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Department of the Treasury

Internal Revenue Service

DLN: 93491135023455

OMB No 1545-0052

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

Open to Public Inspection

		ndar year 2014, or tax ye	ar beginning 01-	01-2014	, a		12-31-2014			
		undation RIVATE FAMILY FOUNDATION				A Employer id	dentification numb	er		
						26-2619460				
		street (or P O box number if mail is not	delivered to street address	Room/suite		B Telephone n	umber (see instructio	ns)		
10	1025 E WATERFORD					(574) 862-1982				
		n, state or province, country, and ZIP or fo IN 46573	oreign postal code			C If exemption	n application is pendir	ng, check here 🕨 🦵		
G Check all that apply Initial return Initial return of a			£		 		_			
GCI	песк а	Final return	A mended return	former public charit	У	1	organizations, check h	• •		
			Name change				organizations meeting ck here and attach co			
H C I	neck ty	pe of organization 🔽 Section 5		ite foundation			oundation status was on 507(b)(1)(A), chec			
<u>Г</u> s	ection	4947(a)(1) nonexempt charitable					551 (5)(1)(1),	,		
			Accounting method	l Cash I Acc	rual		lation is in a 60-mont on 507(b)(1)(B), chec			
		from Part II, col. (c), \$ 9,922	Other (specify) (Part I, column (d) must	t be on cash basis.)		under section	лг 507(в)(1)(в), спес	ck neie - ,		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see (a) Revenue and expenses per leave total of amounts in column (a) (see (b) Net investment income (c) Adjusted net leave to the				(d) Disbursements for charitable purposes (cash basis only)						
	1	Contributions, gifts, grants, etc.,	received (attach					(,		
		schedule)	·	30,000						
	2	Check ► ☐ If the foundation is n	ot required to attach	,						
	_	Sch B		4						
	3	Interest on savings and tempora Dividends and interest from secu	· .	1						
	-	Gross rents	indes							
	5a b	Net rental income or (loss)								
Revenue	6a	Net gain or (loss) from sale of as								
	ь	Gross sales price for all assets on line 6a								
æ	7	Capital gain net income (from Pa	ırt IV, lıne 2)			C				
	8	Net short-term capital gain								
	9	Income modifications								
	10a	Gross sales less returns and	1							
		allowances								
	b	Less Cost of goods sold								
	C	Gross profit or (loss) (attach sch	ŕ							
	11	Other income (attach schedule) Total. Add lines 1 through 11		30,001		0				
	12 13	Compensation of officers, director		30,001						
	14	Other employee salaries and wag	· · · · · ·							
yn do	15	Pension plans, employee benefit	-							
йSŧ	16a	Legal fees (attach schedule).	ŀ							
Expense	1	Accounting fees (attach schedul		250						
	1	Other professional fees (attach s								
tīV€	17	Interest								
Admını strative	18	Taxes (attach schedule) (see ins	structions)							
Ē	19	Depreciation (attach schedule) a	′	818						
Ē	20	Occupancy								
Ā	21	Travel, conferences, and meeting	gs							
and	22	Printing and publications		340						
Ě	23	Other expenses (attach schedule	-	715						
atıı	24	Total operating and administrati	-							
Operating		Add lines 13 through 23	ŀ	2,123		0		0		
ō	25	Contributions, gifts, grants paid.		43,150				0		
	26	Total expenses and disbursement 25	ts. Add lines 24 and	45,273		0		0		
	27	Subtract line 26 from line 12								
	a	Excess of revenue over expenses		-15,272						
	Ь	Net investment income (if negati	· · · · · ·			0				
	l c	Adjusted net income (if negative	., enter -0 -)				I	i		

