EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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

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

OMB No 1545-0052

	Ford	alen	dar year 2015 or tax year beginning		, and endir	ng			
Name of foundation							A Employer identification number		
	K	AZ:	ICKAS FAMILY FOUNDATION	INC	13-4011883			3	
	Nun	ber a	nd street (or P O box number if mail is not delivered to street	address)	Ro	om/suite	B Telephone number		
			EAST 38TH STREET				212-213-69	993	
			own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is a	pending, check here	
			YORK, NY 10016	Instal vatura of a fe			D. 4. Faraino avecanination	a abaalabana 🕟 🗀	
	Gi U	neck	all that apply: Initial return	Initial return of a fo	ormer public char	ny	D 1. Foreign organization	s, check here	
			Address change	Name change			Foreign organizations me check here and attach co	eeting the 85% test,	
	H C		type of organization: X Section 501(c)(3) ex						
		_		Other taxable private founds	ation	l	E If private foundation sta under section 507(b)(1		
	I Fa		rket value of all assets at end of year J Accounti	ng method: X Cash	Accrual		F If the foundation is in a	, , ,	
	(fr	om F		ther (specify)			under section 507(b)(1		
			14,840,645. (Part I, colu	mn (d) must be on cash I	basis)			<u>, </u>	
	Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net inves income		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
		1	Contributions, gifts, grants, etc., received	5,000.			N/A		
9		2	Check If the foundation is not required to attach Sch. B						
2016		3	Interest on savings and temporary cash investments	6,480.		480.		STATEMENT 1	
		4	Dividends and interest from securities	398,673.	398	673.		STATEMENT 2	
ಲ್ಲ			Gross rents						
\geq		_	Net rental income or (loss)	471,517.				 	
\geq	Revenue	h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 1,075,535.	4/1/51/0				 	
\Box		7	Capital gain net income (from Part IV, line 2)		471	,517.		 	
里		8	Net short-term capital gain						
Z		9	Income modifications						
SCANNED NOV		10a	Gross sales less returns and allowances					<u> </u>	
U)			Less Cost of goods sold	<u> </u>				ļ	
		11	Gross profit or (loss) Other income	15,030.	1 5	,030.	 	STATEMENT 3	
		12	Total, Add lines 1 through 11	896,700.	891			STATEMENT J	
		13	Compensation of officers, directors, trustees, etc	0.		0.		0.	
		14	Other employee salaries and wages	84,833.		.0.		84,833.	
	۰,		Pension plans, employee benefits		,				
	Ses		Legal fees					<u> </u>	
	ge		Accounting fees STMT 4	16,671.		503.		4,168.	
	Û		Other professional fees STMT 5	54,371.	45	,500.	<u> </u>	8,871.	
	ativ		Interest Taxes STMT 6	45,149.	1	,868.		7,464.	
	istr	19	Depreciation and depletion	<u> </u>	<u>+</u> _	,000.		7,303.	
	Ë		Occupancy					1	
	Ad	21	Travel, conferences, and meetings	39,953.		FØF	CEIVED	39,953.	
	and	22	Printing and publications					L	
	Operating and Administrative Expenses		Other expenses STMT 7	145,915.	6.8	116.	7 9 7 7 11 5 0	1,249.	
	erat	24	Total operating and administrative	306 900	123	NU 987.	/ 2 8 2016 O	146 530	
	ŏ	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	386,892. 549,436.	143			146,538. 549,436.	
			Total expenses and disbursements.	343,430.		<u>UG</u>	DEN, UT	<u>J49,430.</u>	
			Add lines 24 and 25	936,328.	123	,987.		695,974.	
		27	Subtract line 26 from line 12:						
		a	Excess of revenue over expenses and disbursements	-39,628.					
			Net investment income (if negative, enter -0-)		767	713.		<u> </u>	
		C	Adjusted net income (if negative, enter -0-)	<u> </u>	L		N/A		

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

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	^ art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
<u>"</u>	art_	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	41,315.	44.871.	44,871.
	'	Savings and temporary cash investments	158,462.	158,505.	158,505.
		Accounts receivable	130,4021	130,303.	130,303.
)	Less: allowance for doubtful accounts	Ì		
	} .				
	4	Pledges receivable ►	ļ		
	İ	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	{	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
Ø	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As	I	Investments - U.S. and state government obligations			
	1	Investments - corporate stock STMT 9	5,558,227.	5 666 887	11,454,164.
			3,330,227.	3,000,001.	TT'424'TO4.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	 		
		Less accumulated depreciation			
		Investments - mortgage loans		- 4 - 2 - 2 - 2	
	13	Investments - other STMT 10	3,516,265.	3,150,087.	3,183,105.
	14	Land, buildings, and equipment: basis	1		
	ĺ	Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the]	j	
	}	instructions. Also, see page 1, item I)	9,274,269.	9,020,350.	14,840,645.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
<u>"</u>	l .	Other liabilities (describe			
	~~	Other liabilities (describe			
	00	Tatal liabilities (add lines 17 through 99)	0.	0.	
	23	Total liabilities (add lines 17 through 22)	-	<u>_</u>	
	ĺ	Foundations that follow SFAS 117, check here	ł		
Š	}	and complete lines 24 through 26 and lines 30 and 31.	\	ł	
ဦ	Į.	Unrestricted			
盲	25	Temporarily restricted			
Ä	26	Permanently restricted			
Net Assets or Fund Balances	Ì	Foundations that do not follow SFAS 117, check here	1		
F	ľ	and complete lines 27 through 31.	1		
S	27	Capital stock, trust principal, or current funds	2,136,337.	2,136,337.	
Set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ą	29	Retained earnings, accumulated income, endowment, or other funds	7,137,932.	6,884,013.	
š	30	Total net assets or fund balances	9,274,269.	9,020,350.	
	}				
	31	Total liabilities and net assets/fund balances	9,274,269.	9,020,350.	
L	art	Analysis of Changes in Net Assets of Fund Ba	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1 1	9,274,269.
2	-	r amount from Part I, line 27a		2	-39,628.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	9,234,641.
		eases not included in line 2 (itemize)	פקים פחז		214,291.
					9,020,350.
<u>o</u> _	rota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	namm (D), mie 30		Form 990-PF (2015)
					rorm 330-PF (2015)

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Page 2

Form 990-PF (2015) KAZICKAS FAMILY FOUNDATION INC

		KAS FAMILY FOU Losses for Tax on I						<u> 13-</u>	-4011	.883	Page 3
(a) List and describe the kind(s) of property sold (e.g., r 2-story brick warehouse; or common stock, 200 shs.			g., real estate,		(b) How acquired P - Purchase D - Donation			(c) Date acquired (mo., day, yr.)		(d) Date (mo., da	
1a											
b	SEE ATTACHED S	TATEMENT			<u> </u>		ļ				
C		-v <u></u>			_		 				
d							+				
е		/f) Depresented allowed	(a) Can	t as ather house	۲		.1	(h) Coin			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain e) plus (f)	minus (g)	
<u>a</u>		_	 								
b C								_		_	
d			-								
e	1,075,535.		-	604,01	8.					471	,517.
