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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2013 or tax year beginning and ending A Employer identification number Name of foundation BYRON A. ROOT MEMORIAL TRUST FUND BURKE, COSTANZA & CARBERRY LLP, 31-6192613 Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 9191 BROADWAY 219-769-1313 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here MERRILLVILLE IN 46410 Initial return Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust L Other taxable private foundation under section 507(b)(1)(A), check here X Cash 1 Fair market value of all assets at end of year | J | Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 643,655. (Part I, column (d) must be on cash basis ▶\$ Analysis of Revenue and Expenses (d) Disbursements Part I (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books ıncome income N/A Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B 2 Interest on savings and temporary cash investments 27,222. 27,222 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold OGDEN. c Gross profit or (loss) 11 Other income 27,222 27,222 Total. Add lines 1 through 11 3,694. 5.491 1,797 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 703 703 0. STMT 2 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest 422 0. 422 STMT 3 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 1,604 0. 1,604 STMT 4 Operating 23 Other expenses 24 Total operating and administrative 8,220 3,694. 4,526 expenses. Add lines 13 through 23 16,900 16,900. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 25,120 4,526 20,594. Add lines 24 and 25 27 Subtract line 26 from line 12: 2,102 2 Excess of revenue over expenses and disbursements

c Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

b Net investment income (if negative, enter -0-)

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N/A

22,696

BYRON A. 'ROOT MEMORIAL TRUST FUND 31-6192613 BURKE COSTANZA & CARBERRY LLP, TRUSTEE Page 2 Part II Balance Sheets Attached schedules and amounts in the description Beginning of year End of year column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 2,425 6,674 6,674. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans 362,755. 360,608. STMT 5 636,981. 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 365,180. 367,282, instructions. Also, see page 1, item 1) 643,655. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) 0 Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted **▶** 🗓 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 363,093 363,093 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 2,087. 4,189. 29 Retained earnings, accumulated income, endowment, or other funds 365,180. 367,<u>282</u>. 30 Total net assets or fund balances 365,180. 367,282 31 Total liabilities and net assets/fund balances

Part | Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		-
	(must agree with end-of-year figure reported on prior year's return)	1	365,180.
2	Enter amount from Part I, line 27a	2	2,102.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	367,282.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	367,282.

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BYRON A. 'ROOT MEMORIAL TRUST FUND TRUSTEE 31-6192613 COSTANZA & CARBERRY LLP Form 990-PF (2013) BURKE Part 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 | and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% 454. of Part I, line 27b c 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-) 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 454. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2013 estimated tax payments and 2012 overpayment credited to 2013 ĥа b Exempt foreign organizations - tax withheld at source 6b 490 c Tax paid with application for extension of time to file (Form 8868) 60 d Backup withholding erroneously withheld 6d 490. 7 Total credits and payments. Add lines 6a through 6d 7 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 36. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 36. Refunded 0. 11 Enter the amount of line 10 to be: Credited to 2014 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Х 1a any political campaign? X 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 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. Х c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. ► \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ X 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 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 X 6 remain in the governing instrument? 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 7 8a Enter the states to which the foundation reports or with which it is registered (see instructions) 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) X 8b of each state as required by General Instruction G? If "No," attach explanation 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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10

a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning

b Are there any years listed in 2a for which the foundation is not 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

b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could reopardize its charitable purpose that

c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2013)

had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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, N/A

Yes X No

Yes X No

N/A

2b

3b

4a

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X

before 2013?

during the year?

If "Yes," list the years

statement - see instructions.)