Pa	rt II	Balance Sheets should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book	Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	5,193		6,646	6,646
	2	Savings and temporary cash investments	20,001		2	2
	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 (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) 🕨				
		Less allowance for doubtful accounts 🟲				
2	8	Inventories for sale or use				
sets	9	Prepaid expenses and deferred charges				
3	10a	Investments—U S and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)				
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis 🟲				
		Less accumulated depreciation (attach schedule) 🕨				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis ▶4,092				
		Less accumulated depreciation (attach schedule) 🕨 818			3,274	3,274
	15	Other assets (describe 🟲)				
	16	Total assets (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	25,194		9,922	9,922
	17	Accounts payable and accrued expenses				
	18	Grants payable				
<u>\$</u>	19	Deferred revenue				
abiliti	20	Loans from officers, directors, trustees, and other disqualified persons				
] -	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe 🟲)				
	23	Total liabilities (add lines 17 through 22)			0	
		Foundations that follow SFAS 117, check here 🕨 🦵				
or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.				
an	24	Unrestricted				
Ba	25	Temporarily restricted				
된	26	Permanently restricted				
ΕĒ		Foundations that do not follow SFAS 117, check here 🕨 🔽				
ŏ		and complete lines 27 through 31.				
Ş	27	Capital stock, trust principal, or current funds				
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
ĹΑ	29	Retained earnings, accumulated income, endowment, or other funds	25,194		9,922	
Net	30	Total net assets or fund balances (see instructions)	25,194		9,922	
	31	Total liabilities and net assets/fund balances (see instructions)	25,194		9,922	
Pa	rt II	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 ag	ree		
		with end-of-year figure reported on prior year's return)			1	25,194
2		Enter amount from Part I, line 27a			2	-15,272
3		Other increases not included in line 2 (itemize)			3	
4		Add lines 1, 2, and 3			4	9,922
5		Decreases not included in line 2 (itemize)		_ [5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lii	ne 30 .	6	9,922

	0-PF(2014)								Page 3
Part I	V Capital Gains	and Lo	sses for Tax on Inve	stme	nt Income				
			(s) of property sold (e g , re common stock, 200 shs M			(b) How acquired P—Purchase D—Donation	(c) Da	ite acquired , day, yr)	(d) Date sold (mo , day, yr)
1a									
(e)	Gross sales price		(f) Depreciation allowe	d		or other basis			or (loss)
	•		(or allowable)		pius ex	pense of sale		(e) plus (r) mınus (g)
<u>а</u> Ь				_					
С				-			+		
d		+		+			+		
e						12/21/52			
	·	showing 	gain in column (h) and owne (j) Adjusted basis	ed by tr		on 12/31/69 ess of col (1)	_ ` `	,	(h) gain minus
(i)	FMV as of 12/31/69		as of 12/31/69		` ,	ol (j), if any	col (k), but not less than -0-) Losses (from col (h))		
а									
b									
С									
d									
е									
2	Capital gain net inco	me or (ne	et capital loss)			in Part I, line 7 in Part I, line 7	2		
3	Net short-term capit	al gaın o	r (loss) as defined in sectio	ns 122	22(5) and (6)				
			ne 8, column (c) (see ınstru	ictions		nter - 0 -	3		
Part \	Oualification I	Jnder 9	Section 4940(e) for R	Reduc	ed Tax on	Net Investme	nt Inc	come	
			oundations subject to the se						
(i oi opti	onar use by domestic p	Jiivace ie	randations subject to the st	ection -	+5+0(a) tax	on nee mvesemene	income	. ,	
Ifsectio	n 4940(d)(2) applies,	leave thi	s part blank						
			n 4942 tax on the distributa y under section 4940(e) Do				eriod?		┌ Yes ┌ No
1 Ent	er the appropriate amo	unt ın ea	ch column for each year, se	ee inst	ructions befo	re makıng any ent	ries		
_	(a)		(b)		(c)			(d)	
Base year (o	penod years Calendar r tax year beginning in)	Adju	sted qualifying distributions	Net v		itable-use assets	(0	Distributior col (b) divided	
<u> </u>	2013		9,120				`		, , , , ,
	2012								
	2011								
	2010								
	2009								
2	•	` '					2		
3			the 5-year base period—dividation has been in existence				3		
4	Enter the net value o	fnoncha	rıtable-use assets for 2014	4 from	Part X, line 5		4		9,77
5	Multiply line 4 by line	e 3					5		
6	Enter 1% of net inve	stment II	ncome (1% of Part I, line 2	7b)		[6		
7	Add lines 5 and 6.					[7		C
8	Enter qualifying distr	butions	from Part XII, line 4			[8		C
	If line 8 is equal to o the Part VI instruction		than line 7, check the box	ın Part	VI, line 1b, a	and complete that	part us	ıng a 1% tax	rate See

Form	990-PF (2014)		Р	age 4		
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the installation	ructio	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here 🟲 🦵 and enter "N/A"					
	on line 1					
	Date of ruling or determination letter(attach copy of letter if necessary–see instructions)					
ь						
	here F and enter 1% 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	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2					
3	3 Add lines 1 and 2					
	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others					
-	enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0		
6	Credits/Payments					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a					
Ь	Exempt foreign organizations—tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10					
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 0 Refunded 11					
Par	t VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No		
	it participate or intervene in any political campaign?	1a		No		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions					
	for definition)?	1b		No		
	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.	_				
	Did the foundation file Form 1120-POL for this year?	1c		No		
d	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 🕨 \$	_		NI.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No		
_	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	3		NI.		
4-	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No No		
4a		4b		NO		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	5		No		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	 		110		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
0	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		No No		
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	Yes			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
-	<u>▶</u>					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney					
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes			
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?					
	If "Yes," complete Part XIV	9	Yes			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names					
	and addresses.	10		No		