	Complete only for assets showing ga	ain in column (h) and owned by	the foundation				(I) Ga	ıns (Col.	(h) gaın r	ninus	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			col. (k)	, but not i	less than om col. (h	-0-) or	
а]						
b			-								
C			-								
<u>d</u>										471	F17
<u>e</u>		<u> </u>			\neg	1				4/1	<u>,517.</u>
2	Capital gain net income or (net capita	$\{ \text{loss} \}$			}	2	_			471	,517.
	Net short-term capital gain or (loss) a		ınd (6):		ا ۱						
	If gain, also enter in Part I, line 8, colu If (loss), enter -0- in Part I, line 8	ımn (c).				3			N/A		
	art V Qualification Und	er Section 4940(e) fo	r Reduced	Tax on Net	lnv	estment l	ncon	ne			
(Fo	or optional use by domestic private fou	indations subject to the section	4940(a) tax on	net investment in	ncome	.)					
	anting 4040/d)/0) conting large this	out blook									
II S	ection 4940(d)(2) applies, leave this p	art Diank.									
Wa	s the foundation liable for the section	4942 tax on the distributable a	mount of any ye	ear in the base pe	rıod?					Yes	X No
	Yes," the foundation does not qualify u										
1_	Enter the appropriate amount in each	column for each year; see the	instructions be	fore making any e	entries	· <u> </u>				(d)	
	(a) Base period years	(b) Adjusted qualifying di	stributions	Net value of no	(c) nebar		ets	(00	Distribu	d)	(0))
	Calendar year (or tax year beginning ii 2014	·/	82,380.	THE VALUE OF THE		,000,1		(60	i. (b) divid	ded by col.	38825
_	2013		42,326.			,174,3			•		38261
_	2012		29,435.			$\frac{1}{454}$, 9:					46781
_	2011	5!	52,764.			,631,7			·-		40550
_	2010		15,557.			,874,9					40043
									-		
2	Total of line 1, column (d)							2		.2	04460
3	Average distribution ratio for the 5-ye	ear base period - divide the tota	l on line 2 by 5,	or by the number	r of ye	ars			_	_	
	the foundation has been in existence $% \left(1\right) =\left(1\right) \left(ıf less than 5 years						3		.04	<u>40892</u>
							1				
4	Enter the net value of noncharitable-u	ise assets for 2015 from Part X	, line 5				-	4	1:	5,045	<u>,339.</u>
5	Multiply line 4 by line 3							5	_	615	,234.
6	Enter 1% of net investment income (1% of Part I, line 27b)						6		7	<u>,677.</u>
7	Add lines 5 and 6							7			,911.
	Enter qualifying distributions from Pa	art XII. line 4					Ī	8			,97 4.
-	If line 8 is equal to or greater than line		ne the and comm	alete that nart wer	1021	% tay rate	L			<u> </u>	<u>, </u>
	See the Part VI instructions.	o r, oneon the DUA III Fait VI, III	io ib, and comp	nere mar harr nen	iyal	/U LANTALE.					

	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	748	40118	83	otio	Page 4
	~~~~~!~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	740	266 1113	<u>su u</u>	Ctio	119)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	1	<del></del>		<i>1</i> , b	77.
	of Part I, line 27b	)				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<b></b>			<u> </u>
3	Add lines 1 and 2	3	<b></b>		<u>7,6</u>	77.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	, 	'	<u>7,6</u>	77.
6	Credits/Payments:	- {				
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 9,779.	ł				
b	Exempt foreign organizations - tax withheld at source					
C	: Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d 6d	- 1				
7	Total credits and payments. Add lines 6a through 6d	_ 7_		_ !	9,7	79.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8				<u>5.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			$\frac{1}{2},0$	97.
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				0.
	art VII-A Statements Regarding Activities					
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		$\neg$	Yes	No
	any political campaign?			1a		X
ì	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe			$\neg$		
	distributed by the foundation in connection with the activities.		}	- (		ļ
(	Did the foundation file Form 1120-POL for this year?			1c		X
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			-		<del> </del>
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .		}	Į		
,	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					ł
•	managers. > \$ 0.			ĺ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		x
-	If "Yes," attach a detailed description of the activities.			-		- <u></u> -
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	r	ĺ	- }		
ŭ	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		}	3		х
4:	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		<u> </u>	4a	X	<del>                                     </del>
	o If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		-	4b	X	<del> </del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
•	If "Yes," attach the statement required by General Instruction T.		<del> -</del>	<del>*  </del>		<del></del>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		Í			
Ü	By language in the governing instrument, or		1	- }		
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	law	1	l		-
	remain in the governing instrument?	ICIVV		6		x
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		<u> </u>	7	X	<del>  ^</del>
•	Did the foundation have at least φ5,000 in assets at any time during the year. If Tes, Complete Part II, Coi. [c], and Part XV		-	<del>'</del>		$\vdash$
Ω.	a Enter the states to which the foundation reports or with which it is registered (see instructions)			ļ		
0.	NY					
,	the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		<del></del>	Ì		
١	of each state as required by General Instruction G? If "No," attach explanation		]	8b	X	1
n	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	nder	<u> </u> -	90		<del>                                     </del>
J	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	ival	1	9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		-	10		X
10	The daily personal popularior outstand during the tax years in the attach a schedule listing their names and addresses			<del> </del>	)-PF	(2015)
						\~~ .~/

P	art 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 meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			1
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► WWW.KFF.LT			
14	The books are in care of ► KAZICKAS FAMILY FOUNDATION INC Telephone no. ►212-2			
	Located at ► 120 EAST 38TH STREET, NY, NY ZIP+4 ►1	<u> </u>		<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	•
	and enter the amount of tax-exempt interest received or accrued during the year  15	N	/A	Nia
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	<u>لـــــا</u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1		
P	foreign country ► art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
<u> </u>			Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  a During the year did the foundation (either directly or indirectly):		162	140
	(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?		}	1
	(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?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		{ i	
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
i	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here		1	
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		}	
	before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):		(	
	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015?			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
1	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach	l	]	
	statement - see instructions.)	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	<b></b> -	-
	• If the provisions of section 4342(a)(2) are being approve to any or the years noted in 2a, list the years note.	İ		
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
•	during the year?			
	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 the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015)  N/A	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b 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	<u></u>	X
	F.	orm <b>99</b> 0	0-PF	(2015)

Form 990-PF (2015) KAZICKAS FAMILY FOUNDATI Part VII-B   Statements Regarding Activities for Which I		Required (centur	13-40118	83 Page 6
5a Buring the year did the foundation pay or incur any amount to:	Offit 4720 May be I	nequired (contin	uea)	<del></del>
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4045(a)\2		es X No	} }
(2) Influence the outcome of any specific public election (see section 4955); or	,		55 (25) 110	1 1
any voter registration drive?	or to carry on, an comy or main		es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		es X No	1 1
(4) Provide a grant to an individual for travel, study, or other similar purposes  (4) Provide a grant to an organization other than a charitable, etc., organization			3 (25) 110	}
4945(d)(4)(A)? (see instructions)	ii dosoribed iii seetteti		es X No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or aducational numbers or f		35 LAL 140	} }
the prevention of cruelty to children or animals?	, or educational purposes, or i		es X No	} }
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify uni-	der the excentions described i			1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined		1 1
expenditure responsibility for the grant?		//A 🗀 Ye	es No	[ [
If "Yes," attach the statement required by Regulations section 53.494		•/ • •		[ ]
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	1.7		ŀ	į Į
a personal benefit contract?	pay premiums on	[ ] v.	es X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	parennal hanafit contract?	L 11	ſ	6b X
If "Yes" to 6b. file Form 8870.	oor sorial benefit contract.		<del>-</del> -	- X
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?		es X No	
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribute.		16	. —	7b
Part VIII Information About Officers, Directors, Trust		nagers Highly		7.0
Paid Employees, and Contractors	ooo, i odiidadon ma	magoro, riigini	•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	_allowances
JOHN A. KAZICKAS	TREASURER/SEC	RETARY		
4 BACKUS FARM LANE		1		
SANDS POINT, NY 11050	0.00	0.	0.	0.
