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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state reports

OMB No 1545-0052 2011

1111	Gillai IX	evenue Service   Hote The Touridatio	ii iiiay i	DC abic	to use a copy of	tilis retuili to a	salisty state re	porting requirements	
_		lendar year 2011 or tax year begin				0/01,2011	, and ending	g	09/30 <b>, 20</b> 12
	Name	e of foundation THE HILLENBRAND	FAM]	LLY F	OUNDATION			A Employer identi	fication number
	C/0	MICHAEL R. HILLENBRAND						13-405066	60
	Numb	per and street (or P O box number if mail is r	ot delive	red to stre	eet address)		Room/suite	B Telephone num	ber (see instructions)
							(2	39) 434-7916	
P.O. BOX 3549									
	City o	or town, state, and ZIP code					•		·
								C If exemption applic	cation is
NAPLES, FL 34106								pending, check he	re
G	G Check all that apply   Initial return				Initial return	of a former p	oublic charity	y D 1 Foreign organiz	ations check here
		Final return			Amended re	-			zations meeting the
		Address cha	ange		Name chang			85% test check	here and attach
Н	Che	ck type of organization X Section		c)(3) e:					
Ţ		ection 4947(a)(1) nonexempt charitable		1	ther taxable pi		tion		on status was terminated (b)(1)(A), check here
i					method X C		crual		
-		ear (from Part II, col (c), line			pecify)				is in a 60-month termination (b)(1)(B) check here
		► \$ 2,963,304.	Part I,	column	(d) must be or	n cash basis )		-	
		Analysis of Revenue and Expense				1			(d) Disbursements
		total of amounts in columns (b), (c), and	(d)		Revenue and penses per	(b) Net inve		(c) Adjusted net	for charitable
		may not necessarily equal the amounts column (a) (see instructions))	ın	6.	books	incom	ie	ıncome	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach sche	dule						(GGG) SGGG GINJ/
	2	if the foundation is not requi	red to						<del>                                     </del>
	3	Interest on savings and temporary cash investr	1			<del>                                     </del>			1
	4	Dividends and interest from securities	ı		34,758.	3	4,758.		ATCH 1
		Gross rents			, , , , , , ,				121 011 1
		Net rental income or (loss)	,						<del>                                     </del>
ď	1		ĺ		180,378.			<del></del>	<del> </del>
nue		Net gain or (loss) from sale of assets not on lin Gross sales price for all 336,						<del></del>	
Revenue	7	assets on line 6a				1 8	0,378.		<del>                                     </del>
å	7	Capital gain net income (from Part IV, lin	, ,			10	<del>-,,,,,,,</del>	<del></del>	<del></del>
	8	Net short-term capital gain							
	9 10 a	Gross sales less returns						<del></del>	<del> </del>
	_	and allowances · · · ·							<del> </del>
		Less Cost of goods sold			<u> </u>				
	11	Gross profit or (loss) (attach schedule) . Other income (attach schedule)			-21,535.	-2	2,648.	· · · · · · · · · · · · · · · · · · ·	ATCH 2
	12	Total Add lines 1 through 11			193,601.		2,488.		111011 2
_	13	Compensation of officers, directors, trustees, e			-,	<del></del>	,		
	Ì	Other employee salaries and wages				<del> </del>			
es	14 15	Pension plans, employee benefits				-		RESEIVED	
Expenses		Legal fees (attach schedule)					N C 2000	1 3 927 00	
ğ		Accounting fees (attach schedule)			23,000.	1	1,500.	Ae ~ an	11,500
eЕ	l	Other professional fees (attach schedule)				<u> </u>	1,500.	AUG 0 5 20'	181
Ĕ						<u> </u>	<del>-   ŏ </del>		
štra	17 18	Interest	++		5,609.	<del>                                     </del>	496.	OGDEN, L	) <del>T _   </del>
Ĕ		Taxes (attach schedule) (see instructions)				<del>                                     </del>		UUULIVI.	
Ē	19	Depreciation (attach schedule) and depl	- [				محد ساز		+
ĕ	20	Occupancy	l l						
Operating and Administrative	21				<del></del>	<del>                                     </del>			-
ğ	22	Printing and publications ATCH			17,583.	1	7,583.		<del> </del>
¥t.n	23	Other expenses (attach schedule) ATCI			± . <b>,</b> 505.	<del> </del>	, , , , , ,		<del> </del>
era	24	Total operating and administrative exp	í		46,192.	2	9,579.		11,500
g		Add lines 13 through 23			430,655.		-,0,0,		430,655
	25	Contributions, gifts, grants paid			476,847.	2	9,579.	<del></del>	0 442,155
_	26	Total expenses and disbursements Add lines 24	and 25		3,0,047.		7,0,0.		172,133
	27	Subtract line 26 from line 12			_202 246				
	l	Excess of revenue over expenses and disbursemen	1		-283,246.	1.6	2,909.		<del> </del>
	1	Net investment income (if negative, enter				10	2,303.		
	C	Adjusted net income (if negative, enter-	U-) l			1			

For Paperwork Reduction Act Notice, see instructions 1E1410 1 000 38711A 0114

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Form **990-PF** (2011)