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►SHARON FORTE Telephone no ►(574)	862-	1982	
	Located at 165150 COUNTY ROAD 3 WAKARUSA IN ZIP+4 16573			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		-	-
13	and enter the amount of tax-exempt interest received or accrued during the year		,	- ,
	- · · · · · · · · · · · · · · · · · · ·			l
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	مدا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	TT VII-B Statements Regarding Activities for Which Form 4720 May Be Required		T 1	T
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	 	Yes	No
1a	During the year did the foundation (either directly or indirectly)	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Vo	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No	1		
	(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)?	1		
	for the benefit or use of a disqualified person)?	1		
	if the foundation agreed to make a grant to or to employ the official for a period	1		
	after termination of government service, if terminating within 90 days) Yes V No	1		
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1		
	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
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(1)(3) or 4942(1)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d	1		
	and 6e, Part XIII) for tax year(s) beginning before 2014?	1		
	If "Yes," list the years > 20, 20, 20, 20	1		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	l		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	1		
	to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20	1		
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at	l		
	any time during the year?	İ		
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation	l		
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved	l		
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)	l		
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	l		
	ıf the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its]	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

	rt VII-B Statements Rega	rdi	a Activities for	\A/b	ich Form 4720	May	Re Peguired (cont	inuad	/\	Page o
5a	During the year did the foundation		_		iicii Foriii 4720	іча у	be kequired (cont	iiiueu		
Ju	(1) Carry on propaganda, or othe		•		islation (section 49)	45(6))? 	No		
	(2) Influence the outcome of any							110		
	on, directly or indirectly, any	-			***		·	No		
	(3) Provide a grant to an individu		=			•	T Yes ▼			
	(4) Provide a grant to an organiz					scrib	·			
	in section $4945(d)(4)(A)$? (s							No		
	(5) Provide for any purpose othe					-	,,			
	educational purposes, or for						Yes ▽	No		
b	If any answer is "Yes" to 5a(1)-									
	Regulations section 53 4945 or								5b	
	Organizations relying on a currer									
c	If the answer is "Yes" to questio						,			
	tax because it maintained expen	-	**		•		Г Y es Г	- _{No}		
	If "Yes," attach the statement requ		•	-			, ,			
6a	Did the foundation, during the ye		· -			pren	niums on			
	a personal benefit contract?							No		
ь	Did the foundation, during the ye							.	6b	No
	If "Yes" to 6b, file Form 8870.	, .	, , , ,		,, .			ŀ		
7a	At any time during the tax year,	was t	he foundation a party	∕ to a	a prohibited tax shel	ter tr	ransaction? TYes V	No		
	If yes, did the foundation receive						· ·		7b	
	Information Abou			-			n Managers, Highly		Empl	ovees.
Pa	and Contractors		,	-,						
1	List all officers, directors, trustee	s, fo	undation managers a	nd t	heir compensation (see i	nstructions).			
	(-) Name and address	(b)	Title, and average	٠.	c) Compensation		(d) Contributions to	(e) E:	xpense	e account,
	(a) Name and address	l d	hours per week evoted to position	(If not paid, enter -0-)		mployee benefit plans deferred compensation	oth	er allo	wances
SCOT	T TUTTLE	_	SIDENT		0	 	. 0			0
102	5 E WATERFORD	2 0)							
WAK	(ARUSA,IN 46573									
SHAR	ON FORTE		ASURER		0		0			0
	50 COUNTY ROAD 3	1 0)							
	(ARUSA,IN 46573	<u>.</u>		<u>. </u>						
	Compensation of five highest-paid	d em	oloyees (other than t	thos	e included on line 1– 	-see	instructions). If none, er (d) Contributions to	nter "N	ONE."	
(a`	Name and address of each emplo	vee	(b) Title, and average	_			emplovee benefit	(e) E:	xpense	account,
	paid more than \$50,000	,	hours per week devoted to position		(c) Compensation	n	plans and deferred			wances
			devoted to positiv				compensation			
NON	NE									
			1							
			1							
			1							
Tota	I number of other employees paid	over	\$50,000 							0