JURATE KAZICKAS	DIRECTOR/PRES	IDENT		
120 EAST 38TH STREET		1	Ì	
NEW YORK, NY 10016	0.00	0.	0.	0.
MICHAEL V KAZICKAS	DIRECTOR			
59 NORTHWOOD AVENUE		1		
DEMAREST, NJ 07627	0.00	0.	0.	
JOSEPH M. KAZICKAS	DIRECTOR			
P.O. BOX 2281	}		ĺ	
AMAGANSETT, NY 11930	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). 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>		
	L	ļ		
			[	
	ļ	ļ	ļ	
		}		
Total number of other employees paid over \$50,000	<u> </u>	L		0
TOTAL HUMBER OF OTHER EMPROYEES PAIN OVER \$30,000				

		orm <b>990-PF</b> (20
Total. Add lines 1 through 3	▶	C
3		
All other program-related investments. See instructions.		
2		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  1 N/A	-	Amount
Part IX-B Summary of Program-Related Investments	<del></del>	Amount
<del>*</del>		
<u></u>		<del></del>
3	<del></del>	
2		
1 <u>N/A</u>		
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<u> </u>
		<del> </del>
		<del> </del>
		<del> </del>
		<del> </del>
10112		
(a) Name and address of each person paid more than \$50,000 (b) Type of se	rvice	(c) Compensati
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		T
Paid Employees, and Contractors (continued)		
Form 990-PF (2015) KAZICKAS FAMILY FOUNDATION INC  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High	<u>13-401</u> Nv	1883 Page

3a | 3b |

2

5 7,677. 6 688,297.

6 Adjusted qualifying distributions. Subtract line 5 from line 4

Suitability test (prior IRS approval required)

income, Enter 1% of Part I, line 27b

Cash distribution test (attach the required schedule)

Amounts set aside for specific charitable projects that satisfy the:

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

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

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

**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.

Form **990-PF** (2015)

2

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7				736,819.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			638,882.	L
<b>b</b> Total for prior years:				_ <del></del>
		0.		
3 Excess distributions carryover, if any, to 2015:				
<b>a</b> From 2010				
<b>b</b> From 2011			}	
<b>c</b> From 2012				1
<b>d</b> From 2013				•
e From 2014				1
f Total of lines 3a through e	0.			<del></del>
4 Qualifying distributions for 2015 from				: :
Part XII, line 4: ►\$ 695,974.				 
a Applied to 2014, but not more than line 2a			638,882.	<u> </u>
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)	_ <del></del>	0.		<u></u>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			<del> </del>
d Applied to 2015 distributable amount				57,092.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				1
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	<u> </u>	<u> </u>
c Enter the amount of prior years'				-
undistributed income for which a notice of deficiency has been issued, or on which				1
the section 4942(a) tax has been previously			-	1
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		<u></u>
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	<u> </u>
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must			}	
be distributed in 2016				679,727.
7 Amounts treated as distributions out of			}	1
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	<u> </u>	<u> </u>		 <del> </del>
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			<u> </u>
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			<u> </u>
10 Analysis of line 9:				
a Excess from 2011			}	
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015	<u> </u>	L	L	Form 900 DE (0015)

Part XIV Private Operating F		Istrictions and Part VI		N/A	3-4011883 Page 10
1 a If the foundation has received a ruling of			1-A, question sy	N/A	
foundation, and the ruling is effective for					
•	•	<del>-</del>	🔻	4040(1)(2)	1040(2)(5)
<b>b</b> Check box to indicate whether the found	Tax year	T Touridation described	Prior 3 years	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(4) 2010	(6) 2011	(6) 20 10	(0) 2012	(6) 10141
investment return from Part X for					]
each year listed		<del> </del>	<del> </del>		
<b>b</b> 85% of line 2a		<del> </del>	<del> </del>	<del>-                                    </del>	
c Qualifying distributions from Part XII,			1	Ì	
line 4 for each year listed	<del></del>	<del> </del>	<del> </del>		
d Amounts included in line 2c not				Ì	}.
used directly for active conduct of				Ì	
exempt activities	<del></del>	<del> </del>	<del> </del>	<del></del>	
e Qualifying distributions made directly				Ì	}
for active conduct of exempt activities. Subtract line 2d from line 2c				}	1
3 Complete 3a, b, or c for the	<del></del>	<del> </del>	<del> </del>	<del></del>	
alternative test relied upon:				}	<b>}</b>
<ul><li>a "Assets" alternative test - enter:</li><li>(1) Value of all assets</li></ul>				}	1
• ,		<del> </del>	<del> </del>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		<u> </u>			
b "Endowment" alternative test - enter 2/3 of minimum investment return				1	(
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					1
investment income (interest, dividends, rents, payments on					)
securities loans (section					ľ
512(a)(5)), or royalties)	<u> </u>		L		
(2) Support from general public					
and 5 or more exempt organizations as provided in				ŀ	1
section 4942(j)(3)(B)(III)	 	<u> </u>	<u> </u>		
(3) Largest amount of support from				}	†
an exempt organization		<u> </u>			
(4) Gross investment income	L	<u> </u>			
Part XV   Supplementary Info	•	_	if the foundat	ion had \$5,000	or more in assets
at any time during t		ructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation wh year (but only if they have contributed n			tributions received by	the foundation before	e the close of any tax
	ιοιο ιπαιτ φο,σοσή: (ουσ	30000011 307 (4)(2).)			