BYRON A. ROOT MEMORIAL T orm 990-PF (2013) BURKE, COSTANZA & CARBER Part VII-B Statements Regarding Activities for Which I	RY LLP, TRUST		31-61926: ued)	13 Page 6
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section influence the outcome of any specific public election (see section 4955); or any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes 4. Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check he If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945 Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? 	n 4945(e))? or to carry on, directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly or described in section or educational purposes, or for der the exceptions described in indictions)? Here from the tax because it maintal in the section of	Ye cctly, Ye Ye Ye or Ye n Regulations	S X No	ib
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p if "Yes" to 6b, file Form 8870	personal benefit contract?		-	Sb X
7a At any time during the tax year, was the foundation a party to a prohibited tax s		☐ Ye	s X No	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	utable to the transaction? ees, Foundation Ma	nagers, Highly		7b
List all officers, directors, trustees, foundation managers and their	compensation.			
(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 account, other allowances
BURKE, COSTANZA & CARBERRY LLP 9191 BROADWAY	TRUSTEE	0 404		
MERRILLVILLE, IN 46410 JOSEPH N. THOMAS 2146 KENNEDY STREET	2.00 TRUSTEE	2,491.	0.	0.
PORTAGE, IN 46468	2.00	3,000.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(4) 6	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				· · · · · · · · · · · · · · · · · · ·
Total number of other employees paid over \$50,000				0
			Corm	000-DE (2012)

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Amount

Total. Add lines 1 through 3

Part IX-B Summary of Program-Related Investments

All other 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.

BURKE, COSTANZA & CARBERRY LLP, TRUSTEE

P	art X Minimum Investment Return (All domestic foundations must co	omplete this part. Foreign foun	dations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	purposes:		
	Average monthly fair market value of securities		1a	644,195.
	Average of monthly cash balances		1b	12,848.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	657,043.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e	0.	ļ	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	657,043.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see in:	structions)	4	9,856.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V	/, line 4	5	647,187.
6_	Minimum investment return. Enter 5% of line 5		6	32,359.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5 foreign organizations check here and do not complete this part.)) private operating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	32,359.
	Tax on investment income for 2013 from Part VI, line 5	454.		52,555
b	Income tax for 2013. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	454.
3	Distributable amount before adjustments. Subtract line 2c from line 1	İ	3	31,905.
4	Recoveries of amounts treated as qualifying distributions	j	4	<u> </u>
5	Add lines 3 and 4		5	31,905.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, lin	ne 1	7	31,905.
	art XII Qualifying Distributions (see instructions)			<u> </u>
-	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	į	1a	<u>20,594.</u>
þ	Program-related investments - total from Part IX-B]	1b	0.
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:		ļ	
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)	1	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part	XIII, line 4	_4	20,594.
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		_5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	20,594.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	iculating whether the foundation q	ualifies for th	e section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				31,905.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008				
b From 2009	_ *		<u> </u>	, `
c From 2010		,	,	-
d From 2011				
e From 2012	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ► \$ 20,594.	i		0	
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)	.1	0.	 	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	<u>-</u> - <u>-</u>		20,594.
d Applied to 2013 distributable amount				20,394.
e Remaining amount distributed out of corpus	0.	<u>-</u>		0.
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			2
6 Enter the net total of each column as indicated below:			,	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract			-	
line 4b from line 2b	<u></u>	0.		
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	•	0.		
d Subtract line 6c from line 6b. Taxable		0		
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.			<u> </u>	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				11,311.
be distributed in 2014 7 Amounts treated as distributions out of	 			11,311.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	· · · · · · · · · · · · · · · · · · ·			
not applied on line 5 or line 7	0.		غ	
9 Excess distributions carryover to 2014.	<u> </u>			
Subtract lines 7 and 8 from line 6a	0.	·		
10 Analysis of line 9:				
a Excess from 2009				
b Excess from 2010				
c Excess from 2011	•	.	_	
d Excess from 2012				
e Excess from 2013				
				F- 000 DE (0040)

Part XV at any time during the year-see instructions.)

Information Regarding Foundation Managers:

year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

listed

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

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

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

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

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

c Any submission deadlines:

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

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3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual.			
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		
a Paid during the year				
INDIANA UNIVERSITY FOUNDATION	N/A	PC	FUNDING OF ROOT	
1500 STATE ROAD 46 BYPASS			SYMPOSIUMS OF GERIATIC	
BLOOMINGTON, IN 47408			ISSUES	16,900.
			-	
		1		
		ļ		
			1	
		 		
		-		
Total		<u> </u>	▶ 3a	16,900.
b Approved for future payment				10,300,
v rapprovod for fatalo paymont				
NONE				
		1		
Total			<u>▶ 3b</u>	0.

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BURKE, COSTANZA & CARBERRY LLP, TRUSTEE

ter gross amounts unless otherwise indicated.	Unrelated b	usiness income		/ section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue: a					
			-		
	1 1				
	1				
	- -				
Fees and contracts from government agencies	-				
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments					
Dividends and interest from securities			14	27,222.	
Net rental income or (loss) from real estate:		,		27,222.	· · · · · · · · · · · · · · · · · · ·
Debt-financed property					
o Not debt-financed property Net rental income or (loss) from personal					
property Other investment income					
Gain or (loss) from sales of assets other					
han inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			 		
Other revenue:			+++		
a	1 1	- "			
b					
cd					
de	-				
Subtotal. Add columns (b), (d), and (e)).	27,222.	
Total. Add line 12, columns (b), (d), and (e)			2.51		27,2
ivial. Add mie 12, columns (b), (d), and (e)	1				
	1	nlishment of	Evennt D	Irnosas	
e worksheet in line 13 instructions to verify calculations.	s to the Acces		rvembri	n hoses	
e worksheet in line 13 instructions to verify calculations. art XVI-B Relationship of Activities					
e worksheet in line 13 instructions to verify calculations. Art XVI-B Relationship of Activities The No. Explain below how each activity for which in	ncome is reported in c	olumn (e) of Part XV	I-A contributed	importantly to the accomp	olishment of
e worksheet in line 13 instructions to verify calculations. art XVI-B Relationship of Activities	ncome is reported in c	olumn (e) of Part XV	I-A contributed	importantly to the accomp	olishment of
e worksheet in line 13 instructions to verify calculations. Art XVI-B Relationship of Activities The No. Explain below how each activity for which in	ncome is reported in c	olumn (e) of Part XV	I-A contributed	importantly to the accomp	plishment of
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e worksheet in line 13 instructions to verify calculations. art XVI-B Relationship of Activities ne No. Explain below how each activity for which in	ncome is reported in c	olumn (e) of Part XV	I-A contributed	importantly to the accomp	Dishment of

323621 10-10-13

BYRON A. ROOT MEMORIAL TRUST FUND BURKE, COSTANZA & CARBERRY LLP, TRUSTEE 31-6192613 Form 990-PF (2013) Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) 1a(2) (2) Other assets **b** Other transactions: 1b(1) (1) Sales of assets to a noncharitable exempt organization 1b(2) (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets 1b(3) 1b(4) (4) Reimbursement arrangements (5) Loans or loan guarantees 1b(5) Х (6) Performance of services or membership or fundraising solicitations 1b(6) 1c c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (c) Description of relationship (a) Name of organization (b) Type of organization N/A

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		1					
Sign Here	and be	penalties of perjury, I declare that I have explicitly strue, correct, and complete Declared the structure of officer or trustee	examined this return, including according to the return of preparer (other than taxpo	ompanying schedules and ayer) is based on all inform	statements, and to the nation of which prepare	e best of my knowledge er has any knowledge	May the IRS discuss this return with the preparer shown below (see instr)? X Yes No
n_:.i	Olgi	Print/Type preparer's name	Preparer's signatu		Date	Check if self-employed	PTIN
Paid Prepa Use 0		GARY D. BUSHUE Firm's name ► ROWLEY,	BUSHUE & COM	PANY LLP	777	Firm's EIN ► 35	P00362033 5-1866709
_		Firm's address ► 409 WES MICHIGA		AD 6360		Phone no. 219	-874-1437
							Form 990-PF (2013

