

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

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

▶ **Do not enter social security numbers on this form as it may be made public.**  
 ▶ **Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).**

OMB No 1545-0052  
**2016**  
**Open to Public Inspection**

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

Name of foundation NEEDMOR C/O THE NORTHERN TRUST COMPANY		<b>A Employer identification number</b> 34-6504812
Number and street (or P O box number if mail is not delivered to street address) PO BOX 804298	Room/suite	<b>B Telephone number (see instructions)</b>  (312) 630-6000
City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60680		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 24,912,183	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		<b>(a)</b> Revenue and expenses per books	<b>(b)</b> Net investment income	<b>(c)</b> Adjusted net income	<b>(d)</b> Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	496,000			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	13,346	13,346		
	<b>4</b> Dividends and interest from securities	492,331	492,331		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	508,326			
	<b>b</b> Gross sales price for all assets on line 6a	3,842,909			
	<b>7</b> Capital gain net income (from Part IV, line 2)		508,326		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	1,510,003	1,014,003			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	149,456	37,701		111,755
	<b>14</b> Other employee salaries and wages	154,891	0		154,891
	<b>15</b> Pension plans, employee benefits	117,722	0		117,722
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	28,360	14,180		14,180
	<b>c</b> Other professional fees (attach schedule)	147,952	136,573		11,379
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	19,267	11,267		0
	<b>19</b> Depreciation (attach schedule) and depletion	1,215	0		
	<b>20</b> Occupancy	22,305	0		22,305
	<b>21</b> Travel, conferences, and meetings	101,416	0		101,416
	<b>22</b> Printing and publications	3,540	0		3,540
	<b>23</b> Other expenses (attach schedule)	43,215	0		43,215
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	789,339	199,721		580,403
	<b>25</b> Contributions, gifts, grants paid	1,655,000			1,655,000
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	2,444,339	199,721		2,235,403	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	-934,336				
<b>b Net investment income</b> (if negative, enter -0-)		814,282			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	78,755	31,036	31,036
	<b>2</b> Savings and temporary cash investments . . . . .	421,777	323,647	323,647
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	14,669,519	13,799,860	18,419,461
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	2,595,097	2,677,484	2,674,059
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	3,468,594	3,468,594	3,461,157
	<b>14</b> Land, buildings, and equipment basis ▶ _____ 14,458 Less accumulated depreciation (attach schedule) ▶ _____ 12,635	3,038	1,823	1,823
<b>15</b> Other assets (describe ▶ _____)	1,000	1,000	1,000	
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	21,237,780	20,303,444	24,912,183	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable. . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule). . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .	21,237,780	20,303,444	
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .			
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund			
<b>29</b> Retained earnings, accumulated income, endowment, or other funds				
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	21,237,780	20,303,444		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	21,237,780	20,303,444		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>			
<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)		<b>1</b>	21,237,780
<b>2</b> Enter amount from Part I, line 27a . . . . .		<b>2</b>	-934,336
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____		<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .		<b>4</b>	20,303,444
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____		<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .		<b>6</b>	20,303,444

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1 a SALE OF PUBLICLY TRADED SECURITIES</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 3,842,909		3,334,583	508,326
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
<b>a</b>			508,326
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	508,326
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	2,255,050	25,323,898	0.089048
2014	2,027,845	26,166,519	0.077498
2013	2,272,758	24,971,576	0.091014
2012	2,201,881	23,515,881	0.093634
2011	2,248,608	23,980,714	0.093767
<b>2 Total</b> of line 1, column (d)			0.444961
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0.088992
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			24,122,751
<b>5</b> Multiply line 4 by line 3			2,146,732
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			8,143
<b>7</b> Add lines 5 and 6			2,154,875
<b>8</b> Enter qualifying distributions from Part XII, line 4			2,235,403

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

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

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, domestic foundations, tax under section 511, subtitle A tax, and total credits. Total amount owed is 11,013, with 11,013 refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaign participation, political expenditures, and state reporting requirements. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, donor advised funds, public inspection requirements, and books in care of GMA Foundations.

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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

16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? Includes instructions for exceptions and filing requirements for FinCEN Form 114.

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

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

Main table for Part VII-B with 3 columns: Question, Yes, No. Rows 1a-4b covering various activities like sale of property, borrowing money, compensation, taxes on undistributed income, and business holdings.

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

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

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

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

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

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

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

**b** If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  **5b**  **No**  
Organizations relying on a current notice regarding disaster assistance check here.