NONE	a own 109/ or more of th	ha atask of a sarparation	/or on agually lorge 5	action of the ownersh	un of a portnership or
<ul> <li>b List any managers of the foundation wh other entity) of which the foundation has</li> </ul>			(or an equally large p	ortion of the ownersh	up of a partnership or
NONE	<b>3</b>				
2 Information Regarding Contributi	ion Grant Gift Loan	Scholarship etc. Pr	rograme:		
Check here <b>X</b> if the foundation of				nes not accent unsolici	ated requests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of	the person to whom appl	ications should be ac	Idressed:	
, , , , ,					
<b>b</b> The form in which applications should be	e submitted and informa	ation and materials they s	hould include:		
c Any submission deadlines;					
d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable fields	, kınds of ınstitutions	, or other factors:	

3 Grants and Contributions Paid During the Y Recipient	If recipient is an individual.	Payment	T	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient	+	
A PROPOS STUDIJA	NONE		GENERAL PURPOSES	
SV.JONO G.13-6 VILINIUS, LITHUANIA 01123				2,000
TEINIOU, HIMORNIA VIIES				2,00
ALEXANDRA KAZICKAS LITHUANIAN SCHOOL	NONE		GENERAL PURPOSES	
269 MAIN ROAD		}		
AQUEBOGUE, NY 11931	-			30,000
CAMP NERINGA 147 NERINGA ROAD	NONE		GENERAL PURPOSES	
BRATTLEBORO, VT 05301	<u> </u>			10,000
CHILDREN'S MUSEUM OF THE EAST END	NONE		GENERAL PURPOSES	
376 COUNTY ROAD 79				1 500
BRIDGEHAMPTON, NY 11932		-		1,500
HAMILTON ANNUAL FUND	NONE		GENERAL PURPOSES	
198 COLLEGE HILL ROAD				
CLINTON NY 13323  Total SEE CO	TINUATION SHEE	<u>।</u> भूग ( ८ )	<b>▶</b> 3a	1 000
b Approved for future payment	NTINOATION SHEE		Ja	549,436
NONE	,			
			+	
Total		<del></del>	<b>▶</b> 3b	

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		oy section 512, 513, or 514	(e)		
-	(a) Business	( <b>b)</b> Amount	(C) Exclu- sion	(d)	Related or exempt		
1 Program service revenue:	code	Amount	code	Amount	function income		
a	-						
b							
c							
d				<del></del>			
6	-			<del></del>			
Topo and contracts from government againsts	-						
g Fees and contracts from government agencies	<del></del>	<del></del>	<del></del>	<del></del>			
2 Membership dues and assessments	F		<del></del>		<del></del>		
3 Interest on savings and temporary cash investments			03	6,480.			
4 Dividends and interest from securities			03	398,673.	<del></del>		
5 Net rental income or (loss) from real estate:							
a Debt-financed property			<del></del>	<del></del>			
b Not debt-financed property			<del></del>		<del></del>		
6 Net rental income or (loss) from personal							
property							
7 Other investment income				~			
8 Gain or (loss) from sales of assets other					<del></del>		
than inventory			03	471,517.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a ORDINARY GAIN FROM LP	_		03	15,030.			
b	_	· · · · · · · · · · · · · · · · · · ·					
c	_				- <del></del>		
d	-			· · · · · · · · · · · · · · · · · · ·			
e	-		_		<del></del>		
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>		0.	891,700.	0,		
13 Total. Add line 12, columns (b), (d), and (e)				13	891,700.		
(See worksheet in line 13 instructions to verify calculations.)					<del></del>		

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	<del></del>
	<del></del>
	<del></del>
	<del></del>
	<del></del>
Į.	

Form 990-PF (2015) KAZICKAS FAMILY FOUNDATION INC 13-4011883 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 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) X (2) Other assets X 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 16(1) (2) Purchases of assets from a noncharitable exempt organization 16(2) (3) Rental of facilities, equipment, or other assets 16(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 16(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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. (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements 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? X No **b** If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here Signature of officer or thistee Print/Type preparer's name Preparer's SCOTT SANDERS, CPA, Paid

Preparer

**Use Only** 

PFS, CGMA, CFP, CFS

Firm's name ► SANDERS THALER VIOLA

Firm's address ▶ 350 JERICHO TURNPIKE

JERICHO, NY 11753

KAZICKAS FAMILY FOUNDATION INC
Part IV Capital Gains and Losses for Tax on Investment Income

' (a) List a 2-story	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
<del></del>	UST, - SEE SCHEDUI	<del></del>	P		12/31/15
b INV BANK & TR			P		$\frac{12}{31}$
	- SEE SCHEDULE I		P		12/31/15
d N BERMAN #219			P	<del> </del>	$\frac{12}{31}$
e THRU K-1S	DEE COMBOUR	<u></u>	P	<del></del>	12/31/15
† THRU K-1S					12/31/15
		<del></del>			12/ 11/15
_g h		<del></del>			
- <del>''</del>					
·			<del></del>	<del> </del>	<del></del>
k				<del> </del>	<del></del>
1					
m					<del></del>
n					<del></del>
0					
(a) Crass sales save	(f) Depreciation allowed	(g) Cost or other basis	(h	Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale	(e) r	lus (f) minus (g)	
a 23,537	•	28,987.			-5,450.
b 476,388	•	210,469.			265,919.
c 118,521	•	132,026.			-13,505.
d 407,660	•	231,413.			176,247.
e 49,429	•				49,429.
f		1,123.			-1,123.
g					
<u>h</u>			·		
1		<u> </u>			
1					
<u>k</u>			<del> </del>		<del></del>
m					
<u>n</u>		<del></del>			
Occasion and the contract of the	(6)	the foundation of 40/04/00	<del></del>	<del></del>	
Complete only for assets snow	wing gain in column (h) and owned by	<del></del>	(I) Los	ises (from col. (h)) of col. (h) gain ovei	r col (k)
(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	but n	ot less than "-0-")	COL (K),
	83 01 12/3 1/03	Over cor. (j), it ally		<del></del>	
<u>a</u>	<del></del>	<del>                                     </del>		<del></del>	-5,450.
<u>b</u>		<del> </del>			265,919. -13,505.
d d	<del></del>	<del></del>			$\frac{-13,303.}{176,247.}$
	<del></del>	<del></del>			49,429.
<u>e</u> f	<del> </del>	<del></del>			-1,123.
<del>'</del> g	<del> </del>	<del>                                     </del>	<del></del>		-1,123.
h	<del></del>	<del> </del>			
1					
<u></u>					<del></del>
k	)				
1					
m					
0					
2 Capital gain net income or (net	( If gain, also enti	er in Part I, line 7 -0-" in Part I, line 7	2		A71 E17
	loss) as defined in sections 1222(5) a	_ I	2		471,517.