V 11-6.5

Párt II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
	Balance Oncets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing	64,167.	11,331.	11,331.
2		cash investments	4,195.	23,235.	23,235.
1	Less allowance for dou	btful accounts ▶			
1	Less allowance for dou	btful accounts ▶			
5					
6		officers, directors, trustees, and other			
	disqualified persons (at	tach schedule) (see instructions)			
		receivable (attach schedule)	*	182,813.	ATCH 6
		btful accounts ▶	225,000.	182,813.	182,813
		se			
		leferred charges			
8 10 a		te government obligations (attach schedule)			
- 1		e stock (attach schedule) ATCH 7	26,438.	124,957.	129,573
I .		e bonds (attach schedule)		<del></del>	<del></del>
11	Investments - land, building and equipment basis Less accumulated depreciatach schedule)	s, •			
12		loans			
13	Investments - other (atta	ach schedule)	1,927,990.	1,622,208.	1,797,848
	Less accumulated deprecia	ation			
15	Other assets (describe	<b>D</b> )			
		completed by all filers - see the	· · · · · · · · · · · · · · · · · · ·		
		page 1, item I)	2,247,790.	1,964,544.	2,144,800.
17	Accounts payable and a	accrued expenses			
ဖ္က 19					
<u></u> 20		ors, trustees, and other disqualified persons			
		otes payable (attach schedule)			
تا 22		e ▶) [			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
23	Total liabilities (add line	es 17 through 22)	o	d	
	Foundations that fol	low SFAS 117, check here ▶			
24 25 26	Unrestricted	<i>.</i>	Ĭ		
E 25					
26					
힏		not follow SFAS 117,			
휜		plete lines 27 through 31.			
5 27		cipal, or current funds	2,247,790.	1,964,544.	
<u>د</u> 28		r land bldg, and equipment fund			
မ္တို့ 29	•	ulated income endowment, or other funds			
~		balances (see instructions)	2,247,790.	1,964,544.	
31		net assets/fund balances (see	· · · · · · · · · · · · · · · · · · ·		
			2,247,790.	1,964,544	
		anges in Net Assets or Fund E			· · · · · · · · · · · · · · · · · · ·
_		alances at beginning of year - Part I		ust agree with	
		d on prior year's return)			2,247,790.
2 Ente	r amount from Part I,	line 27a			2,247,790 -283,246
				• • • • • • • • • • • • • • • • • • • •	
	4 0 - 10				1,964,544
	eases not included in			5	<u>·</u>
		alances at end of year (line 4 minus lin	ne 5) - Part II, column (b).		1,964,544.

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Page 3

(a) List an 2-story b	d describe the kind(s) of property sold ( rick warehouse, or common stock, 200	(e g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a SEE PART IV SCHE	DULE				
b				ļ	
С					
<u>d</u>					
e				<u></u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a				<del> </del>	
b					
С					
đ					
e					
Complete only for assets	showing gain in column (h) and owner	ed by the foundation on 12/31/69		Gains (Col (h) g	
(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	col	(k), but not less t Losses (from co	
a					
b					
C					
d				···-	
e					
2. Conital goin not income or	(not contal loss)	gain, also enter in Part I, line 7			
2 Capital gain net income or	(net capital loss)	(loss), enter -0- in Part I, line 7	2		180,378.
If gain, also enter in Pai	n or (loss) as defined in sections 12 rt I, line 8, column (c) (see inst	ructions) If (loss), enter -0- in	3		0
Part V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investment Ir	ncome		
		outable amount of any year in the ba	ase period	d? [	Yes X No
	not qualify under section 4940(e)				
(a)		, see the instructions before making	any entri	es (d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
2010	926,285.	4,171,909.			0.222029
2009	842,401.	4,015,077.			0.209809
2008	1,971,020.	4,970,645.			0.396532
2007	563,456.	6,726,834.			0.083762
2006	594,059.	6,563,124.			0.090515
2 Total of line 1, column (d)			2		1.002647
	for the 5-year base period - divide dation has been in existence if less		3		0.200529
4 Enter the net value of nor	ncharitable-use assets for 2011 fro	om Part X, line 5	4	2,	936,047.
5 Multiply line 4 by line 3			5		588,763.
			6		1,629.
			7		590,392.
		in Part VI, line 1b, and complete t	8		442,155.
If line 8 is equal to or graph Part VI instructions	eater than line 7, check the box	in Part VI, line 1b, and complete t	hat part	using a 1% ta:	x rate See the

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Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	ctions	<u>:)                                    </u>
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	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		3,2	258.
	here 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-) 2			
3	Add lines 1 and 2		3,2	258.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		3,2	258.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 1,113.			
b	Exempt foreign organizations - tax withheld at source 6b			
С				
d	Backup withholding erroneously withheld 6d 6			
7	Total credits and payments Add lines 6a through 6d		1,1	113.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			40.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed _AŢŢĄÇḤḤĒŅŢ . 9 ▶ 9		2,3	329.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2012 estimated tax > 0 Refunded > 11			
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	_1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	instructions for definition)?	1 b		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?	1 c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation  \$\) (2) On foundation managers  \$\)			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
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			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>
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 state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	<u> </u>
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	7	X	<u></u>
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	FL,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	X	<u> </u>
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 2011 or the taxable year beginning in 2011 (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
	-	00	90-PF	(2011)

Pai	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			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
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		13	Χ	
	Website address ►N/A			
14	The books are in care of ► MICHAEL R. HILLENBRAND Telephone no ► 239–43	4-791	6	
	Located at ▶149 10TH AVENUE SOUTH, NAPLES, FL ZIP+4 ▶ 34106	- <b></b> -		
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			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority	1	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of	)		ı
-	the foreign country	<u> </u>		
Pal	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
1 a	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?			
	(*, *, * * * * * * * * * * * * * * * * *			
	(1, 1) sample and the property of the superior			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No" 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)			
b	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here			-
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2011?	1 c		Х
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 2011, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years 🕨	1	\ \ \	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	ŀ		
	(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 )	2 b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b></b>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	Ì	] ]	
	at any time during the year?			
b	of "Yes," did it have excess business holdings in 2011 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	2 h		
4 0	foundation had excess business holdings in 2011)  Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1 70	$\vdash \vdash$	<del></del>
,	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		Х
		orm 99	0-PF	(2011)

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Pai	tVII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amou	int to				
	(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	1 4945(e))?	, Yes X No	,	
	(2) Influence the outcome of any specific public ele	ction (see section 4	1955), or to carry or	n,		
	directly or indirectly, any voter registration drive?			Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or otl				,	
	(4) Provide a grant to an organization other than a					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s					
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children of		**			
b	If any answer is "Yes" to 5a(1)-(5), did any of the					
-	Regulations section 53 4945 or in a current notice regard				5b	
	Organizations relying on a current notice regarding disast	*				
c	If the answer is "Yes" to question 5a(4), does the					
٠	because it maintained expenditure responsibility for the g		•			
	If "Yes," attach the statement required by Regulations section			1es140	' l l	
٠.	Did the foundation, during the year, receive any fund		otly to may promy			
оa		•				
h	on a personal benefit contract?			• — —		X
D	Did the foundation, during the year, pay premiums, direct	city or indirectly, on a	personal benefit contrac	×	6b	- A
_	If "Yes" to 6b, file Form 8870	-4 4.0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .	ah altaa taa aa aa taa 2	□ □		
	At any time during the tax year, was the foundation a pa		•	•		V
	If "Yes," did the foundation receive any proceeds or have  Information About Officers, Directors				7b	X
ક્લિ	Information About Officers, Directors and Contractors	, musices, roun	uation managers,	mighty Faid Emplo	yees,	
1	List all officers, directors, trustees, foundation n					
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
AT'	<u> PACHMENT 10                                    </u>			9		0
	<del></del>					
			<u> </u>			
<b>-</b>						
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on line		ons). If nor	ne, enter
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense other allow	
		devoted to position		compensation		
	NONE				·	
	<del></del>					
		ļ				
Tota	I number of other employees paid over \$50,000 .				•	

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empl and Contractors (continued)	oyees,
3 Five h	ighest-paid independent contractors for professional services (see instructions). If none, enter "NO	IE "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total number	er of others receiving over \$50,000 for professional services	-
Part IX-A	Summary of Direct Charitable Activities	
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
		<u> </u>
	OUNDATION IS NOT INVOLVED IN ANY DIRECT CHARITABLE	
	ITIES. ITS PRIMARY PURPOSE IS TO SUPPORT, BY CONTRIBUT-	
	OTHER ORGANIZATIONS EXEMPT UNDER IRC SECTION 501(C)(3)	<u></u>
2		
3		
4		
The state of the same of the s		
Part IX-B	Summary of Program-Related Investments (see instructions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other pro-	ram-related investments. See instructions	
3 NONE		
Total, Add I	nes 1 through 3	
. 5		

Form 990-PF (2011)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foresee instructions.)	eign foundat	ions,
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	637,810.
b	Average of monthly cash balances	1b	126,894.
C	Fair market value of all other assets (see instructions)	. 1c	2,216,054.
d	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and	1 d	2,980,758.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	. 2	
3		3	2,980,758.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	44,711.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	. 5	2,936,047.
6	Minimum investment return. Enter 5% of line 5	. 6	146,802.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here	part)	-
1	Minimum investment return from Part X, line 6	. 1	146,802.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 3,258		
b		7 1	
С		7 2c	3,258.
3	Distributable amount before adjustments Subtract line 2c from line 1		143,544.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	1 _ 1	143,544.
6	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	'	
	line 1		143,544.
Pa	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	442,155.
b	Dragram related investments, total from Day IV D	4.	
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	442,155.
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	442,155.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	• ——	
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2011)

Form 990-PF (2011) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) Years prior to 2010 Corpus 2010 2011 Distributable amount for 2011 from Part XI, 143,544. 2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only . . . **b** Total for prior years 20 09 ,20 08 ,20 07 Excess distributions carryover, if any, to 2011 a From 2006 . . . . . . 460,279. **b** From 2007 c From 2008 . . . . . . . 1,974,782. **d** From 2009 . . . . . . 846,006. e From 2010 . . . . . . 928,922. 4,209,989. Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ \_\_\_\_ 442,155. a Applied to 2010, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election 442,155. d Applied to 2011 distributable amount . . . . . e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2011. 143,544. 143,544. (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 4,508,600. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions
Undistributed income for 2010 Subtract line f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012 ......... Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2012. 4,508,600. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9

Form **990-PF** (2011)

a Excess from 2007 . . .

b Excess from 2008 . . .

c Excess from 2009 . . . d Excess from 2010 . . .

e Excess from 2011 . . .

38711A 0114

316,735.

928,922.

442,155.

1,974,782. 846,006.

غنا	Private Oper	rating Foundations	(see instruction	ons and Pa	rt VII-A, que	estion 9)			NOT A	PATTCABLE
1 a	If the foundation has					operating				
	foundation, and the rulin					<i>.</i> •	L	1	<del></del>	<del>,</del>
b	Check box to indicate wh		a private operatir	ng foundation				4942(j)	(3) or	4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year	ļ		Prior 3 years		· <u>-</u>		(e	) Total
	Justed net income from Part I or the minimum investment return from Part X for each	(a) 2011	(b) 2010		(c) 2009		(d) 200	8		
	year listed		ļ							
b b	85% of line 2a						· · -			
Ü	XII line 4 for each year listed .									
d	Amounts included in line 2c not used directly for active conduct of exempt activities							-		
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c									
3 a	Complete 3a b, or c for the alternative test relied upon Assets' alternative test enter			ļ						
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section</li></ul>									
b	4942(j)(3)(B)(i) Endowment alternative test- enter 2/3 of minimum invest-		_		<u> </u>					
	ment return shown in Part X, line 6 for each year listed									·
С	"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		<del></del>							
Pa	rt XV Supplement	ary Information (C	omplete this	part onl	, if the fo	undation	had \$	5,000	or more	in assets
	at any time o	during the year - se	e instructions	s.)						
1	Information Regarding	•								
а	List any managers of before the close of any								ed by the	foundation
	<del></del>	HILLENBRAND								
ь	List any managers of ownership of a partner						•	equally	large por	rtion of the
	NONE									
2	Information Regarding	g Contribution, Gran	t, Gıft, Loan, Sc	holarship, e	tc., Programs	s:				
	Check here ► X If t unsolicited requests for other conditions, comp	or funds. If the found	lation makes gi							
a	The name, address, a	nd telephone number	of the person t	o whom ap	olications sho	uld be addı	ressed			
b	The form in which app	lications should be su	bmitted and inf	ormation ar	id materials i	they shoul	d include			
C	Any submission deadli	nes	<u> </u>	· · · · · · · · · · · · · · · · · · ·		-	· · · · · ·			
d	Any restrictions or lift	mitations on awards	s, such as by	geographic	al areas, ch	arıtable fı	elds, kır	nds of 11	nstitutions	s, or other

Form 990-PF (2011)

Page **11** 

Part XV Supplementary Information				
3 Grants and Contributions Paid Dur	Ing the Year or Appl	roved for F	1	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
SEE STATEMENT ATTACHED				430,655
				, ,
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·		▶ 3a	430,65
B Approved for future payment				
Total			▶ 3b	

Page **12** 

Enter gross amounts unless otherwise	indicated Unrelat	ted business income	Excluded by	section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a		<del>-</del>			(Occ manacions)
b					<del> </del>
С		<del>-</del>			
d	ļ I				
е					
f	i I				
g Fees and contracts from governme					
2 Membership dues and assessments	s				
3 Interest on savings and temporary cash i					
4 Dividends and interest from securiti	ies		14	34,758.	
5 Net rental income or (loss) from rea	al estate				·
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from persona					
7 Other investment income			18	-21,535.	
8 Gain or (loss) from sales of assets other	than inventory	·	18	180,378.	
9 Net income or (loss) from special ev	vents				
0 Gross profit or (loss) from sales of in	nventory				
1 Other revenue a					
b	l l			<u>_</u>	
с	1				
d					
e					
2 Subtotal Add columns (b), (d), and	(e)			193,601.	
2 Odbiotal 7tdd Coldiffilis (b), (d), alld					
3 Total Add line 12, columns (b), (d),	, and (e)			13	193,601.
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions	to verify calculations)				193,601.
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions					193,601.
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B. Relationship of	to verify calculations )  f Activities to the Acc	complishment of E	xempt Purp	oses	
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions  Part XVI_B Relationship of  Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	ited importantly to th
3 Total Add line 12, columns (b), (d), See worksheet in line 13 instructions Part XVI-B Relationship of Line No Explain below how e	to verify calculations)  f Activities to the Acce each activity for which	complishment of E	xempt Purp	oses  ) of Part XVI-A contribu	

Form 990-PF (2011)

Part •	XVII:	Information R Exempt Orga		sfers To and Trans	sactions	and Relationships With Non	chari	itabl	9
ın Ol	secti rganiz	ion 501(c) of the Co zations?	ode (other than s	ection 501(c)(3) organiz	zations) or	h any other organization described in section 527, relating to political		Yes	No
		·	-	noncharitable exempt	-	on of	1a(1)		Х
							1a(2)	1	Х
<b>b</b> O	ther t	ransactions							
(1	I) Sal	es of assets to a no	incharitable exem	pt organization			1b(1)		X
(2	?) Pur	chases of assets fro	om a noncharitab	le exempt organization			1b(2)		X
(3	) Rei	mburnement errang	ipment, or other a	ssets	• • • • •		1b(3)		X
(4	1) Nei	inbursement arrang	ements				1b(4)		X
(6	)) LU0 () Per	formance of service	es	or fundraising solicitation	ne		1b(5) 1b(6)	1	X
c S	harınd	of facilities, equipr	ment, mailing lists	other assets, or paid er	molovees		1c		X
d If va	the a	answer to any of th of the goods, other	ne above is "Yes assets, or service r sharing arrange	" complete the followings given by the reporting	ng schedung founda	ule Column (b) should always show tion If the foundation received less alue of the goods, other assets, or so Description of transfers, transactions, and sha	than ervice	fair m s rec	narke eived
1-7	-	N/A	(4) 11.0			/A			
						more tax-exempt organizations oction 527?			
		" complete the folio		er than section 50 r(c)(c	)))	0.00000277	''	C3 [_ <u>··</u>	] 140
		(a) Name of organizatio	n	(b) Type of organizat	tion	(c) Description of relation	ship		
Sign Here	correct	penalties of perjury, I declinated and complete Declaration of the period of the penalties	are that I have examine to go are (other than tax	d this return, including accompany ayer) is based on all information of 9/31/13  Date	nying schedule which prepare Title	May the IR:	S discus	s this	return below No
	<u></u>	Print/Type preparer's	game	Preparer's signature	0	Date / / Chock of	PTIN		
Paid	ro-		(	Klein B/	4	7/25/13 self-employed	P012		,2
Prepa			RNST & YOUNG			Firm's EIN ► 34-6	5655	96	
Use C	nıy	Firm's address ▶ 5		Ε		10026	72 2	202	
		l NE	W YORK, NY			10036   Phone no 212-7	13-3(	JUU	

Form 990-PF (2011)

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FORM 990PF - COMPUTATION OF I	AND INTEREST	ATTACHMENT	9
END OF FISCAL/CALENDAR YEAR			09/30/2012 08/15/2013 07/31/2013 166 6
			64. 80.
			144.