FORM 990-PF	DIVIDENDS	AND INTER	EST FRO	M SECUR	ITIES S	TATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) EVENUE R BOOKS	(B) NET INVEST- MENT INCOME		
DIVIDENDS - AT&T DIVIDENDS - INC SIMON PROP GROUP	520.		0.	520.	520.		
COMMON	5,990.		0.	5,990.	5,990.		
DIVIDENDS - KINDER MORGAN DIVIDENDS - ONEOK	640.		0.	640.	640.		
PARTNERS DIVIDENDS -	5,740.		0.	5,740.	5,740.		
VECTREN	8,048.		0.	8,048.	8,048.		
INTEREST - 5% NEXTERA NOTE INTEREST - 7% GMAC	1,848.		0.	1,848.	1,848.		
NOTE	3,736.		0.	3,736.	3,736.		
INTEREST - GEN ELEC 6% NOTE	700.		0.	700.	700.		
TO PART I, LINE 4	27,222.		0.	27,222.	27,222.		
FORM 990-PF		LEGAL	FEES		S	TATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I	WEST-	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
LEGAL FEES - JOSEPH 1 THOMAS	1.	703.		703.			0.
TO FM 990-PF, PG 1, I	 LN 16A	703.		703.			0.

FORM 990-PF	TAXES			STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC				
FEDERAL TAXES	422.		422.	<u></u>		0.
TO FORM 990-PF, PG 1, LN 18	422.		422.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC				
BANK SERVICE FEES MISCELLANEOUS	24. 1,580.		24.			0.
TO FORM 990-PF, PG 1, LN 23	1,604.	1,	604.			0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	5
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T
INVESTMENTS		COST		360,608.	636,9	81.
TOTAL TO FORM 990-PF, PART I	I, LINE 13			360,608.	636,9	81.

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

						177
-	are filing for an Automatic 3-Month Extension, complet				•	· [X]
-	are filing for an Additional (Not Automatic) 3-Month Ex				0000	
	complete Part II unless you have already been granted a					
	ic filing (e-file). You can electronically file Form 8868 if y					
•	to file Form 990-T), or an additional (not automatic) 3-moi					
	o file any of the forms listed in Part I or Part II with the exc	-				
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details of	n the elec	tronic filing of this	torm,
Part I	virs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time		ubmit original (no copies ne	adad)		
	ation required to file Form 990-T and requesting an autor	nauc o-mo	THE EXTERISION - CHECK THIS DOX AND C	complete	_	
Part I on	ry corporations (including 1120-C filers), partnerships, REM	IICo and to	ruete must use Form 7004 to reques	t an eyten	sion of time	لـــا
	corporations (including 1120-0 lilers), partnerships, NEW come tax returns.	ios, and ti	usis must use romi root to reques			mher
	Name of exempt organization or other filer, see instru	ctions		Enter filer's identifying number Employer identification number		
Type or print	BYRON A. ROOT MEMORIAL TRUS		AID	Linployer	identification right	DOT (E114) OT
print	JOSEPH N. THOMAS, TRUSTEE	JI 1 01	112		31-61926	13
File by the	Number street and room or suite no. If a B.O. hov. o	ee instruct	tions	Social sec	curity number (SSI	
aue date to filing your	2146 KENNEDY STREET	00 111011 00		000,0,00	, (,
return See instructions		oreign add	ress, see instructions			
	PORTAGE, IN 46368	3101g11 aaa	. 500, 500			
	1 011111027 111 20000					
Enter the	e Return code for the return that this application is for (file	a separa	te application for each return)			0 4
		•				
Applicat	tion	Return	Application			Return
ls For		Code	Is For			Code
Form 99	0 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99	0-BL	02	Form 1041-A			08
Form 47	20 (ındıvıdual)	03	Form 4720 (other than individual)			09
Form 99	0-PF	04	Form 5227			10
Form 99	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	0-T (trust other than above)	06	Form 8870			12
	ROWLEY, BUSHUE					
	ooks are in the care of 409 W. KIEFFER	ROAD			360	
	hone No ▶ <u>219-874-1437</u>		Fax No $\triangleright 219 - 874 - 14$	38		
	organization does not have an office or place of business				•	-
If this	is for a Group Return, enter the organization's four digit	7			r the whole group,	
box 🕨	. If it is for part of the group, check this box				ers the extension i	s for
1 In	equest an automatic 3-month (6 months for a corporation					
		t organiza	tion return for the organization name	ed above	The extension	
	for the organization's return for:					
	X calendar year 2013 or					
•	tax year beginning	, an	d ending	•	→ •	
		L1		C	_	
2 If	the tax year entered in line 1 is for less than 12 months, o	neck reas	on Initial return	Fınal retur	n	
	Change in accounting period	6060				
	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any	0-		490.
_	onrefundable credits. See instructions	·		3a	\$	450.
	this application is for Forms 990-PF, 990-T, 4720, or 6069			26	.	_0.
	timated tax payments made. Include any prior year overp			3b	\$	
	alance due. Subtract line 3b from line 3a. Include your pa			3c	\$	490.
	using EFTPS (Electronic Federal Tax Payment System) If you are going to make an electronic funds withdrawal					
Instructi		laneor an	big with this i offit occo, see i offit t	, LO ai	/ OIII 00/ 0-LO I	paymont
	For Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form 8868 (F	Rev. 1-2014)
	, o					,