If gain, also enter in Part I, line	8, column (c).	<b>}</b>			
If (loss), enter "-0-" in Part I, lin	ne 8		3	<u> </u>	

Part XV **Supplementary Information** 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor LINAS LITHUANIAN SCHOOL NONE GENERAL PURPOSES 1019 NE 130TH STREET SEATTLE WA 98125 10,000. LITHUANIAN EDUCATION COUNCIL NONE GENERAL PURPOSES 170 QUERY ST NEW BEDFORD, MA 02745 10,000. MAIRONIS LITHUANIAN SCHOOL NEW YORK NONE GENERAL PURPOSES 206 SKILLMAN AVENUE BROOKLYN, NY 11211 2,200, NORTH AMERICAN LITHUANIAN SONG NONE GENERAL PURPOSES FESTIVAL 525 S. RACINE STREET CHICAGO, IL 60607 15,000. SCAN NEW YORK NONE GENERAL PURPOSES 345 EAST 102ND STREET, 3RD FLOOR NEW YORK, NY 10029 7,500. THE ELLEN HERMANSON FOUNDATION NONE GENERAL PURPOSES 200 WEST END AVENUE, SUITE 12G 4.000. NEW YORK, NY 10023 THE FEINSTEIN INST FOR MEDICAL NONE GENERAL PURPOSES RESEARCH 350 COMMUNITY DRIVE MANHASSET, NY 11030 6,000. NONE THRU PASS-THRU INVESTMENTS GENERAL PURPOSES C/O 375 PARK AVENUE, SUITE 2800 NEW YORK, NY 10152 40. VIESOJI ISTAIGA SB. JONO VAIKAI NONE GENERAL PURPOSES SV.JONO G.13-6 VILINIUS LITHUANIA 01123 6,000. LEUKEMIA & LYMPHOMA SOCIETY NONE GENERAL PURPOSES 1324 MOTOR PKWY #102 ISLANDIA, NY 11749 1,000. Total from continuation sheets 504 936 KAZICKAS FAMILY FOUNDATION INC

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient AMERICAN COUNCILS FOR INTERNATIONAL NONE GENERAL PURPOSES EDUCATION 1828 L ST NW WASHINGTON DC 20036 25,000. THE ALTMAN/KAZICKAS FOUNDATION NONE GENERAL PURPOSES 352 7TH AVE., STE. 1501 NEW YORK NY 10001 16,700. ELEANOR WHITMORE EARLY CHILDHOOD NONE GENERAL PURPOSES CENTER GINGERBREAD LANE EXTENSION EAST HAMPTON, NY 11937 10,000. DONALDSON ADOPTION INSTITUTE NONE GENERAL PURPOSES 120 E 38TH ST NEW_YORK._NY 10016 1.000. WIGGLE YOUR TOES NONE GENERAL PURPOSES PO BOX 385141 BLOOMINGTON, MN 55438 25,000. ALL FOR THE EAST END NONE GENERAL PURPOSES P.O. BOX 1665 SAG HARBOR NY 11963 10,000. LITHUANIAN AMERICAN COMMUNITY, INC NONE GENERAL PURPOSES 43 ANTHONY ST. NEW HAVEN, CT 06515 11,000. HOOPS FOR HOPE NONE GENERAL PURPOSES PO BOX 7391 WACO TX 76714 5,000. NONE LITHUANIAN CATHOLIC RELIGIOUS AID GENERAL PURPOSES 6425 PERRY AVE MASPETH, NY 11378 5,000. THE NATURE CONSERVANCY NONE GENERAL PURPOSES 4245 N. FAIRFAX DRIVE, SUITE 100 ARLINGTON, VA 22203 15,000. Total from continuation sheets

Part XV Supplementary Information				,
3 Grants and Contributions Paid During the Y	<del>~~~~~~</del>			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
MERCY CENTER	NONE		GENERAL PURPOSES	
377 E 145TH ST				
BRONX, NY 10454			+	10,000,
MOST HOLY TRINITY PARISH	NONE		GENERAL PURPOSES	
79 BUELL LN			}	
EAST HAMPTON, NY 11937				5,000
				1
LIETUVOS LAISVES KOVOTOJU SAJUNGA	NONE		GENERAL PURPOSES	
SV.JONO G.13-6 VILINIUS, LITHUANIA 01123				4 000
VILINIOS, HITHOMNIA UTIZS			<del> </del>	4,000.
	10111			
BERNARDINU JAUNIMO CENTRAS SV.JONO G.13-6	NONE		GENERAL PURPOSES	•
VILINIUS, LITHUANIA 01123				6,000.
		<del></del>		
/SI SOSTINES KREPSINIO	NONE		GENERAL PURPOSES	
SV.JONO G.13-6	lione		SEMERAL TORTOBED	,
VILINIUS, LITHUANIA 01123				41,683.
XAUNO TECHNOLOGIJOS UNIVERSITETAS	NONE		GENERAL PURPOSES	)
EV.JONO G.13-6	HONE		GENERAL FORFOSES	
VILINIUS, LITHUANIA 01123				27.000.
WELL DELICINOS MUSTAOS CENTRAS MILIATUS	NONE		GENERAL DIMENDARIA	
VSI RELIGINES MUZIKOS CENTRAS VILNIUS SV.JONO G.13-6	NOINE		GENERAL PURPOSES	
VILINIUS, LITHUANIA 01123			<u> </u>	17,500.
/ALDO ADAMKAUS BIBLIOTEKA-MUZIEJUS	NONE		GENERAL PURPOSES	
SV.JONO G.13-6				
VILINIUS, LITHUANIA 01123	<del> </del>			125,000.
	}			
/SI PAZAISLIO MUZIKOS FESTIVALIS	NONE		GENERAL PURPOSES	
SV.JONO G.13-6				
VILINIUS, LITHUANIA 01123			<del> </del>	5,138,
NACIONALINE ALOPECIJOS	NONE		CENEDAL DIEDOCES	
ASOCIAACSIAULIAI	NONE		GENERAL PURPOSES	
SV.JONO G.13-6				
VILINIUS, LITHUANIA 01123	<u> </u>			5,000.
Total from continuation sheets				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of recipient any foundation manager Name and address (home or business) or substantial contributor AMATU MOKYKLA SODZIAUS MEISTRAI NONE GENERAL PURPOSES SV.JONO G.13-6 VILINIUS LITHUANIA 01123 6,000. NONE DIEVO APVAIZDOS SESERU GENERAL PURPOSES SV.JONO G.13-6 VILINIUS LITHUANIA 01123 16,000. SKALVIJOS KINO CENTRAS NONE SV.JONO G.13-6 GENERAL PURPOSES VILINIUS LITHUANIA 01123 4,488, MOKYKLU TOBULIINIMO CENTRAS NONE GENERAL PURPOSES SV.JONO G.13-6 VILINIUS LITHUANIA 01123 10,000. INT WOMENS ASSOCIATION PF VILNUIS NONE GENERAL PURPOSES SV.JONO G.13-6 VILINIUS LITHUANIA 01123 1,687. VSI KAUNO BIENALE KAUNAS NONE GENERAL PURPOSES SV.JONO G.13-6 VILINIUS_LITHUANIA_01123 5,000. PARAMOS FONDAS ORFEJAUS NONE GENERAL PURPOSES SV.JONO G.13-6 VILINIUS LITHUANIA 01123 10,000. LIETUVOS CARITAS NONE GENERAL PURPOSES SV.JONO G.13-6 VILINIUS LITHUANIA 01123 10,000, MERGELES MARIJOSE NEKALTOJO NONE GENERAL PURPOSES PRASIDEJIMO SV.JONO G,13-6 VILINIUS LITHUANIA 01123 10,000, Total from continuation sheets

#### 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.lrs.gov/form990.

OMB No 1545-0047

2015

WAGTOWAG BANTAN POINTRACTON TW

Employer identification number

	K	AZICKAS FAMILY FOUNDATION INC	13-4011883
Organiz	ation type (check o	one).	