## THE HILLENBRAND FAMILY FOUNDATION

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

Gross sale proceletion allowed/ allowed	Kind of I	Property	Description		perty Description				or	Date acquired	Date sold
TOTAL SHORT-TERM COMMON TRUST FUND AND PARTNERSHIP, S CORPORATION, AND OTHER ESTATES OR TRUST GAIN OR LOSS  TOTAL LONG-TERM COMMON TRUST FUND AND PARTNERSHIP, S CORPORATION, AND OTHER ESTATES OR TRUST GAIN OR LOSS  333.1682 SHS ALTAIR STARS FUND HOLDING PROPERTY TYPE: SECURITIES 33,321.  90.31 SHS XANTHOS INVESTMENT PARTNERS LT PROPERTY TYPE: SECURITIES 100,115.  250,000.  DISPOSITION- MONOMOY WARRANTS  20,533.  DISPOSITION- TSC HOLDINGS  VAR 20,533.  GS DIRECT INVEST. FD 2000- EXCESS DIST  VAR 14,598.	price less	allowed/	other	as of	as of	FMV over	D	Gain or			
PARTNERSHIP, S CORPORATION, AND OTHER ESTATES OR TRUST GAIN OR LOSS  333.1682 SHS ALTAIR STARS FUND HOLDING PROPERTY TYPE: SECURITIES 33,321.  90.31 SHS XANTHOS INVESTMENT PARTNERS LT PROPERTY TYPE: SECURITIES 100,115.  DISPOSITION- MONOMOY WARRANTS  20,533.  DISPOSITION- TSC HOLDINGS  37,803.  GS DIRECT INVEST. FD 2000- EXCESS DIST  VAR 14,598.	penses or sale	anowabie	TOTAL SHORT PARTNERSHIF ESTATES OR	T-TERM COMMO P, S CORPORA TRUST GAIN	N TRUST FUN TION, AND C OR LOSS	D AND THER					
PROPERTY TYPE: SECURITIES 33,321.  90.31 SHS XANTHOS INVESTMENT PARTNERS LT PROPERTY TYPE: SECURITIES 100,115.  DISPOSITION- MONOMOY WARRANTS  VAR 20,533.  DISPOSITION- TSC HOLDINGS  37,803.  GS DIRECT INVEST. FD 2000- EXCESS DIST  VAR 14,598.			PARTNERSHIP	, S CORPORA	TION, AND C			·-13,047.			
90.31 SHS XANTHOS INVESTMENT PARTNERS LT P VAR 12/30/20 PROPERTY TYPE: SECURITIES 100,115.  DISPOSITION- MONOMOY WARRANTS VAR 20,533.  DISPOSITION- TSC HOLDINGS VAR 37,803.  GS DIRECT INVEST. FD 2000- EXCESS DIST VAR 14,598.			PROPERTY TY			LDING	P		08/08/203		
PROPERTY TYPE: SECURITIES 100,115.  DISPOSITION- MONOMOY WARRANTS  VAR 20,533.  DISPOSITION- TSC HOLDINGS  37,803.  GS DIRECT INVEST. FD 2000- EXCESS DIST  VAR 14,598.	13,253.		33,321.					-20,068.			
DISPOSITION- MONOMOY WARRANTS  VAR 20,533.  DISPOSITION- TSC HOLDINGS  VAR 37,803.  GS DIRECT INVEST. FD 2000- EXCESS DIST  VAR 14,598.			PROPERTY TY			NERS LT	Ρ		12/30/20		
20,533.  DISPOSITION- TSC HOLDINGS  VAR 37,803.  GS DIRECT INVEST. FD 2000- EXCESS DIST  VAR 14,598.	250,000.		100,115.					149,885.			
37,803.  GS DIRECT INVEST. FD 2000- EXCESS DIST  VAR 14,598.	20,533.		DISPOSITION	I- MONOMOY W	ARRANTS				V		
14,598.	37,803.		DISPOSITION	- TSC HOLDII	NGS				V		
TAL GAIN(LOSS)	14,598.		GS DIRECT I	NVEST. FD 2	000- EXCESS	DIST			V		
	OTAL GAIN(L	OSS)						180,378.			

# FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	613. 176. 6,396. 836. 602. 1,490. 320. 19,571. 1,271. 2,860.	34,758.
REVENUE AND EXPENSES PER BOOKS	613. 176. 6,396. 836. 602. 1,490. 320. 19,571. 1,271. 2,860.	34,758.
DESCRIPTION	IMPUTED INTEREST ON LOAN  - BOYS & GIRLS CLUB BRIDGE STREET FUND 2000, LP GS CAPITAL PARTNERS 2000 EMPLOYEE FUND GS DIRECT INVESTMENT FUND 2000, LP BS SPECIAL OPPORTUNITY FUND 2000, LP GS VINTAGE II EMPLOYEE FUND, LP BS PEP TECHNOLOGY FUND 2000, LP GS A/C #040-35309-6 MCP SUPPLEMENTAL FUND LP FIDELITY A/C #1444 MCP SUPPLEMENTAL FUND II LP INTEREST ON MONOMOY WARRANTS	TOTAL

## THE HILLENBRAND FAMILY FOUNDATION

## FORM 990PF, PART I - OTHER INCOME

NET INVESTMENT	INCOME -16	243	-692 11	-22,998
REVENUE AND EXPENSES	PER BOOKS -16.	243. -902.	-692. 11.	1,113. -22,998.

-22,648.

-21,535.

TOTALS

FFF	<u>י</u>
CNLENIICCO	
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<b>—</b>	+
_	
RM GGODF DART	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7

CHARITABLE <u>PURPOSES</u>	11,500.	11,500.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	11,500.	11,500.
REVENUE AND EXPENSES PER BOOKS	23,000.	23,000.
		TOTALS
DESCRIPTION	ERNST & YOUNG LLP	

ATTACHMENT 3 PAGE 20

	REVENUE
THE HILLENBRAND FAMILY FOUNDATION	FORM 990PE, PART I - TAXES

NET INVESTMENT INCOME 496.	496.
REVENUE AND EXPENSES PER BOOKS	496. 1,113. 4,000. 5,609.
	TOTALS
FORM 990PE, ECH	DESCRIPTION FOREIGN TAXES PAID 2010 TAX OVERPAYMENT IRS TAX PAYMENT

1114

THE HILLENBRAND FAMILY FOUNDATION

FORM 990PF, PART I - OTHER EXPENSES

NET INVESTMENT	INCOME	380.	105.	503.	754.	176.	400.	81.	1,981.	2,763.	2,580.	7,860.	17,583.
REVENUE AND EXPENSES	PER BOOKS	380.	105.	503.	754.	176.	400.	81.	1,981.	2,763.	2,580.	7,860.	17,583.
	DESCRIPTION	INTEREST EXPENSE	MISCELLANEOUS BANK FEES	BRIDGE STREET FUND 2000, LP	GS CAPITAL PTNRS 2000 EMP FD	GS DIRECT INVESTMENT FUND 2000	BS SPECIAL OPPORTUNITY FUND	MANAGING DIRECTOR INVEST. FUND	GS VINTAGE II EMPLOYEE FUND LP	BS PEP TECHNOLOGY FUND 2000 LP	MCP SUPPLEMENTAL FUND LP	MCP SUPPLEMENTAL FUND II LP	TOTALS

V 11-6.5

FORM 990PF, PART II - OTHER NOTES AND LOANS RECEIVABLE	
BORROWER: BOYS AND GIRLS CLUBS OF KING CO	UNTY
BEGINNING BALANCE DUE	225,000.
ENDING BALANCE DUE	182,813.
ENDING FAIR MARKET VALUE	182,813.
TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE	225,000.
TOTAL ENDING BOOK - OTHER NOTES AND LOANS RECEIVABLE	<u> </u>
TOTAL ENDING FMV - OTHER NOTES AND LOANS RECEIVABLE	182,813.

SPDR S&P 500 ETF TRUST UNIT

TOTALS

ENDING	BOOK VALUE

ENDING FMV

124,957.

129,573.

124,957.

129,573.

## FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION
XANTHOS INVESTMENT PARTNERS BS PEP TECH FUND 2000, LP
GS VINTAGE II EMPLOYEE FUND, LP
TNRS 2000 EMP FD, I.P
CIAL OPPOR FD 2000,
GS DIRECT INVEST. FD 2000, LP
BS FUND 2000, LP
MED AVANTE
MCP SUPPLEMENTAL FUND
BLUE ORCHID
ALTAIR STARS FUND LIMITED HLDG
TSC GLOBAL LLC
MCP SUPPLEMENTAL FUND II LP
AWREY BAKERIES LLC - OPTIONS
HESS INDUSTRIES INC - WARRANT
BARJAIN, LLC

ENDING	575,064. 6,976. 59,141.	, 13 , 65 , 15	3,975. 99,999. 260,262. 561,240.	42,252.
ENDING BOOK VALUE	233,218. 8,131. 91,047.	0,0,0	31,357. 99,999. 253,965. 500,000.	35,483.

1,797,848.

1,622,208.

TOTALS

13-4050660

ECTORS, AND TRUSTEES	AND AVERAGE HOURS PER EVOTED TO POSITION	0	0 0	0 0	0 0
OF OFFICERS, DIRECTORS, AN	TITLE AND AVERAGE HOURS WEEK DEVOTED TO POSITION	TRUSTEE	TRUSTEE	TRUSTEE	TRUSTEE
FORM 990PE, PART VIII - LIST OF OFFICERS, DIR	NAME AND ADDRESS	MICHAEL R. HILLENBRAND 149 10TH AVENUE SOUTH NAPLES, FL 34102	CAROL HILLENBRAND 149 10TH AVENUE SOUTH NAPLES, FL 34102	JUSTIN HILLENBRAND 149 10TH AVENUE SOUTH NAPLES, FL 34102	MOLLY VERNON 149 10TH AVENUE SOUTH

GRAND TOTALS

## **SCHEDULE D** (Form 1041)

**Capital Gains and Losses** ▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for

Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

THE HILLENBRAND FAMILY FOUNDATION

Employer identification number

13-4050660

Note: Form 5227 filers need to complete only Parts I and II

C/O MICHAEL R. HILLENBRAND

Par	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ear or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a	· · · · · · · · · · · · · · · · · · ·						
b	Enter the short-term gain or (loss), if any,	from Schedule D	0-1, line 1b		:	1 b	
2	Short-term capital gain or (loss) from Form					2	
_							
3 4	Net short-term gain or (loss) from partners Short-term capital loss carryover Enter					3	<u>-9,326.</u>
•	Carryover Worksheet					4	( )
5	Net short-term gain or (loss). Combine column (3) on the back	lines 1a through	gh 4 in colum	in (f). Enter here an	d on line 13,	5	-9,326.
Par	Long-Term Capital Gains and Lo	sses - Assets	Held More T	han One Year			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6 a							
					<del>                                     </del>		
		<del> </del>			<u> </u>		
		ļ			<del>- </del>		
ь	Enter the long-term gain or (loss), if any, fi	rom Schedule D	-1, line 6b			6b	202,751.
7	Long-term capital gain or (loss) from Form					7	
							13.047
8	Net long-term gain or (loss) from partners	hips, S corporat	ions, and other	estates or trusts		8	-13,047.
9	Capital gain distributions					9	
10	Gain from Form 4797, Part I				Constal Loop	10	
11	Carryover Worksheet			<i></i>		11	( )
12	Net long-term gain or (loss). Combine li	nes 6a through	n 11 in colum	л (f) Enter here and	d on line 14a, ▶ ∫	12	189,704.

Schedule D (Form 1041) 2011

For Paperwork Reduction Act Notice, see the Instructions for Form 1041

Sche	rdule D (Form 1041) 2011				Page 2
Pa	Summary of Parts I and II  Caution: Read the instructions before completing this p	part	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
13	Net short-term gain or (loss)	13			-9,326.
14	Net long-term gain or (loss)				
а	Total for year	14a			189,704.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
С	28% rate gain	14c			
15	Total net gain or (loss) Combine lines 13 and 14a ▶	15		·	180,378.
	e' If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (				
_	s, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, co	mpieti	e Paπ IV and the Capital	Loss Carryover vi	onksneet, as necessary
	rt IV Capital Loss Limitation				<del></del>
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	'art I, li	ne 4c, if a trust), the <b>s</b> n		
Note	The loss on line 15, column (3) or b \$3,000  If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page vover Worksheet in the instructions to figure your capital loss carryover	. i, i <sub>I</sub> n	e 22 (or Form 990-T, III	ne 34), is a loss, o	complete the Capital Loss
Pa	Tax Computation Using Maximum Capital Gains Rate	s			
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu	mn (2	) are gains, or an am	ount is entered	in Part I or Part II and
ther	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more	e thar	zero		
	tion: Skip this part and complete the <b>Schedule D Tax Worksheet</b> in the i	nstruc	ctions if		
	ither line 14b, col. (2) or line 14c, col. (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
	n 990-T trusts. Complete this part only if both lines 14a and 15 are	a dain	e or avalified divide	ande are includ	ad in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	_	•		
	ther line 14b, col (2) or line 14c, col (2) is more than zero				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4)	17	Į.	
18	Enter the smaller of line 14a or 15 in column (2)	٠, ٠	• • • • • • • • • • • • • • • • • • • •		
_	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified			1	}
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 21			ľ	
22	Subtract line 21 from line 20 If zero or less, enter -0		22		
23	Subtract line 22 from line 17 If zero or less, enter -0		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24				
	Yes Skip lines 25 and 26, go to line 27 and check the "No" box				
	No Enter the amount from line 23				
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?				
	Yes Skip lines 27 thru 30 go to line 31 No. Enter the smaller of line 17 or line	e 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% (15)			30	
31	Figure the tax on the amount on line 23. Use the 2011 Tax Rate				
	(see the Schedule Ginstructions in the instructions for Form 1041).			31	
			•	)	
32	Add lines 30 and 31			32	
33	Figure the tax on the amount on line 17 Use the 2011 Tax Rate			<b> </b>	
	(see the Schedule Ginstructions in the instructions for Form 1041).				<del></del>
34	Tax on all taxable income Enter the smaller of line 32 or line 33 h			[	
	G, line 1a (or Form 990-T, line 36)	• • •	<u> </u>		 edule D (Form 1041) 2011
				SCH	Judie D (FORR 1041) 2011

JSA 1F1220 2 000 Schedule D-1 (Form 1041) 2011 Page 2

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side Employer identification number THE HILLENBRAND FAMILY FOUNDATION 13-4050660

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year								
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)			
6a 333.1682 SHS ALTAIR STARS FUND HOLDING	VAR	08/08/2012	13,253.	33,321.	-20,068.			
90.31 SHS XANTHOS INVESTMENT PARTNERS LTD	VAR	12/30/2011	250,000.	100,115.	149,885.			
DISPOSITION- MONOMOY WARRANTS			20,533.		20,533.			
DISPOSITION- TSC HOLDINGS			37,803.		37,803.			
GS DIRECT INVEST. FD 2000- EXCESS DIST			14,598.		14,598.			
					<u> </u>			
	1							
			<u> </u>					
					<del></del>			
					<u> </u>			
	_			<u> </u>				
	L							

V 11-6.5

## FEDERAL FOOTNOTES

PART XIII, LINE 4C: THE FOUNDATION HEREBY ELECTS, PURSUANT TO REG. SEC 53.4942(A)-3(D)(2), TO APPLY ALL OF THE 2011 QUALIFYING DISTRIBUTIONS TO CORPUS.

38711A 0114 V 11-6.5 PAGE 36

## The Hillenbrand Family Foundation EIN: 13-4050660 F/Y/E 09/30/2012

## 990-PF, Part XV, Line 3a

cipient P	Purpose of Grant	Amount of Contribution
501 (c)(3) F	For General Fund	66,666 34
501 (c)(3) F	For General Fund	10,946 25
501 (c)(3) Γ	or General Fund	46,545 91
501 (c)(3) F	For General Fund	53,333 00
501 (c)(3) F	For General Fund	7,500 00
501 (c)(3) F	For General Fund	18,500 00
501 (c)(3) F	For General Fund	500 00
50! (c)(3) F	For General Fund	2,500 00
501 (c)(3) F	For General Fund	12,000 00
501 (c)(3) F	For General Fund	5,000 00
501 (c)(3) F	For General Fund	3,000 00
501 (c)(3) F	For General Fund	500 00
501 (c)(3) F	For General Fund	300 00
501 (c)(3) F	For General Fund	20,000 00
501 (c)(3) F	For General Fund	175,000 00
501 (c)(3) F	For General Fund	1,000 00
501 (c)(3) F	For General Fund	5,000 00
501 (c)(3) F	For General Fund	1,500 00
(-)(-)	For General Fund mputed Interest on	250 00
1501 (c)(3) II	nterest Free Loan	613 00
5		•

## $\mathbf{Form}~\mathbf{8868}$

(Rev January 2012)

## Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

			•				
	e filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Mi				▶ X		
•	<i>plete Part II unless</i> you have already been gra				8868		
a corporation 8868 to red Return for instructions)	filing (e-file). You can electronically file Form on required to file Form 990-T), or an addition quest an extension of time to file any of the Transfers Associated With Certain Persona For more details on the electronic filing of the Atomatic 3-Month Extension of Time. Or	nal (not au forms liste il Benefit nis form, vi	tomatic) 3-month exten ed in Part I or Part II wi Contracts, which must sit www.irs.gov/efile and	ision of time. You can electro th the exception of Form 88 t be sent to the IRS in pa d click on e-file for Charities &	onically file Form 370, Information per format (see		
	on required to file Form 990-T and requesting		<del></del>				
Part I only All other col			<b></b>	·	▶ ☐		
	Name of exempt organization or other filer, see in	structions		Employer identification nu			
Type or	THE HILLENBRAND FAMILY FOUND			,	(2,1,1,1)		
print	C/O MICHAEL R. HILLENBRAND			X 13-4050660			
File by the	Number, street, and room or suite no If a P O bo	x, see instru	ctions	Social security number (SS	5N)		
due date for filing your	P.O. BOX 3549						
retum See Instructions	City, town or post office, state, and ZIP code For	a foreign ad	dress, see instructions				
	NAPLES, FL 34106						
Enter the Re	eturn code for the return that this application	is for (file a	a separate application fo	r each return)	0 4		
Application		Return	Application	······································	Return		
ls For		Code	ls For		Code		
Form 990		01	Form 990-T (corporati	on)	07		
Form 990-B	L	02	Form 1041-A		08		
Form 990-E	Z	01	Form 4720		09		
Form 990-Pl		04	Form 5227		10		
	(sec. 401(a) or 408(a) trust)	05	Form 6069				
Form 990-T	(trust other than above)	06	Form 8870		12		
Telephon If the orga If this is for the whole	is are in the care of ► MICHAEL R. HII  is No. ► 239 434-7916  anization does not have an office or place of I  or a Group Return, enter the organization's for its group, check this box ►	Dusiness in ousiness in or digit Gro f it is for pa	FAX No. ▶ the United States, checoup Exemption Number (	GEN)	If this is		
1 I reque	est an automatic 3-month (6 months for a cor	poration re	equired to file Form 990	-T) extension of time			
▶□	05/15 , 20 13 , to file the organization's return for. calendar year 20 or tax year beginning 10/0						
c	ax year entered in line 1 is for less than 12 m Change in accounting period						
	application is for Form 990-BL, 990-PF, 99	Ю-Т, 4720	, or 6069, enter the t	1 1			
	undable credits See instructions			3a \$	5,113.		
	application is for Form 990-PF, 990-T,			1 1	E 110		
	ted tax payments made Include any prior yea				5,113.		
	ce due. Subtract line 3b from line 3a Include		ent with this form, if rec		^		
	ronic Federal Tax Payment System) See Instru		with this Earn 9900	3c \$	0 m 8870 FO for		
	you are going to make an electronic fund v	vitiiarawal	with this form 8868,	SEE FUIII 0400-EU AND FOI	111 0018-EO 101		
payment ins	structions. Act and Paperwork Reduction Act Notice, see Instr	uctions		Form 8	3868 (Rev 1-2012)		
UL PLIVACY A	TOL BING PROPERTY OF A REGULATION ACCUMUNCE, SEE 11150	avuvii3.		ı Çilli <b>C</b>	(1.07 1-2012)		

Form 8868	(Rev 1-2012)					Page 2
• If you	are filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part I	and	check this box	<b>.</b> . ▶ X
	ly complete Part II if you have already been gra					
<ul><li>If you.</li></ul>	are filing for an Automatic 3-Month Extension, o					
Part II	Additional (Not Automatic) 3-Month Ex	ctension c	of Time. Only file the orig	ınal	(no copies needed)	
			E:	nter f	iler's identifying number, see	
_	Name of exempt organization or other filer, see in				Employer identification numb	oer (EIN) or
Type or	THE HILLENBRAND FAMILY FOUNDA	TION		x		
print					13-4050660	<del></del>
File by the	Number, street, and room or suite no. If a P.O. bo.	x, see instruc	ctions	╽┌─┐	Social security number (SSN)	)
due date for filing your	P.O. BOX 3549  City, town or post office, state, and ZIP code For	a faraian ad	drong non instructions			
return See		a roreign au	oress, see instructions			
Instructions	NAPLES, FL 34106					. 0 4
	Return code for the return that this application	<del>, , , , , , , , , , , , , , , , , , , </del>		acn re	eturn)	Return
Applicati Is For	OII	Return Code	Application Is For			Code
Form 99	0		is roi			Code
Form 990	·	01	Form 1041-A			08
Form 990		02	Form 4720		<u> </u>	09
Form 990		04	Form 5227			10
	0-T (sec 401(a) or 408(a) trust)	05	Form 6069		<u> </u>	11
	O-T (trust other than above)	06	Form 8870		<del></del>	12
	o not complete Part II if you were not already		<del></del>	Sion	on a previously filed For	<del></del>
	poks are in the care of ▶ MICHAEL R HILI			10.0.0	on a previously mean on	
	none No ► 239 434-7916		AX No ▶			
	organization does not have an office or place of l	<del></del>		us bo		▶ □
	is for a Group Return, enter the organization's for					is is
	hole group, check this box	-		_		
	he names and EINs of all members the extension		or a second seco	•		
	quest an additional 3-month extension of time ur		0	8/1	5 , 20 13	
	calendar year, or other tax year beginni					20 12
	e tax year entered in line 5 is for less than 12 m					
	Change in accounting period		<del></del>			
7 Sta	te in detail why you need the extension ADDIT	IONAL T	IME IS NEEDED TO C	OLLI	ECT ALL THE	
INF	FORMATION NECESSARY TO FILE A COM	PLETE A	ND ACCURATE RETURN			
8a If th	nis application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the tent	tative		
	refundable credits. See instructions				8a \$	5,113.
	his application is for Form 990-PF, 990-T,				1 1	
esti	mated tax payments made. Include any pri	or year o	verpayment allowed as	a cr		
	ount paid previously with Form 8868				8b \$	5,113.
	ance Due Subtract line 8b from line 8a Include	•	ent with this form, if requir	ed, b	-	
(El€	ectronic Federal Tax Payment System) See instru				8c \$	0
	Signature and Verifica		•			
	allies of perjury, I declare that I have examined this form, rrect, and complete, and that I am authorized to prepare this fo		companying schedules and statem	ients,	and to the best of my knowled	lge and belief,
10 1146, 00	so, and somplete, and that I am adminized to prepare this to	****			.1.1	
Signature <b>Þ</b>	· Ildu Arke	ı	Title ► CPA		Date > 6/8/1	3
	5.7-(		<u></u>	<del></del>		(Rev 1-2012)