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No  
If "Yes," attach the statement required by Regulations section 53 4945-5(d)

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

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

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

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No **7b**

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

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

**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	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MARY K SOBECKI 539 EAST FRONT STREET PERRYSBURG, OH 43551	ASSOCIATE DIRECTOR 40 00	96,542	46,734	0
CATHERINE SLABAUGH 539 EAST FRONT STREET PERRYSBURG, OH 43551	OFFICE/GRANT MANAGER 40 00	58,349	20,001	0

**Total** number of other employees paid over \$50,000.  **0**

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

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
BOSTON TRUST & INVESTMENT MANAGEMENT COMPANY ONE BEACON STREET BOSTON, MA 02108	INVESTMENT MANAGEMENT	87,885
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ▶		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3. . . . . ▶	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	24,490,103
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	0
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	24,490,103
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	24,490,103
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	367,352
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	24,122,751
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	1,206,138

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	1,206,138
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	8,143
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	8,143
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	1,197,995
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	1,197,995
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	1,197,995

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	2,235,403
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	2,235,403
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	8,143
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	2,227,260

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



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

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				1,197,995
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .	1,073,686			
<b>b</b> From 2012. . . . .	1,043,621			
<b>c</b> From 2013. . . . .	1,055,623			
<b>d</b> From 2014. . . . .	769,396			
<b>e</b> From 2015. . . . .	1,037,069			
<b>f</b> Total of lines 3a through e. . . . .	4,979,395			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>2,235,403</u>				
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				1,197,995
<b>e</b> Remaining amount distributed out of corpus	1,037,408			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )				0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,016,803			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .		0		
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	1,073,686			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .	4,943,117			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .	1,043,621			
<b>b</b> Excess from 2013. . . . .	1,055,623			
<b>c</b> Excess from 2014. . . . .	769,396			
<b>d</b> Excess from 2015. . . . .	1,037,069			
<b>e</b> Excess from 2016. . . . .	1,037,408			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

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

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

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

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

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

MARY SOBECKI GRANTS MANAGER  
539 EAST FRONT STREET  
PERRYSBURG, OH 43551  
(419) 255-5560  
MSOBECKI@NEEDMORFUND OR

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

NATIONAL LEARNING COMMUNITY APPLICANTS SHOULD COMPLETE THE FOUNDATION'S PRE-APPLICATION INQUIRY FORM, WHICH IS AVAILABLE ON THEIR WEBSITE, BY MAY 29, 2016 WITHIN TWO WEEKS, YOU WILL BE INFORMED WHETHER SUBMISSION OF A FULL PROPOSAL BY YOUR ORGANIZATION IS APPROPRIATE THE FULL PROPOSAL IS AVAILABLE ON THE FOUNDATION'S WEBSITE THE FULL PROPOSAL IS DUE BY JUNE 30, 2016 APPLICANTS LOCATED IN THE SOUTHEAST CLUSTER (INCLUDES AL, LA & MS) AND THE SOUTHWEST CLUSTER (INCLUDES AZ, NM & SOUTHERN PARTS OF CA & TX) SHOULD UTILIZE THE SOUTHEAST & SOUTHWEST CLUSTER APPLICATION FORM, WHICH IS AVAILABLE ON THE FOUNDATION'S WEBSITE THESE APPLICATIONS ARE DUE BY JANUARY 9, 2016

**c** Any submission deadlines

SEE ABOVE FOR DEADLINES

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

NEEDMOR FUND WILL NOT CONSIDER PROPOSALS FOR FUNDING OF THE FOLLOWING COMMUNITY DEVELOPMENT CORPORATIONS, SCHOLARSHIPS/FELLOWSHIPS, PRIVATE BUSINESSES, DIRECT SERVICE OR TRAINING PROGRAMS, CULTURAL ENRICHMENT PROGRAMS, FILMS, TV OR RADIO PRODUCTIONS, BOOKS, PUBLICATIONS OR RESEARCH, CONFERENCES, CAPITAL IMPROVEMENTS, LITIGATION, PROJECTS OUTSIDE THE U S , GOVERNMENT SPONSORED OR CONTROLLED PROJECTS, AND NATIONAL ORGANIZATIONS

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>			<b>▶ 3a</b>	1,655,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	0





**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MARY STRANAHAN C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	TRUSTEE (RESIGNED 11/2016) 1 00	0	0	0
KEN ROLLING C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	TRUSTEE 1 00	0	0	0
DANIEL STRANAHAN C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	TRUSTEE 1 00	0	0	0
JAMES DICKSON C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	SECRETARY/TREASURER/TRUSTEE 1 00	0	0	0
ANA GUERRERO C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	TRUSTEE 1 00	0	0	0
ABBY STRANAHAN C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	BOARD CHAIR/TRUSTEE 1 00	0	0	0
ANN STRANAHAN C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	TRUSTEE 1 00	0	0	0
PATTI STRANAHAN C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	TRUSTEE 1 00	0	0	0
NORTHERN TRUST COMPANY PO BOX 804298 CHICAGO, IL 60680	TRUSTEE 1 00	37,701	0	0
SUSAN R CHINN C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	VICE CHAIR/TRUSTEE 1 00	0	0	0
FRANK SANCHEZ C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	EXECUTIVE DIRECTOR 40 00	111,755	30,255	0
ELAINE STRANAHAN C/O NEEDMOR FUND 539 EAST FRONT ST PERRYSBURG, OH 43551	TRUSTEE 1 00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ACTION INSTITUTE NC 5500 EXECUTIVE CENTER DR SUITE 234 CHARLOTTE, NC 28212	N/A	PC	PROGRAM SUPPORT	30,000
ALABAMA COALITION FOR IMMIGRANT JUSTICE UNITED 117 SOUTH CREST DRIVE SUITE 202 BIRMINGHAM, AL 35209	N/A	PC	PROGRAM SUPPORT	30,000
ALLIANCE OF CALIFORNIANS FOR COMMUNITY EMPOWERMENT INSTITUTE (ACCE) 3655 S GRAND AVENUE SUITE 250 LOS ANGELES, CA 90007	N/A	PC	PROGRAM SUPPORT	30,000
BATON ROUGE SPONSORING COMMITTEE 756 S ACADIAN THRUWAY SUITE 1 BATON ROUGE, LA 70806	N/A	PC	PROGRAM SUPPORT	30,000
CASA DE MARYLAND 8151 15TH AVENUE LANGLEY PARK, MD 20783	N/A	PC	PROGRAM SUPPORT	5,000
CAUSE DBA CENTRAL COAST ALLIANCE FOR A SUSTAINABLE ECONOMY 2021 SPERRY AVENUE SUITE 18 VENTURA, CA 93003	N/A	PC	PROGRAM SUPPORT	35,000
CENTER FOR COMMUNITY SOLUTIONS OHIO TRANSFORMATION FUND 1501 EUCLID AVENUE SUITE 310 CLEVELAND, OH 44115	N/A	PC	PROGRAM SUPPORT	50,000
CENTER FOR POPULAR DEMOCRACY 802 KENT AVENUE BROOKLYN, NY 11215	N/A	PC	PROGRAM SUPPORT	7,500
CHARLESTON AREA JUSTICE MINISTRY P O BOX 71416 NORTH CHARLESTON, SC 29415	N/A	PC	PROGRAM SUPPORT	30,000
COLORADO PROGRESSIVE COALITION COLORADO PEOPLE'S ALLIANCE 700 KALAMATH STREET DENVER, CO 80204	N/A	PC	PROGRAM SUPPORT	35,000
COMMON COUNCIL FOUNDATION 405 14TH STREET SUITE 809 OAKLAND, CA 94612	N/A	PC	PROGRAM SUPPORT	10,000
COMMON GROUND 1034 EAST OGDEN AVENUE MILWAUKEE, WI 53202	N/A	PC	PROGRAM SUPPORT	25,000
COMMUNITIES CREATING OPPORTUNITIES 2400 TROOST AVENUE STE 4600 KANSAS CITY, MO 64108	N/A	PC	PROGRAM SUPPORT	40,000
COMMUNITIES ORGANIZED FOR PUBLIC SERVICE 1511 SALTILLO STREET SAN ANTONIO, TX 78207	N/A	NC	PROGRAM SUPPORT	40,000
COMMUNITIES ORGANIZED FOR RELATIONAL POWER IN ACTION CENTRAL COAST INTERFA 95 ALTA VISTA AVENUE WATSONVILLE, CA 95076	N/A	PC	PROGRAM SUPPORT	35,000
<b>Total . . . . .</b>				1,655,000
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY PARTNERSLA BLACK WORKER CENTER 6569 SOUTH VERMONT AVE LOS ANGELES, CA 90044	N/A	PC	PROGRAM SUPPORT	25,000
EL CENTRO DE IGUALDAD Y DERECHOS 714 4TH STREET SW ALBUQUERQUE, NM 87102	N/A	PC	PROGRAM SUPPORT	30,000
FAITH ACTION FOR COMMUNITY EQUITY 1352 LILIHA ST ROOM 2 HONOLULU, HI 96817	N/A	PC	PROGRAM SUPPORT	35,000
FEDERATION OF CONGREGATIONS UNITED TO SERVE INC DBA FAITH IN FLORIDA 406 E AMELIA ST ORLANDO, FL 32803	N/A	PC	PROGRAM SUPPORT	40,000
FIGHTING AGAINST INJUSTICE TOWARDS HARMONY PO BOX 164 DAYTONA BEACH, FL 32115	N/A	PC	PROGRAM SUPPORT	30,000
GCIR PO BOX 1100 SEBASTOPOL, CA 95473	N/A	PC	PROGRAM SUPPORT	10,000
GRASSROOTS INSTITUTE FOR FUNDRAISER TRAINING 1904 FRANKLIN STREET SUITE 808 OAKLAND, CA 94612	N/A	PC	PROGRAM SUPPORT	2,500
GREATER BIRMINGHAM MINISTRIES 2304 12TH AVENUE N BIRMINGHAM, AL 35234	N/A	PC	PROGRAM SUPPORT	30,000
GREATER BOSTON INTERFAITH ORGANIZATION 594 COLUMBIA ROAD SUITE 203 BOSTON, MA 02125	N/A	PC	PROGRAM SUPPORT	45,000
ICARE 2650 PARK STREET JACKSONVILLE, FL 32204	N/A	PC	PROGRAM SUPPORT	30,000
IIRON 6400 S KIMBARK AVENUE CHICAGO, IL 60637	N/A	PC	PROGRAM SUPPORT	35,000
INDIANAPOLIS CONGREGATION ACTION NETWORK 337 N WARMAN AVENUE INDIANAPOLIS, IN 46222	N/A	PC	PROGRAM SUPPORT	35,000
INLAND CONGREGATIONS UNITED FOR CHANGE 1441 NORTH D STREET SUITE 208 SAN BERNADINO, CA 92405	N/A	PC	PROGRAM SUPPORT	35,000
INTERFAITH EDUCATION FUND 1106 CLAYTON LANE 120W AUSTIN, TX 78723	N/A	PC	PROGRAM SUPPORT	5,000
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT 2001 FOREST AVENUE DES MOINES, IA 50311	N/A	PC	PROGRAM SUPPORT	40,000
<b>Total</b> . . . . . ▶				1,655,000
<b>3a</b>				



Form 990FP Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ISIAIAH INSTITUTE OF NEW ORLEANS 5542 CHATHAM DRIVE NEW ORLEANS, LA 70112	N/A	PC	PROGRAM SUPPORT	30,000
ISIAIAH 2356 UNIVERSITY AVE W SUITE 405 ST PAUL, MN 55114	N/A	PC	PROGRAM SUPPORT	40,000
JACKSON METRO SPONSORING COMMITTEEWORING TOGETHER JACKSON 1770 ELLIS AVENUE 100 JACKSON, MS 70131	N/A	PC	PROGRAM SUPPORT	30,000
JEREMIAH GROUP 2028 PAXTON STREET HARVEY, LA 70058	N/A	PC	PROGRAM SUPPORT	30,000
KENTUCKY COALITION PO BOX 1450 LONDON, KY 40743	N/A	PC	PROGRAM SUPPORT	35,000
MICHIGAN UNITED 4405 WESSON DETROIT, MI 48210	N/A	PC	PROGRAM SUPPORT	40,000
NATIONAL COMMITTEE FOR RESPONSIVE PHILANTHROPY 1900 L STREET NW STE 825 WASHINGTON, DC 20036	N/A	PC	PROGRAM SUPPORT	2,500
NEIGHBORHOOD FUNDERS GROUP 436 14TH STREET SUITE 425 OAKLAND, CA 94612	N/A	PC	PROGRAM SUPPORT	5,000
NEW MEXICO COMUNIDADES EN ACCION DE FE (CAFE) 133 WYATT DRIVE STE 1 LAS CRUCES, NM 88005	N/A	PC	PROGRAM SUPPORT	35,000
NEW ORLEANS WORKERS' CENTER FOR RACIAL JUSTICE 217 N PRIEUR STREET NEW ORLEANS, LA 70112	N/A	PC	PROGRAM SUPPORT	30,000
NEW WORLD FOUNDATION 3758 GRAND AVE PO BOX 14 OAKLAND, CA 94610	N/A	PC	PROGRAM SUPPORT	35,000
OHIO LEGAL ASSISTANCE FOUNDATION INC 10 WEST BROAD STREET SUITE 950 COLUMBUS, OH 43214	N/A	PC	PROGRAM SUPPORT	5,000
PENNSYLVANIA INTERFAITH IMPACT NETWORK 564 FORBES AVE SUITE 808 PITTSBURGH, PA 15219	N/A	PC	PROGRAM SUPPORT	30,000
PHILADELPHIANS ORGANIZED TO WITNESS EMPOWER & REBUILD 1429 N 11TH ST PHILADELPHIA, PA 19122	N/A	PC	PROGRAM SUPPORT	35,000
PICO NATIONAL NETWORK 110 MARYLAND AVENUE 201 WASHINGTON, DC 20002	N/A	PC	PROGRAM SUPPORT	5,000
<b>Total . . . . .</b>				1,655,000
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PIMA COUNTY INTERFAITH COUNCIL INC (PCIC) 3200 N LOS ALTOS TUCSON, AZ 85705	N/A	PC	PROGRAM SUPPORT	30,000
SOMOS UN PUEBLO UNIDO 1804 ESPINACITAS STREET SANTE FE, NM 87505	N/A	PC	PROGRAM SUPPORT	40,000
SOUTHWEST ORGANIZING PROJECT 211 10TH STREET SW ALBUQUERQUE, NM 87102	N/A	PC	PROGRAM SUPPORT	5,000
TENNESSEE IMMIGRANT & REFUGEE RIGHTS COALITION 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211	N/A	PC	PROGRAM SUPPORT	40,000
TEXAS ORGANIZING PROJECT EDUCATION FUND 700 SOUTH ZARZAMORA STE 212 SAN ANTONIO, TX 78207	N/A	PC	PROGRAM SUPPORT	35,000
THE METROPOLITAN ORGANIZATION 4141 SOUTHWEST FREEWAY SUITE 650 HOUSTON, TX 77027	N/A	NC	PROGRAM SUPPORT	17,500
THE PRAXIS PROJECT 7731 ALASKA AVENUE NW WASHINGTON, DC 20012	N/A	PC	PROGRAM SUPPORT	5,000
VALLEY INTERFAITH 955 WEST PRICE ROAD BROWNSVILLE, TX 78520	N/A	NC	PROGRAM SUPPORT	40,000
VERMONT WORKERS' CENTER 294 N WONOOSKI AVENUE BURLINGTON, VT 54011	N/A	PC	PROGRAM SUPPORT	35,000
VIP EDUCATION FUND 2728 EAST THOMAS ROAD STE 108 PHOENIX, AZ 85016	N/A	PC	PROGRAM SUPPORT	35,000
VOICE BUFFALO 2495 MAIN STREET SUITE 547 BUFFALO, NY 14214	N/A	PC	PROGRAM SUPPORT	35,000
WESTSIDE SPONSORING COMMITTEE 756 SOUTH ACADIAN THRUWAY STE 1 BATON ROUGE, LA 70806	N/A	PC	PROGRAM SUPPORT	25,000
WORKERS' DEFENSE PROJECT 5604 MANOR RD AUSTIN, TX 78723	N/A	PC	PROGRAM SUPPORT	35,000
WORKERS' DIGNITY PROJECT 3753 NOLENSVILLE PIKE NASHVILLE, TN 37211	N/A	PC	PROGRAM SUPPORT	30,000
<b>Total . . . . . ▶</b>				1,655,000
<b>3a</b>				

**TY 2016 Accounting Fees Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING	28,360	14,180		14,180

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2016 Depreciation Schedule

**Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
OFFICE FURNITURE & EQUIPMENT	2002-03-12	1,300	1,300	200DB	7 000000000000	0	0		
OFFICE FURNITURE & EQUIPMENT	2004-06-30	3,415	3,415	200DB	7 000000000000	0	0		
OFFICE FURNITURE & EQUIPMENT	2007-12-31	4,313	4,313	200DB	7 000000000000	0	0		
HP LAPTOP	2009-12-22	1,633	1,633	200DB	5 000000000000	0	0		
HP SERVER	2015-03-15	3,797	759	200DB	5 000000000000	1,215	0		

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2016 Expenditure Responsibility Statement

**Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
THE METROPOLITAN ORGANIZATION	4141 SOUTHWEST FREEWAY SUITE 650 HOUSTON, TX 77027	2015-05-14	35,000	PROGRAM SUPPORT	17,500	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED	1/2/2017		THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE
COMMUNITIES ORGANIZED FOR PUBLIC SERVICE	1511 SALTILLO STREET SAN ANTONIO, TX 78207	2015-07-09	40,000	PROGRAM SUPPORT	20,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED	1/10/2017		THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE
COMMUNITIES ORGANIZED FOR PUBLIC SERVICE	1511 SALTILLO STREET SAN ANTONIO, TX 78207	2016-07-15	40,000	PROGRAM SUPPORT	20,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED	1/10/2017		THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE
VALLEY INTERFAITH	955 WEST PRICE ROAD BROWNSVILLE, TX 78520	2016-06-06	40,000	PROGRAM SUPPORT	20,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED	12/30/2016		THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE, THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE

**TY 2016 Investments Corporate Bonds Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
CORPORATE BONDS	2,677,484	2,674,059

**TY 2016 Investments Corporate Stock Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
CORPORATE STOCK	13,799,860	18,419,461

**TY 2016 Investments - Other Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
CERTIFICATES OF DEPOSIT	FMV	1,300,000	1,367,404
HEDGE FUND	FMV	2,168,594	2,093,753



**TY 2016 Land, Etc.  
Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
OFFICE FURNITURE & EQUIPMENT	1,300	1,300	0	
OFFICE FURNITURE & EQUIPMENT	3,415	3,415	0	
OFFICE FURNITURE & EQUIPMENT	4,313	4,313	0	
HP LAPTOP	1,633	1,633	0	
HP SERVER	3,797	1,974	1,823	1,823

**TY 2016 Other Assets Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
REFUNDABLE SECURITY DEPOSIT	1,000	1,000	1,000

**TY 2016 Other Expenses Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	18,916	0		18,916
POSTAGE	795	0		795
TELEPHONE	4,944	0		4,944
MISCELLANEOUS EXPENSES	3,739	0		3,739
INSURANCE	4,386	0		4,386
EQUIPMENT RENTAL & REPAIRS	10,435	0		10,435

**TY 2016 Other Professional Fees Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES	106,573	106,573		0
CONSULTANTS	41,379	30,000		11,379

**TY 2016 Taxes Schedule****Name:** NEEDMOR

C/O THE NORTHERN TRUST COMPANY

**EIN:** 34-6504812

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FOREIGN TAXES	11,267	11,267		0
FEDERAL EXCISE TAX	8,000	0		0

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

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

OMB No 1545-0047  
**2016**

**Name of the organization**  
NEEDMOR  
C/O THE NORTHERN TRUST COMPANY

**Employer identification number**  
34-6504812

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

Form 990-PF

- 527 political organization
- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

**General Rule**

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

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup> 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

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

<b>Name of organization</b> NEEDMOR C/O THE NORTHERN TRUST COMPANY	<b>Employer identification number</b> 34-6504812
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**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DINNY STRANAHAN CLT	\$ 480,000	Person <input checked="" type="checkbox"/>
	C/O THE NEEDMOR FUND 539 EAST FRONT		Payroll <input type="checkbox"/>
	PERRYSBURG, OH 43551		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
2	ENTELCO FOUNDATION	\$ 11,000	Person <input checked="" type="checkbox"/>
	132 W 2ND STREET SUITE B		Payroll <input type="checkbox"/>
	PERRYSBURG, OH 43551		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )

<b>Name of organization</b> NEEDMOR C/O THE NORTHERN TRUST COMPANY	<b>Employer identification number</b> 34-6504812
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<b>Part II</b> <b>Noncash Property</b>
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(see instructions) Use duplicate copies of Part II if additional space is needed			
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____



<b>Name of organization</b> NEEDMOR C/O THE NORTHERN TRUST COMPANY	<b>Employer identification number</b> 34-6504812
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP 4	(e) Transfer of gift Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP 4	(e) Transfer of gift Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP 4	(e) Transfer of gift Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP 4	(e) Transfer of gift Relationship of transferor to transferee