Filers of	f:	Section:	
Form 99	00 or 990-EZ	501(c)( ) (enter number) organization	
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
		527 political organization	
Form 99	90-PF	X 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 <b>General Rule</b> or a <b>Special Rule.</b> )(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See instructions
General	l Rule		
X		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	
Special	Rules		
	sections 509(a)(1) any one contribut	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amout, line 1 Complete Parts I and II.	, or 16b, and that received from
	year, total contrib	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eductricity to children or animals. Complete Parts I, II, and III	•
	year, contribution is checked, enter purpose. Do not contribution	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled make the total contributions that were received during the year for an exclusively religious omplete any of the parts unless the <b>General Rule</b> applies to this organization because its, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box s, charitable, etc.,
but it m	ust answer "No" or	hat is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fit the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

### KAZICKAS FAMILY FOUNDATION INC

13-4011883

Part I	Contributors (see instructions) Use duplicate copies of Part I if addit	ional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARITIES AID FOUNDATION AMERICA  1800 DIAGONAL RD #150  ALEXANDRIA, VA 22314	- \$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

### KAZICKAS FAMILY FOUNDATION INC

13-4011883

Part II Nonc	cash Property (see instructions) Use duplicate copies of P	art 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	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
3453 10-26-15	<del></del>		l <u> </u>

Name of organization Employer identification number KAZICKAS FAMILY FOUNDATION INC

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 infe once) Use duplicate copies of Part III if additional space is needed (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 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. 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

FORM 990-PF INTERE	ST ON SAVING	S AND T	EMPOR	ARY CASH	INVESTMENTS	STATEMENT 1
SOURCE			(A) VENUE BOOK		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
VARIOUS ACCOUNTS VARIOUS PASS-THRU I	NVESTMENTS		6,4	6. 74.	6. 6,474.	
TOTAL TO PART I, LI	NE 3		6,48	30.	6,480.	
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SEC	URITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	(A) REVENUE PER BOOK		
VARIOUS ACCOUNTS VARIOUS PASS-THRU	56,681.		0.	56,68	-	
TO PART I, LINE 4	341,992.		0.	341,99 398,67	<del></del>	
FORM 990-PF		OTHER	INCO	Æ		STATEMENT 3
DESCRIPTION			REV	(A) JENUE BOOKS	(B) NET INVEST- MENT INCOM	
ORDINARY GAIN FROM	LP			15,030.	15,030	).
TOTAL TO FORM 990-P	F, PART I, I	LINE 11		15,030.	15,030	).

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	16,671.	12,503.		4,168.	
TO FORM 990-PF, PG 1, LN 16B	16,671.	12,503.		4,168.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S	ratement 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MANAGEMENT FEE EXPENSE PROFESSIONAL FEES	45,500. 8,871.	45,500.		0. 8,871.	
TO FORM 990-PF, PG 1, LN 16C	54,371.	45,500.		8,871.	
FORM 990-PF	TAX	ES	S	PATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES WITHHELD EXCISE TAXES PAYROLL TAXES NYS CORPORATION TAX	1,868. 32,209. 7,464. 3,608.	1,868. 0. 0.		0. 0. 7,464. 0.	
TO FORM 990-PF, PG 1, LN 18	45,149.	1,868.		7,464.	

FORM 990-PF	OTHER E	XPENSES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
BANK CHARGES	1,654.	1,654.			0.
INSURANCE	370.			3'	70.
INVESTMENT EXPENSES	56,891.	56,891.			0.
INVESTMENT INTEREST EXPENSE OTHER EXPENSES - SEE	5,571.	5,571.			0.
SCHEDULE	79,800.	0.			0.
PAYROLL SERVICE FEES	879.	0.		8'	79.
LICENSES & FEES	750.	0.			0.
TO FORM 990-PF, PG 1, LN 23	145,915.	64,116.		1,2	49.
FORM 990-PF OTHER DECREAS	ES IN NET AS	SETS OR FUND	BALANCES	STATEMENT	8
FORM 990-PF OTHER DECREAS  DESCRIPTION  K-1 UNREALIZED LOSS K-1 BOOK/TAX DIFFERENCES	ES IN NET AS	SETS OR FUND	BALANCES	AMOUNT	75.
DESCRIPTION  K-1 UNREALIZED LOSS	ES IN NET AS	SETS OR FUND	BALANCES	AMOUNT 177,0 37,1	75. 49.
DESCRIPTION  K-1 UNREALIZED LOSS K-1 BOOK/TAX DIFFERENCES		SETS OR FUND	BALANCES	AMOUNT 177,0 37,1	75. 49. 67.
DESCRIPTION  K-1 UNREALIZED LOSS K-1 BOOK/TAX DIFFERENCES K-1 NON-DEDUCTIBLE EXPENSES			BALANCES	AMOUNT 177,0 37,1	75. 49. 67.
DESCRIPTION  K-1 UNREALIZED LOSS K-1 BOOK/TAX DIFFERENCES K-1 NON-DEDUCTIBLE EXPENSES  TOTAL TO FORM 990-PF, PART I	II, LINE 5	E STOCK	BALANCES  OK VALUE	AMOUNT 177,0 37,1	75. 49. 67. 91.
DESCRIPTION  K-1 UNREALIZED LOSS K-1 BOOK/TAX DIFFERENCES K-1 NON-DEDUCTIBLE EXPENSES  TOTAL TO FORM 990-PF, PART I  FORM 990-PF	II, LINE 5 CORPORAT	E STOCK		AMOUNT  177,0 37,1  214,2	75. 49. 67. 91.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	T
VARIOUS INVESTMENTS - AVAILABLE UPON REQUEST	COST	3,150,087.	3,183,1	05.
TOTAL TO FORM 990-PF, PART II, LINE	13	3,150,087.	3,183,1	05.

### Schedule AA

### Eagle Capital

### **REALIZED GAINS AND LOSSES**

### The Kazickas Family Foundation State Street A/C # XXXXX4771

From 01-01-2015 Through 12-31-2015

						Gain o	or Loss
Open	Close			Cost			
Date	Date	Quantity	Security	Basis	Proceeds	Short Term	Long Term
10-01-2009	01-22-2015	500	Comcast Corp-Special Cl A (Delisted)	7,522.50	28,045.28		20,522.78
10-01-2009	02-11-2015	300	Comcast Corp-Special Cl A (Delisted)	4,513.50	17,170.42		12,656.92
09-22-2005	04-10-2015	300	Wal-Mart Stores Inc	12,859.89	24,207.48		11,347.59
08-02-2012	04-15-2015	800	Morgan Stanley	10,527.76	29,874.65		19,346.89
07-26-2012	04-15-2015		Morgan Stanley	7,821.00	22,405.98		14,584.98
12-02-2014	04-27-2015	0	Alphabet Inc Cl C	167.80	170.18	2.38	•
05-01-2006	05-28-2015	200	Coca Cola Co	4,216.45	8,221.76		4,005.31
01-21-2005	05-29-2015	200	UnitedHealth Group Inc	8,756.26	24,098.09		15,341.83
05-01-2006	06-19-2015	300	Coca Cola Co	6,324.67	12,155.45		5,830.77
02-07-2006	06-19-2015	800	Coca Cola Co	16,510.56	32,414.52		15,903.96
02-06-2006	06-19-2015	600	Coca Cola Co	12,277.80	24,310.89		12,033.09
05-28-2010	06-26-2015	100	Loews Corp	3,252.41	3,893.13		640.72
06-01-2010	06-26-2015	300	Loews Corp	9,635.19	11,679.38		2,044.19
01-21-2005	07-02-2015	0	Liberty Global Plc LiLAC - A	1.08	4.49		3.41
01-21-2005	07-02-2015	0	Liberty Global Plc LiLAC - C	3.40	13.20		9.80
06-12-2015	07-06-2015	100	Kraft Foods Group Inc	1,227.90	1,650.00	422.10	
06-22-2015	07-06-2015		Kraft Foods Group Inc	2,932.76	3,300.00	367.24	
12-14-2012	07-10-2015		Nestle S A Rep RG SH ADR	19,662.18	22,588.47		2,926.29
04-09-2009	07-10-2015	200	Nestle S A Rep RG SH ADR	6,886.10	15,058.98		8,172.88
02-09-2007	07-20-2015	200	3M Company	14,967.32	31,450.96		16,483.64
02-14-2013	07-27-2015		Constellation Brands Inc	2,164.00	5,858.89		3,694.88
02-14-2013	08-26-2015	50	Constellation Brands Inc	2,164.00	6,076.35		3,912.34
01-21-2005	08-26-2015	125	UnitedHealth Group Inc	5,472.66	14,123.45		8,650.79
01-24-2005	09-08-2015	175	Praxair Inc	7,224.14	18,198.37		10,974.23
10-29-2009	09-15-2015	25	W R Berkley Corp	621.06	1,362.65		741.59
01-05-2010	09-15-2015		W R Berkley Corp	1,826.77	4,087.95		2,261.18
01-05-2010	09-30-2015		W R Berkley Corp	1,217.84	2,712.80		1,494.95
01-24-2005	10-05-2015		Praxair Inc	8,256.16	21,196.51		12,940.35

This report is provided for informational purposes only and the data herein may be unreconciled. The account records maintained by your custodian and your accountant are the legal records for your account, and should be used in the preparation of your tax returns. We advise you to seek advice regarding all tax matters. For reporting purposes, Eagle Capital Management assumes a cash yield of zero. Please refer to your custodian's statement for your cash yield. Differences in accounting methods may cause the cost basis of a security in your custodial records to differ from the one contained in this report.

