ Noncash (Complete Part II for Newtown Square, PA 19073 noncash contributions.) (a) (b) (c) (d)No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 Graham Partners, Inc. Person **Payroll** П 3811 West Chester Pike, Bldg. 2, Suite 200 \$ 43.643 Noncash ~ (Complete Part II for Newtown Square, PA 19073 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions.) (a) (c)
Total contributions (d) Νo. Name, address, and ZIP + 4 Type of contribution Person П **Pavroll** \$ Noncash (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash П (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payrol) \$ Noncash (Complete Part II for noncash contributions.)

Name of organization
Silverback Educational Foundation for the Arts, Dance and Athletics

Employer identification number 46-4902114

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

	1	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Legal, consulting, and administrative expenses paid on behalf of the Private Foundation.		
	\$ 43,643	2015
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	r.	
	Legal, consulting, and administrative expenses paid on behalf of the Private Foundation. (b) Description of noncash property given Legal, consulting, and administrative expenses paid on behalf of the Private Foundation. \$ 43,643 Co FMV (or estimate) (see instructions) S Description of noncash property given S Co FMV (or estimate) (see instructions) S Description of noncash property given S Co FMV (or estimate) (see instructions) S Co FMV (or estimate) (see instructions) S Description of noncash property given S Description of noncash property given S Co FMV (or estimate) Co FMV (or estimate) Co FMV (or estimate) Co FMV (or estimate) Co Co FMV (or estimate)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization **Employer identification number** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or Part III (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. (b) Purpose of gift (d) Description of how gift is held from (c) Use of gift Part ! (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee