Form **990-PF** 

#### **Return of Private Foundation**

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

OMB No. 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service u Do not enter social security numbers on this form as it may be made public. u Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For	calend	dar year 2015 or tax year beginning , a	and ending				
Na	me of fou	undation			A Emplo	oyer identification number	
-		din Harradatian			A	2024000	
		din Foundation distreet (or P.O. box number if mail is not delivered to street address)				-2834099	`
		NE Loop 410, Suite 400 RM 40		om/suite		none number (see instructions $0-828-3573$	)
		n, state or province, country, and ZIP or foreign postal code					
S	an .	Antonio TX 78209			C If exe	mption application is pending,	check here "
G	Check a	all that apply: Initial return Initial retur	n of a former public ch	arity	<b>D</b> 1. Fo	oreign organizations, check he	re "
		Final return Amended	return	•		oreign organizations meeting the	· · · · · · · · · · · · · · · · · · ·
		Address change Name cha	inge			% test, check here and attach	
H (	Check t	type of organization: X Section 501(c)(3) exempt private	foundation		F If nriv:	ate foundation status was term	ninated under
$\overline{}$		1 4947(a)(1) nonexempt charitable trust Other taxable				n 507(b)(1)(A), check here	
		ket value of all assets at J Accounting method:	<del></del>	ual	F If the	foundation is in a 60-month te	rmination
						section 507(b)(1)(B), check h	
	ne 16) i		be on cash basis.)				
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	# N. N		( ) A !!	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net invincor		(c) Adjusted net income	for charitable purposes
	Τ.	the amounts in column (a) (see instructions).)	DOOKS				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check <b>u X</b> if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	20.150			20.150	
	4	Dividends and interest from securities	30,150		30,150	30,150	
	5a	Gross rents					
Пe	b	Net rental income or (loss)	102 704				
en	6a	Net gain or (loss) from sale of assets not on line 10	193,794				
Revenue	b	Gross sales price for all assets on line 6a 208,862		-	00.704		
~		Capital gain net income (from Part IV, line 2)			93,794	0	
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	223,944	2	23,944	30,150	
_	12	Total. Add lines 1 through 11	0		23,311	30,130	
es	14	Other employee salaries and wages					
penses	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)					
Ä	b	Accounting fees (attach schedule) Stmt 1	955				
<u>×</u>	c	Other professional fees (attach schedule)					
rati	17	Interest					
ist	18	Taxes (attach schedule) (see instructions) Stmt 2	7,508				
Ë	19	Depreciation (attach schedule) and depletion	,				
Administrative	20	Occupancy					
	21	Travel, conferences, and meetings					
and	22	Printing and publications					
	23	Other expenses (att. sch.)					
ţi	24	Total operating and administrative expenses.					
Operating		Add lines 13 through 23	8,463		0	0	0
þe	25	Contributions, gifts, grants paid	76,500				76,500
0	26	Total expenses and disbursements. Add lines 24 and 25	84,963		0	0	76,500
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	138,981				
	b	Net investment income (if negative, enter -0-)		2	23,944		
	С	Adjusted net income (if negative, enter -0-)				30,150	

	Dar# 1	Polones Chapte Attached schedules and amounts in the description column	Beginning of year		Ena or	year
	Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	9	(c) Fair Market Value
П	1	Cash – non-interest-bearing	764		789	789
	2	Savings and temporary cash investments	344,011	458,	698	458,698
	3	Accounts receivable <b>u</b>				
		Less: allowance for doubtful accounts ${f u}$				
	4	Pledges receivable u				
		Less: allowance for doubtful accounts ${f u}$				
	5	Oranta respirable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
	7	· ····································				
	'	Other notes and loans receivable (att. schedule) <b>u</b>				
		Less: allowance for doubtful accounts <b>u</b>				
ets	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
⋖	10a	Investments – U.S. and state government obligations (attach schedule)	502 502	E 4 B	260	1 400 600
	b	Investments – corporate stock (attach schedule) See Stmt 3	523,593	547,	862	1,499,600
	С	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment: basis ${f u}$				
		Less: accumulated depreciation (attach sch.) <b>u</b>				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment: basis <b>u</b>				
		Less: accumulated depreciation (attach sch.) <b>u</b>				
	15	Other assets (describe <b>u</b>				
	16	Total assets (to be completed by all filers – see the				
$\perp$		instructions. Also, see page 1, item I)	868,368	1,007,	349	1,959,087
	17	Accounts payable and accrued expenses				
	18	Grants payable				
<u>es</u>	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
jab	21	Mortgages and other notes payable (attach schedule)				
-	22	Other liabilities (describe <b>u</b>				
$\perp$	23	Total liabilities (add lines 17 through 22)	0		0	
		Foundations that follow SFAS 117, check here u X				
S		and complete lines 24 through 26 and lines 30 and 31.				
2	24	Unrestricted	868,368	1,007,	349	
aga	25	Temporarily restricted				
B	26	Permanently restricted				
딕		Foundations that do not follow SFAS 117, check here u				
됴		and complete lines 27 through 31.				
<b>Assets or Fund Balances</b>	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see instructions)	868,368	1,007,	349	
Net	31	Total liabilities and net assets/fund balances (see				
		instructions)	868,368	1,007,	349	
	Part		- 1			
		net assets or fund balances at beginning of year - Part II, column (a), line 30 (must	agree with			
		of-year figure reported on prior year's return)	•		1	868,368
2	Ente	r amount from Part I, line 27a			2	138,981
3 Other increases not included in line 2 (itemize) u						
4	Add	lines 1, 2, and 3			4	1,007,349
		eases not included in line 2 (itemize) ${f u}$			5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b)	, line 30		6	1,007,349

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income				
	cribe the kind(s) of property sold (e.g., real estate,		(b) How acquired P – Purchase	(c) Date ac	•	(d) Date sold
	arehouse; or common stock, 200 shs. MLC Co.)		D – Donation	(mo., day		(mo., day, yr.)
	ndustries		D D	02/18		12/09/15
	cl Game Technologies		D	01/19		04/07/15
	me Technologies		P	01/19	/00	04/07/15
d						
<u>e</u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis opense of sale			or (loss) ) minus (g)
a 15,050			6,975			8,075
b 154,475			8,093			146,382
c 39,337						39,337
d						
<u>e</u>		10/04	/00			
Complete only for assets showing	g gain in column (h) and owned by the fo					(h) gain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	• • •	cess of col. (i)	COI. (		less than -0-) or om col. (h))
	30 0. 120 0.01		(j), j			8,075
 b						146,382
						39,337
d						33,331
e						
	If gain, also enter in	Part I line 7				
2 Capital gain net income or (net o	rapital loss)  If (loss), enter -0- in l	· n		2		193,794
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6)	_		_		
	, column (c) (see instructions). If (loss), er					
•		1		3		
	nder Section 4940(e) for Reduc		t Investment Inco	me		
(For optional use by domestic private	foundations subject to the section 4940(a	a) tax on net inves	stment income.)			
If section 4940(d)(2) applies, leave the	nis nart hlank	•	,			
11 30011011 4040(a)(2) applies, leave ti	no part blank.					
Was the foundation liable for the sec	tion 4942 tax on the distributable amount	of any year in the	base period?			Yes X No
If "Yes," the foundation does not qua	lify under section 4940(e). Do not complete	e this part.				
1 Enter the appropriate amount in	each column for each year; see the instru	ctions before mak	ing any entries.			
(a) Base period years	(b)		(c)		Dist	(d) ribution ratio
Calendar year (or tax year beginning in			alue of noncharitable-use assets			divided by col. (c))
2014		,000	1,629,8			0.030677
2013		,000	1,041,2			0.024011
2012		,000	470,9	981		0.053081
2011		,200	498,6			0.056556
2010	20	,000	569,0	034		0.035147
						0 100450
				2		0.199472
	5-year base period – divide the total on lin					0 000004
number of years the foundation h	has been in existence if less than 5 years			3		0.039894
						1 054 660
4 Enter the net value of noncharita	ble-use assets for 2015 from Part X, line	5		4		1,954,662
				_		77 070
5 Multiply line 4 by line 3				5		77,979
	(40) (5 (4) (5 (5))					2 220
b ⊨nter 1% of net investment incom	ne (1% of Part I, line 27b)			6		2,239
7 Add lines F and C				_		QA 210
<b>7</b> Add lines 5 and 6				7		80,218
8 Enter qualifying distributions from	Part VII line 4			8		76,500
If line 8 is equal to or greater the	n Part XII, line 4n line 7, check the box in Part VI, line 1b,	and complete that	nart using a 10/ tay rat	Lo		70,500
· · · · · · · · · · · · · · · · · · ·	in mile 1, check the box in Fait VI, lifle 1D,	ana complete that	. part using a 1/0 tax fall	C. OCC 111C		
Part VI instructions.						

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here <b>u</b> 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			4,	479
	here <b>u</b> and enter 1% of Part I, line 27b				
С	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-)				0
3	Add lines 1 and 2			4,	479
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			4,	479
6	Credits/Payments:				
а	2015 estimated tax payments and 2014 overpayment credited to 2015				
b	Exempt foreign organizations – tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d				
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached 8				109
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed u 9			4,	588
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid u 10				
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax u Refunded u 11				
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	L		Yes	No
	participate or intervene in any political campaign?	📙	1a		X
b	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				
	published or distributed by the foundation in connection with the activities.				
С	Did the foundation file Form 1120-POL for this year?	📙	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. $\mathbf{u}$ \$ (2) On foundation managers. $\mathbf{u}$ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. <b>u</b> \$				
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.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				77
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
b			4b		v
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.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or  By a total lacification that affectively accorded to a constraint instrument as that are manufactured in a first time.				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			Х	
-	conflict with the state law remain in the governing instrument?		6 7	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			Λ	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <b>u</b> None				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	L	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		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

Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	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? 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	
14	The ball of the MCEADIN TIT	328-	357	 3
	1250 NE LOOP 410, #400	1		Ŧ
	7000	9		
15	Located at <b>u</b> SAN ANTONIO TX ZIP+4 <b>u</b> 7820 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> – Check here			u [
	and enter the amount of tax-exempt interest received or accrued during the year			_
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country <b>u</b>			
Pa	rt 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.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(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? Yes X No			
	(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)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
<b>L</b>	· · · · · · · · · · · · · · · · · · ·			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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	1b		
	Organizations valving on a guyrant notice recording director positions should have	10		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
C	N/A	1c		
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)):			
а	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 <b>u</b> 20 , 20 , 20			
b	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			
	all years listed, answer "No" and attach statement – see instructions.)  N/A	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.			
	<b>u</b> 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No			
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	-	7.7
4a	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	4h		x
	chaniable burdose mai dad dol deed terdoved itom leodatov deidle the first dav of the fax vear bedinning in 20157	40		

Pa	art VII-B Statements Regarding Activities for Which Form	4720 May Be F	Required (cont	tinued)		
5a	During the year did the foundation pay or incur any amount to:					
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	1945(e))?	🔲 <b>ነ</b>	res X No		
	(2) Influence the outcome of any specific public election (see section 4955); or to	carry on,	_			
	directly or indirectly, any voter registration drive?		$\Box$	res X No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			res X No		
	(4) Provide a grant to an organization other than a charitable, etc., organization		_			
	section 4945(d)(4)(A)? (see instructions)		$\Box$	res X No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or					
	and the second of the second o			res X No		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under					
	Regulations section 53.4945 or in a current notice regarding disaster assistance	•		N/A	5b	
	Organizations relying on a current notice regarding disaster assistance check he					
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from					
			N/A 🗌	res 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 pa	v premiums				
	on a personal benefit contract?	•		res X No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per				6b	х
	If "Yes" to 6b, file Form 8870.					
7a	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?	$\Box$	res X No		
b	If "Yes," did the foundation receive any proceeds or have any net income attribut				7b	
	art VIII Information About Officers, Directors, Trustees, Fo					<b>'</b>
	and Contractors		- J - , J ,		,	
1 1	List all officers, directors, trustees, foundation managers and their compensation	sation (see instruc	ctions).			
		(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name and address	hours per week	(If not paid,	employee benefit plans and deferred		nse account, allowances
		devoted to position	enter -0-)	compensation	Other a	aliuwarices
NI	CK MCFADIN III SAN ANTONIO	VICE PRESIDE				
	250 NE LOOP 410, #400 TX 78209	0.50	0	0		0
	RRY MCFADIN SAN ANTONIO	PRESIDENT				
	250 NE LOOP 410, #400 TX 78209	0.50	0	0		0
	NDEDE A CILITAN CAN AMEGNIO	SECRETARY				
	L010 COACHLIGHT ST., STE #200 TX 78216	0.50	0	٥ ا		0
		†				
2	Compensation of five highest-paid employees (other than those included of "NONE."	on line 1 – see ins	structions). If non	e, enter		
		(b) Title, and average		(d) Contributions to		
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		nse account, allowances
		devoted to position		compensation	Out of	allowariocs
NC	ONE					
		Ī				
		Ţ				
		†				
		·†				
Tota	I number of other employees paid over \$50,000	1	1	1	<u> </u>	0

Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
·	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
	Form <b>990-PF</b> (2015)

qualifies for the section 4940(e) reduction of tax in those years.

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	found	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,516,823
b	Average of monthly cash balances	1b	467,605
С	Fair market value of all other assets (see instructions)	1c	0
d		1d	1,984,428
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,984,428
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	29 <b>,</b> 766
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,954,662
6	Minimum investment return. Enter 5% of line 5	6	97,733
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	ounda	tions
	and certain foreign organizations check here <b>u</b> and do not complete this part.)		
1		1	97 <b>,</b> 733
2a	Tax on investment income for 2015 from Part VI, line 5 2a 4,479		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
С		2c	4,479 93,254
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	93,254
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	93,254
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	93,254
Pá	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	76,500
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	76,500
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	76,500
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	1	

Form **990-PF** (2015)

_Pa	irt XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				93,254
2	Undistributed income, if any, as of the end of 2015:				
а	Enter amount for 2014 only			73,664	
b					
3	Excess distributions carryover, if any, to 2015:				
а	From 2010				
b	From 2011				
С	From 2012				
d	From 2013				
е	From 2014				
f	Total of lines 3a through e				
4	Qualifying distributions for 2015 from Part XII,				
-	line 4: <b>u</b> \$ 76,500				
а	Applied to 2014, but not more than line 2a			73,664	
	Applied to undistributed income of prior years			10,002	
	(Election required – see instructions)				
_	Treated as distributions out of corpus (Election				
·	. ,				
	required – see instructions)				2 836
	Applied to 2015 distributable amount				2,836
_	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015				
	(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:				
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b. Taxable				
	amount – see instructions				
е	Undistributed income for 2014. Subtract line				
	4a from line 2a. Taxable amount – see				
	instructions				
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016				90,418
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2010 not				
-	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
•	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	· · · · · · · · · · · · · · · · · · ·				
	Excess from 2011				
b	Excess from 2012				
C C	Excess from 2013				
d	Excess from 2014				
<u>e</u>	Excess from 2015				

Pac	ie	1	(

Pa	rt XIV Private Operating Fou	<b>ındations</b> (see ir	nstructions and Par	rt VII-A, question 9		
1a	If the foundation has received a ruling or of	determination letter th	at it is a private operat	ing		
	foundation, and the ruling is effective for 2	015, enter the date of	of the ruling	u		
b	Check box to indicate whether the founda	tion is a private opera	ating foundation describ	ped in section 49	942(j)(3) or 4942	?(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	<b>(a)</b> 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(c) Total
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test – enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test – enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	art XV Supplementary Inform	ation (Complete	this part only if	the foundation ha	d \$5,000 or more	in assets at
	any time during the ye	ear – see instruc	ctions.)			
1	Information Regarding Foundation Ma	_				
а	List any managers of the foundation who					
	before the close of any tax year (but only	if they have contribut	ed more than \$5,000).	(See section 507(d)(2).)		
	N/A					
b	List any managers of the foundation who				portion of the	
	ownership of a partnership or other entity)	of which the foundat	ion has a 10% or grea	ter interest.		
	N/A					
2	Information Regarding Contribution, G					
	Check here $\mathbf{u}$ $\boxed{\mathbf{X}}$ if the foundation only					
	unsolicited requests for funds. If the found		ants, etc. (see instruction	ons) to individuals or or	ganizations under	
	other conditions, complete items 2a, b, c,					
а	The name, address, and telephone number	er or e-mail address of	of the person to whom	applications should be	addressed:	
	N/A					
	The form to the late of the state of the sta					
b	The form in which applications should be	submitted and inform	ation and materials the	ey snould include:		
	N/A					
С	Any submission deadlines:					
	N/A		Carl annual of the State Co.	da daa af toodod		
d	Any restrictions or limitations on awards, s	such as by geographi	cai areas, charitable fie	eias, kinas of institutions	, or otner	
	factors:					

N/A

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
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		
SAN ANTONIO TX 78229	NONE	PUBLIC UN	RESTRICTED	21,000
UT HEALTH SCIENCE CENTER 1700 FANNIN #1707 HOUSTON TX 77030	NONE	PUBLIC UN	RESTRICTED	21,000
M.D. ANDERSON HOSPITAL 1515 HOLCOMBE BLVD HOUSTON TX 77030	NONE	PUBLIC UN	RESTRICTED	21,000
RESPITE CARE OF SAN ANTONIO PO BOX 12633 SAN ANTONIO TX 78212	INC NONE	PUBLIC UN	RESTRICTED	7,500
ST PJ'S ORPHANAGE 919 MISSION SAN ANTONIO TX 78210	NONE	PUBLIC UN	RESTRICTED	5,000
BUCKNER FANNING SCHOOL 975 MISSION SPRINGS SAN ANTONIO TX 78258	NONE	PUBLIC UN	RESTRICTED	500
ST. JUDE'S RANCH FOR CHILDE 1400 RIVER CREEK LANE BULVERDE TX 78163	EN NONE	PUBLIC UN	RESTRICTED	500
				_
Total			u 3a	76,500
<ul><li>b Approved for future payment</li><li>N/A</li></ul>				
Total			u 3b	

Part XVI-A	Analysis of Income-Producing Act					
nter gross amo	unts unless otherwise indicated.	Unrelate	d business income	Exclude	d by section 512, 513, or 514	(e)
		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
Program ser	vice revenue:					(Oee mandenona.)
a						
f						
<b>g</b> Fees and	d contracts from government agencies					
Membership	dues and assessments					
	avings and temporary cash investments					20 150
	d interest from securities					30,150
	come or (loss) from real estate:					
a Debt-fina	nced property					
<b>b</b> Not debt	-financed property					
	come or (loss) from personal property					
Other investr	ment income					102 704
	) from sales of assets other than inventory					193,794
Net income o	or (loss) from special events					
	or (loss) from sales of inventory					
	ue: <b>a</b>					
_						
e	d columns (b), (d), and (e)				0	223,944
3 Total. Add li	ne 12, columns (b), (d), and (e)					223,944
<b>3 Total.</b> Add lii See worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)				13	
B Total. Add ling the worksheet in Part XVI-B	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Ac	complishm	ent of Exempt P	urpose	13 <u> </u>	
ee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Ac	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
B Total. Add line ee worksheet in Part XVI-B	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linge worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
Total. Add linee worksheet i Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944
B Total. Add ling idee worksheet in Part XVI-B Line No.	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities to the Activity for which income is	complishm reported in co	ent of Exempt P	Purpose A contribu	13	223,944

UIIII	990-PF (2	2015) MCFacin I	oundat	cion		/4-2	834099			Pag	ge 13
Pai	rt XVII	Information Regardaniz	_	ansfers To and	d Transactio	ns and Relation	onships Wi	th Noncharitab	le		
1	Did the or	rganization directly or indi		e in any of the follo	owing with any o	ther organization d	escribed			Yes	No
		501(c) of the Code (other		-	-	=					
			i illali seciic	on sor(c)(s) organia	zalions) or in sec	bilon 527, relating t	o political				
	organization	ons?									l
а	Transfers	from the reporting found	ation to a no	oncharitable exemp	t organization of:						
	(1) Cash								1a(1)		Х
											X
	(2) Other	assets							1a(2)		
	Other trai										
	(1) Sales	of assets to a noncharita	able exempt	organization					1b(1)		X
	(2) Purch	nases of assets from a no	ncharitable	exempt organization	n				1b(2)		Х
	(2) 1 01011	1 ( 1 11 11 11 11 11 11 11 11 11 11 11 1	on chantable		""						-
	(3) Renta	al of facilities, equipment,	or other ass	sets					1b(3)		X
	(4) Reimb	bursement arrangements							1b(4)		X
	(5) Loans	s or loan guarantees							1b(5)		X
	(6) Dorfor	rmanco of convices or me	omborchin o	r fundraicing colicit	otione				1b(6)		х
	(b) Felloi	rmance of services or me		i iuriuraisiriy solicii	alions						-
С	Sharing o	f facilities, equipment, ma	ailing lists, ot	ther assets, or paid	employees				1c		_ X_
d	If the answ	wer to any of the above i	s "Yes," com	plete the following	schedule. Colum	n (b) should alway	s show the fair	market			
	value of th	he goods, other assets, o	r services di	iven by the reportin	a foundation. If t	he foundation rece	ived less than	fair market			
		-	_		-						
		any transaction or sharing			•						
(a	a) Line no.	(b) Amount involved	(c) Nam	ne of noncharitable exem	pt organization	(d) Descrip	tion of transfers, tra	ansactions, and sharing a	rrangeme	nts	
N/A	١.										
	la tha fair		 								
		ndation directly or indirec					ns		_	-	3
	described	in section 501(c) of the	Code (other t	than section 501(c)	(3)) or in section	i 527?			Ye	es X	No
b	If "Yes," o	complete the following scl	nedule.								
		(a) Name of organization		(b) Type of c	organization		(c) Descrip	tion of relationship			
	I/A	(a) Hame of organization		(2) 1) po or o	ngamzation		(6) 2000.15	uon on rollationismp			
	1/ A										
		penalties of perjury, I declare that, and complete. Declaration of programmers are the period of the						knowledge and belief, it is	s true,		
	Coneci,	, and complete. Declaration of pr	eparer (ourer un	aii laxpayei) is baseu oi	i ali lillolillation oi wi	licii piepaiei ilas ally ki	iowieage.	May the IRS disc	uss this re	eturn	
Cian								with the preparer			
Sign	I							(see instructions)		Yes	No
Here	)   .						•				
							VICE	PRESIDEN'	ľ		
	Si	ignature of officer or trustee			Date		Title				
					1			ı			
	Print	/Type preparer's name			Preparer's signatur	re		Date		Check	if
De! ·										self-emp	ployed
Paid	Lan	ce A Gilliam, (	CPA		Lance A G	illiam, CPA		05/1	3/16		
Prepa	rer			Associates		,, <del></del>	I		785	462	
Use C	Only ——					200		7.4			
	Firm			light St.		<b>∠</b> 00			263		
								Phone no. 210	<u> </u>	<u>9-7</u> (	<u> </u>

6209 McFadin Foundation

74-2834099

## **Federal Statements**

5/13/2016 4:45 PM

FYE: 12/31/2015

## Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	 Total	_	Net stment	usted Net	aritable Irpose
Tax preparation and web cost exp	\$ 955	\$		\$ 	\$
Total	\$ 955	\$	0	\$ 0	\$ 0

### Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Description	 Total	Net stment	usted Net	_	aritable rpose
2014 990PF tax	\$ 7,508	\$	\$	\$	
Total	\$ 7,508	\$ 0	\$ 0	\$	0

# 6209 McFadin Foundation 74-2834099

FYE: 12/31/2015

# **Federal Statements**

## Statement 3 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	 End of Year	Basis of Valuation	_	Fair Market Value
300 SHSALTRIA GROUP INC	\$ 9,420	\$ 9,420	Cost	\$	17,463
1000 SHS ARES CAPITAL GROUP	17,320	17,320	Cost		14,250
300 SHS Comcast	15,537	15,537	Cost		16,929
2500 SHS CONAGRA FOODS INC	74,888	74,888	Cost		105,400
1000 SHS Cullen Frost Bankers	74,200	74,200	Cost		60,000
100 SHS CYTEC INDUSTRIES INC	6,975		Cost		
138 SHS DUKE ENERGY CORP NEW	8,936	8,936	Cost		9,852
500 SHS EMC CORP MASS	12,830	12,830	Cost		12,840
440 SHS ELIZABETH ARDEN	20,988	20,988	Cost		4,356
800 SHS FORD MOTOR CO	11,209	11,209	Cost		11,272
800 SHS GARMIN LTD NEW	33,136	33,136	Cost		29,736
10772 SHS INTL GAME TECHNOLOGY	8,093	39,337	Cost		31,697
5000 SHS JOHN HANCOCK TAX AD FD	90,100	90,100	Cost		102,850
192 SHS KINDER MORGAN	6,564	6,564	Cost		2,864
450 SHS NATIONAL PRESTO INDS INC	32,553	32,553	Cost		37,287
312 Shire PLC ADR	43,951	43,951	Cost		63,960
30314 SHS SOUTHWEST AIRLINES CO	12,068	12,068	Cost		874,720
988 SHS TESORO CORP	44,154	44,154	Cost		104,106
KINDER MORGAN INC 17 WTS	 671	 671	Cost		18
Total	\$ 523,593	\$ 547,862		\$_	1,499,600

Form 990-PF

Employer identification number 74-2834099

## **Underpayment of Estimated Tax by Corporations**

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

McFadin Foundation

u Attach to the corporation's tax return. u Information about Form 2220 and its separate instructions is at www.irs.gov/form2220. 2015

owed	I and bill the corporation. However, the corporation may still the estimated tax penalty line of the corporation's income	l use F	Form 2220 to figure the	penalty. If so, enter	•	, ,	
Pa	rt I Required Annual Payment						
1	Total tax (see instructions)					1	4,479
	Personal holding company tax (Schedule PH (Form 1120)			2a			-,-,-
	Look-back interest included on line 1 under section 460(b)(2) for co		•			_	
	contracts or section 167(g) for depreciation under the income foreca			2b			
С	Credit for federal tax paid on fuels (see instructions)			2c			
d						2d	
3	Subtract line 2d from line 1. If the result is less than \$500,						
	does not owe the penalty		·	·		3	4,479
4	Enter the tax shown on the corporation's 2014 income tax return (see instruction:						
	the tax year was for less than 12 months, skip this line and enter the a	mount	from line 3 on line 5			4	7,499
5	Required annual payment. Enter the smaller of line 3 of						
	the amount from line 3					5	4,479
Pa	rt II Reasons for Filing—Check the boxe	s bel	ow that apply. If ar	ny boxes are che	ecked, the	corporation	on <b>must</b> file
	Form 2220 even if it does not owe a p	penal	ty (see instructions	).			
6	The corporation is using the adjusted seasonal install	lment	method.				
7	The corporation is using the annualized income instal	llment	method.				
8	The corporation is a "large corporation" figuring its firs	st requ	ired installment based of	on the prior year's ta	X.		
Pa	rt III Figuring the Underpayment						
			(a)	(b)	(c	:)	(d)
9	Installment due dates. Enter in column (a) through (d) the 15th						
	day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th,						
	and 12th months of the corporation's tax year	9	05/15/15	06/15/15	09/1	5/15	12/15/15
10	Required installments. If the box on line 6 and/or line 7 above						
	is checked, enter the amounts from Schedule A, line 38. If the						
	box on line 8 (but not 6 or 7) is checked, see instructions for the						
	amounts to enter. If none of these boxes are checked, enter 25%				_		
	of line 5 above in each column	10	1,120	1,12	0	1,120	1,119
11	Estimated tax paid or credited for each period (see instructions).						
	For column (a) only, enter the amount from line 11 on line 15	11					
	Complete lines 12 through 18 of one column before going to the next column.						
12	Enter amount, if any, from line 18 of the preceding column	12					
13	Add lines 11 and 12	13					
14	Add amounts on lines 16 and 17 of the preceding column	14		1,12	0	2,240	3,360
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	0		0	0	(
16	If the amount on line 15 is zero, subtract line 13 from line 14.						
	Otherwise, enter -0-	16		1,12	0	2,240	
17	1 3						
	subtract line 15 from line 10. Then go to line 12 of the next						
	column. Otherwise, go to line 18	17	1,120	1,12	0	1,120	1,119
18	Overnayment If line 10 is less than line 15 subtract line 10	l	1				

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

For Paperwork Reduction Act Notice, see separate instructions.

Form **2220** (2015)

F	Part IV Figuring the Penalty						
			(a	)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). (Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)	19	See	Workshe	et		
20	Number of days from due date of installment on line 9 to the date shown on line 19	20					
21	Number of days on line 20 after 4/15/2015 and before 7/1/2015	21					
22	Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{365}$ x 3%	22	\$		\$	\$	\$
	Number of days on line 20 after 6/30/2015 and before 10/1/2015	23					
24	Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{365}$ x 3%	24	\$		\$	\$	\$
25	Number of days on line 20 after 9/30/2015 and before 1/1/2016	25					
26	Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{365}$ x 3%	26	\$		\$	\$	\$
27	Number of days on line 20 after 12/31/2015 and before 4/1/2016	27					
28	Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{366}$ x 3%	28	\$		\$	\$	\$
29	Number of days on line 20 after 3/31/2016 and before 7/1/2016	29					
30	Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{366}$ x *%	30	\$		\$	\$	\$
31	Number of days on line 20 after 6/30/2016 and before 10/1/2016	31					
32	Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{366}$ x *%	32	\$		\$	\$	\$
33	Number of days on line 20 after 9/30/2016 and before 1/1/2017	33					
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$		\$	\$	\$
35	Number of days on line 20 after 12/31/2016 and before 2/16/2017	35					
36	Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365}$ x *%	36	\$		\$	\$	\$
	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$		\$	\$	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter	the tot	al here and	d on Form 1120	0, line 33; or the comp	arable	

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

line for other income tax returns

Form **2220** (2015)

109

Form <b>2220</b>		Form 22	220 Worksheet			2015
	For calendar year	ar 2015, or tax year beginning		, and ending		
ame					Employer Id	entification Number
McFadin Fou	ındation				74-283	4099
Due date of estimate Amount of underpay	. ,	1st Quarter 05/15/15 1,120	2nd Quarter 06/15/15 1,120	3rd Quarter 09/15/15 1,1	_	4th Quarter 12/15/15 1,119
Prior year overpayme	ent applied					
Date of payment Amount of payment	1st Payme	ent 2nd Payment	3rd Payment	4th Paym	nent 	5th Payment

Qtr	From	To	Underpayment	#Days	Rate	Penalty
1	5/15/15	3/31/16	1,120	321	3.00	30
1	3/31/16	5/15/16	1,120	45	4.00	6
2	6/15/15	3/31/16	1,120	290	3.00	27
2	3/31/16	5/15/16	1,120	45	4.00	6
3	9/15/15	3/31/16	1,120	198	3.00	18
3	3/31/16	5/15/16	1,120	45	4.00	6
4	12/15/15	3/31/16	1,119	107	3.00	10
4	3/31/16	5/15/16	1,119	45	4.00	6
	Total	Penalty				109

=========