# Schedule AA

Cost

Basis

24,658.83

4,328.01

**Proceeds** 

18,416.66

13,384.33

Gain or Loss

Short Term Long Term

9,056.32

-6,242.17

Eagle Capital

### **REALIZED GAINS AND LOSSES**

### The Kazickas Family Foundation State Street A/C # XXXXX4771

From 01-01-2015 Through 12-31-2015

Security

700 Grupo Televisa

SA-Spon ADR 100 Constellation Brands Inc

Open

Date

07-23-2015 10-05-2015

02-14-2013 10-07-2015

Close

Date

Quantity

11-03-2014 12-22-2015	50 Amazon.com Inc	15,270.31	33,194.16		17,923.85
01-24-2005 12-28-2015	900 Altera Corp	16,185.60	48,600.00		32,414.40
TOTAL GAINS				791.72	265,919.96
TOTAL LOSSES				-6,242.17	0.00
TOTAL REALIZED GAIN/LO	SS 260,469.51	239,455.92	499,925.43	-5,450.45	265,919.96
Summary					
·	Proceeds	Cost B	basis	Ga	in (Loss)
Short-Term	23,536.84	28,98	87. 29		,450.45)
Long Term	476,388.59	•	08.63		1950.73/
Total	499, 925.43	a39.4	55.92		on 4kg s 1

This report is provided for informational purposes only and the data herein may be unreconciled. The account records maintained by your custodian and your accountant are the legal records for your account, and should be used in the preparation of your tax returns. We advise you to seek advice regarding all tax matters. For reporting purposes, Eagle Capital Management assumes a cash yield of zero. Please refer to your custodian's statement for your cash yield. Differences in accounting methods may cause the cost basis of a security in your custodial records to differ from the one contained in this report.

Account No

541-19219

NEUBERGER BERMAN

NEUBERGER BERMAN LLC OH4-RM00 P O BOX 183211 COLUMBUS, OH 43218 FOR UNDELIVERABLE MAIL ONLY Account Name

KAZICKAS FAMILY FOUNDATION INC

Recipient's Identification Number. XX-XXX1883

Account Executive No

002

Telephone Number (212) 476-5505

ORIGINAL

12/31/15

Schoolle BB

### 2015 Supplemental Gain or (Loss) Information Short-Term Gain or (Loss) from Transactions not Reported to IRS

ate of Sale or Exchange	Date of Acquisition	Description	Symbol	Quantity Comm	s Proceeds Less ission and Option Premium	Cost or Other Basis	ŘĚALIZED GAIN/(LOSS)
02/13/15 H	08/18/14	AMERICAN EXPRESS COMPANY	AXP 025816109	50 00000	3,921 24	4,358 75	(437 51
07/21/15 H	05/05/15	BED BATH & BEYOND INC	BBBY 075896100	100 00000	6,727 90	7,154 72	(426 82
07/24/15 H	05/05/15	BED BATH & BEYOND INC	BBBY 075896100	150 00000	9,887 51	10,732 08	(844 57
12/04/15 S	05/05/15	***FLY LEASING LIMITED SPONSORED ADR	FLY 34407D109	250 00000	3,395 78	3,710 10	(314 32
09/25/15 H	02/06/15	ISHARES IBOXX \$ INVESTMENT GRADE CORPORATE BOND ETF	LQD 464287242	434,00000	50,247 64	50,704 18 <b>T</b>	(456 54
10/01/15 H	05/13/15	LINCOLN NATIONAL CORP-IND	LNC 534187109	25 00000	1,183 38	1,463 33	(279 95
04/16/15 S	07/17/14	SANDISK CORP	SNDK 80004C101	50 00000	3,360 56	4,718 84	(1,358 28
04/16/15 S	08/18/14	SANDISK CORP	SNDK 80004C101	50 00000	3,360.56	4,721 45	(1,360.89
04/16/15 S	07/21/14	SANDISK CORP	SNDK 80004C101	100 00000	6,721 13	9,366 36	(2,645 23)
11/16/15 H	12/03/14	···SANOFI SPONSORED ADR	SNY 80105N105	200 00000	8,598 58	9,629 32	(1,030 74)
05/21/15 H	06/06/14	UNITED CONTINENTAL HLDGS INC	UAL 910047109	50 00000	2,725 04	2,386 45	338 59
05/13/15 S	06/16/14	VIACOM INC CLASS B	VIAB 92553P201	100 00000	6,458 93	8,653 42	(2,194 49
10:14:15 H	07,20,15	WAL-MART STORES INC	931142103	100 00000	60 830,0	7,231 97	(4,475,99)

Account No

541-19219

NEUBERGER BERMAN

NEUBERGER BERMAN LLC OH4-RM00 P O BOX 183211 COLUMBUS, OH 43218 FOR UNDELIVERABLE MAIL ONLY Account Name

XX-XXX1883

KAZICKAS FAMILY FOUNDATION INC

Recipient's Identification Number

Account Executive No

002

Telephone Number (212) 476-5505

**ORIGINAL** 

12/31/15

### 2015 Supplemental Gain or (Loss) Information (continued)

### Short-Term Gain or (Loss) from Transactions not Reported to IRS

Date of Sale or Exchange	Date of Acquisition	Description	Symbol CUSIP	<ul><li>(*) おした主意に保存されると、112 とよう。</li></ul>	s Proceeds Less hission and Option Premium	Cost or Other Basis	REALIZED GAINI(LOSS)
10/16/15 <b>H</b>	07/24/15	WAL-MART STORES INC	WMT 931142103	100 00000	5,876.93	7,194 88	(1,317.95)
	14 ITEMS - Total Short-Term Not Reported Transactions Gain or (Loss)				118,521.27	132,025.85	(13,504.58)

#### 2015 Supplemental Gain or (Loss) Information

#### Long-Term Gain or (Loss) from Transactions not Reported to IRS

Date of Sale of Exchange	Date of Acquisition	Description	Symbol	Grow Quantity Comm	ss Proceeds Less nission and Option Premium	Cost of Other Basis	REALIZEDI GAIN/(LOSS)
06/23/15	H 05/18/09	***ACCENTURE PLC IRELAND SHS CL A	ACN G1151C101	250 00000	24,568 17	7,453 02	17,115 15
06/08/15	H 10/19/11	***AON PLC SHS CL A	AON G0408V102	100 00000	10,090 38	4,908 00 T	5,182 38
02/13/15		AMERICAN EXPRESS COMPANY	AXP 025816109	450 00000	35,291 18	17,175 81	18,115 37
01/28/15	H 04/25/13	BOEING CO	BA 097023105	50 00000	7,047 19	4,607 40	2,439 79
01/28/15	H 07/11/13	BOEING CO	BA 097023105	50 00000	7,047 19	5,325 41	1,721.78
03/06/15		BOEING CO	BA 097023105	50 00000	7,684 74	4,607 39	3,077 35
03/16/15	H 03/15/12	BOEING CO	BA 097023105	50 00000	7,670.60	3,774 39	3,896 21
05/21/15	H 11/10/10	CABOT OIL & GAS CORP	COG 127097103	850 00000	29,763,73	7,268 17	22,495 56

Account No.