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	8 (Rev. 1-2014)					Page 2
	re filing for an Additional (Not Automatic) 3-Month Ex					\triangleright X
	y complete Part II if you have already been granted an			led Form	8868	
	re filing for an Automatic 3-Month Extension, comple					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies nee	ded).
	1		Enter filer's	identifyi	ng number, s	see instructions
Type or	Name of exempt organization or other filer, see instru			Employe	r identificatio	n number (EIN) or
print	BYRON A. ROOT MEMORIAL TRUS	T FUN	D,			
File by the	JOSEPH N. THOMAS, TRUSTEE				31-61	92613
due date for filing your return See	Number, street, and room or suite no If a P.O box, s 2146 KENNEDY STREET	see instruc	tions	Social se	curity number	er (SSN)
instructions	City, town or post office, state, and ZIP code. For a f PORTAGE, IN 46368	oreign add	ress, see instructions.			
Enter the	Return code for the return that this application is for (fil	e a senara	te application for each return)			0 4
		- a separa			·	<u> </u>
Applicati	on	Return	Application			Return
Is For		Code	Is For			Code
	or Form 990-EZ	01				
Form 990		02	Form 1041-A			08
	0 (ındıvıdual) 	03	Form 4720 (other than individual)			09
Form 990		04	Form 5227			10
	T (sec 401(a) or 408(a) trust)	05	Form 6069		·	11
	T (trust other than above)	06	Form 8870			12
STOP! DO	not complete Part II if you were not already granted			iously file	ed Form 886	3.
<u> </u>	ROWLEY, BUSHUE			T.T. 4.0	260	
	oks are in the care of \triangleright 409 W. KIEFFER	ROAD			360	
	one No. ► 219-874-1437		Fax No. $\triangleright 219 - 874 - 14$	38		. 🖂
	rganization does not have an office or place of busines					. ▶ ∟
г	s for a Group Return, enter the organization's four digit					
box ► L	if it is for part of the group, check this box		ch a list with the names and EINs of	all memb	ers the exter	ision is for.
	quest an additional 3-month extension of time until -1 calendar year 2013 , or other tax year beginning	MOA ETT.		_		
	e tax year entered in line 5 is for less than 12 months, o	book roop	n: Initial return	Final:		· · · · · · · · · · · · · · · · · · ·
• " "	Change in accounting period	HECK IEAS	onmmarretum _	Final	etum	
7 Sta	e in detail why you need the extension					
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AD				O GAT		
<u>AL</u>	FORMATION NECESSARY TO FILE					
AD IN RE	FORMATION NECESSARY TO FILE TURN.	A CO	MPLETE AND ACCURAT			
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AD IN RE 8a If th	FORMATION NECESSARY TO FILE TURN. is application is for Forms 990-BL, 990-PF, 990-T, 4720 refundable credits. See instructions.	A CO	MPLETE AND ACCURAT			X
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