541-19219

KAZICKAS FAMILY FOUNDATION INC

NEUBERGER BERMAN

**NEUBERGER BERMAN LLC** OH4-RM00 P O. BOX 183211 COLUMBUS, OH 43218 FOR UNDELIVERABLE MAIL ONLY Account Name:

Recipient's Identification Number XX-XXX1883

Account Executive No

002

Telephone Number (212) 476-5505

ORIGINAL:

12/31/15

Schedule BB

### 2015 Supplemental Gain or (Loss) Information (continued) Long-Term Gain or (Loss) from Transactions not Reported to IRS

Date of Sale		Date of Acquisition	Description	Symbol CUSIP	Quantity	is Proceeds Less ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	Cost or Other Basis	REALIZED GAIN/(LOSS)
11/20/15	Н	06/21/10	COVANTA HOLDING CORPORATION	CVA 22282E102	500 00000	7,886 35	7,946 66	(60 31)
05/21/15	Н	05/10/13	CARPENTER TECHNOLOGY CORP	CRS 144285103	100 00000	4,266 97	4,726 26	(459 29)
06/08/15	Н	02/14/12	EOG RES INC	EOG 26875P101	100.00000	8,926 36	5,645 71	3,280 65
09/25/15	н	06/12/12	ISHARES IBOXX \$ INVESTMENT GRADE CORPORATE BOND ETF	LQD 454287242	19 00000	2,199 78	2,208 14 T	(8 36)
12/14/15	Н	06/12/12	ISHARES IBOXX \$ INVESTMENT GRADE CORPORATE BOND ETF	LQD 464287242	333 00000	38,178 01	38,700.48 T	(522.47)
08/04/15	Н	02/24/06	INTERNATIONAL BUSINESS MACHINES CORP	IBM 459200101	50 00000	7,871 40	4,004.33	3,867 07
06/18/15	Н	09/07/12	INTERNATIONAL PAPER CO	IP 460146103	50 00000	2,552 03	1,765 08 T	766 95
06/18/15	Н	02/10/12	INTERNATIONAL PAPER CO	IP 460146103	150 00000	7,656 08	4,667 24 T	2,988 84
06/18/15	Н	02/21/13	INTERNATIONAL PAPER CO	IP 460146103	150 00000	7,656 09	6,121 <i>77</i> T	1,534 32
06/08/15	Н	02/21/13	INTERNATIONAL PAPER CO	≀P 460146103	200 00000	10,124 97	8,162.37 <b>T</b>	1,962 60
11/13/15	Н	08/17/11	MICROSOFT CORP	MSFT 594918104	100 00000	5,277 75	2,508 62	2,769,13
06/17/15	Н	01/16/07	PIONEER NATURAL RESOURCES COMPANY	PXD 723787107	50 00000	7,273 36	1,908 20	5,365 16
C6'C2'' 5	Н	01″6″07	PIONEER NATURAL PESCURCES COMPANY	ድ <u>ላር</u> 723787107	100 00000	14,079 94	3'81ê 40	11,163.54

NEUBERGER BERMAN

Account No.

541-19219

Account Name

KAZICKAS FAMILY FOUNDATION INC.

NEUBERGER BERMAN LLC OH4-RM00 P.O BOX 183211 COLUMBUS, OH 43218

Recipient's Identification Number

XX-XXX1883

FOR UNDELIVERABLE MAIL ONLY

Account Executive No

002

Telephone Number (212) 476-5505

ORIGINAL

12/31/15

Schedule BB

## 2015 Supplemental Gain or (Loss) Information (continued) Long-Term Gain or (Loss) from Transactions not Reported to IRS

Date of Sale or Exchange	Date of Acquisition.	Description	Symbol CUSIP	Quantity Com	ss Proceeds Less nission and Option Premium	Cost or Other Basis	REALIZED GAIN/(LOSS)
11/23/15 H	03/06/07	PACKAGING CORP AMER	PKG 695156109	200 00000	13,455 67	4,901.20	8,554 47
06/18/15 <b>H</b>	02/16/06	ORACLE CORPORATION	ORCL 68389X105	500 00000	20,870 66	6,200 70	14,669 96
11/16/15 <b>H</b>	10/31/14	···SANOFI SPONSORED ADR	SNY 80105N105	350 00000	15,047 52	16,231 87	(1,184 35)
05/21/15 <b>H</b>	04/29/09	THE TRAVELERS COMPANIES INC	TRV 89417E109	150 00000	15,510 73	6,303 70	9,207 03
05/21/15 H	05/18/09	THE TRAVELERS COMPANIES INC	TRV 89417E109	400 00000	41,361.96	16,021 37	25,340 59
05/21/15 <b>H</b>	02/28/14	UNITED CONTINENTAL HLDGS INC	UAL 910047109	100 00000	5,450 08	4,517 38	932 70
05/21/15 <b>H</b>	01/09/14	UNITED CONTINENTAL HLDGS INC	UAL 910047109	150 00000	8,175 11	6,747 03	1,428 08
06/08/15 <b>H</b>	01/09/14	UNITED CONTINENTAL HLDGS INC	UAL 910047109	150 00000	7,741 62	6,747 03	994 59
07/24/15 <b>H</b>	10/01/10	VIACOM INC CLASS B	VIAB 92553P201	200 00000	11 342 85	7,298 40	4 044 45
07/22/15 H	10/01/10	VIACOM INC CLASS B	VIAB 92553P201	250 00000	14,691 60	9,122 99	5,568 61
		31 ITEMS - Total Long-Term Not Reporte	d Transactions Gain or (	Loss)	407,660.07	231,412.52	176,247 55

If you are required to file a return, a negligence penalty or other sanctions may be imposed on you if this income is taxable and the IRS determines that it has not been reported.