and Contractors (continued) 3 Five highest-paid independent contractors for professional services	(coo instructions) If none onter "NONE"	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include riganizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 DONATED TO BENEVOLENCE AND WOMEN'S MINISTRIES	14,875	
2 DONATED MONEY TO BOYS AND GIRLS CLUB IN NAPPANEE IN	3,000	
3 DONATED MONEY TO VARIOUS FESTIVALS, ATHLETIC ORGAN MINISTRIES	NIZATIONSAND INTER-CITY CHILDREN	9,275
4 DONATED TO OTHER NON PROFIT ORGANIZATIONS		16,000
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation durin	g the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	
ь	A verage of monthly cash balances	1b	(
С	Fair market value of all other assets (see instructions)	1c	9,92
d	Total (add lines 1a, b, and c)	1d	9,92
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets] 2	
3	Subtract line 2 from line 1d	3	9,92
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	149
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	9,77
6	Minimum investment return. Enter 5% of line 5	6	48
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	atıng f	oundations and
	certain foreign organizations check here 🕨 🏴 and do not complete this part.)	т. т	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2014 from Part VI, line 5 2a	-	
Ь	Income tax for 2014 (This does not include the tax from Part VI) 2b	4	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	
Par	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	(
ь	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
ь	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	
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	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet the section 4940(e) reduction of tax in those years	her the	foundation qualifies for

<u> </u>	Undistributed Income (see instr	uctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7	2 2 1 1 1 1 1	, , , , , , , , , , , , , , , , , , ,		0
	Undistributed income, if any, as of the end of 2014				
	Enter amount for 2013 only				
	Total for prior years 20				
	Excess distributions carryover, if any, to 2014				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
	From 2013 9,120				
f	Total of lines 3a through e	9,120			
	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$				
а	Applied to 2013, 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				
	required—see instructions)				
	Applied to 2014 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the				
_	same amount must be shown in column (a).) Enter the net total of each column as				
U	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,120			
	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				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
T	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				0
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				
_	Subtract lines 7 and 8 from line 6a	9,120			
10	Analysis of line 9				
а	Excess from 2010				
b	Excess from 2011				
C	Excess from 2012				
d	Excess from 2013 9,120				
е	Excess from 2014				

P	art XIV Private Operating Foun	idations (see in:	structions and Pa	rt VII-A, questio	on 9)	
1a	If the foundation has received a ruling or de					
	foundation, and the ruling is effective for 20	•	_			
	Check box to indicate whether the organiza		erating foundation o		on I ′ 4942(j)(3) o	r 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	ı	Prior 3 years	,	(e) Total
	investment return from Part X for each	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
	year listed	0				0
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed		9,120			9,120
d	Amounts included in line 2c not used					_
	directly for active conduct of exempt					
_	activities					
е	for active conduct of exempt activities					
	Subtract line 2d from line 2c		9,120			9,120
3	Complete 3a, b, or c for the					
_	alternative test relied upon "Assets" alternative test—enter					
а	(1) Value of all assets					0
	(2) Value of assets qualifying					
	under section 4942(J)(3)(B)(I)					0
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					0
c	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii).					0
	(3) Largest amount of support					_
	from an exempt organization					0
В-	(4) Gross investment income	- (Compulate th	in mout ambuit d		b #E 000 :	0
-6	rt XV Supplementary Information assets at any time during			ine organizatio	on nad \$5,000 G	or more in
L	Information Regarding Foundation Manage	•	,			
а	List any managers of the foundation who ha				•	dation
	before the close of any tax year (but only if	they have contribu	ted more than \$5,0	00) (See section	507(a)(2))	
b	List any managers of the foundation who ov	vn 10% or more of t	he stock of a corpo	ration (or an equal	ly large portion of th	ne
	ownership of a partnership or other entity)	of which the founda	tion has a 10% or g	greater interest		
<u> </u>	Information Regarding Contribution, Grant	. Gift. Loan. Schola	rship, et c., Program	NS:		
•	Check here I if the foundation only make				and door not accor	\
	unsolicited requests for funds. If the founds	ation makes gifts, g	rants, etc (see ins	able organizations tructions) to indivi	duals or organization	ns under
	other conditions, complete items 2a, b, c, a		, ,	,	J	
а	The name, address, and telephone number	or e-mail address	of the person to who	om applications sh	ould be addressed	
	SCOTT TUTTLE					
	1025 E WATERFORD					
	WAKARUSA,IN 46573 (574)862-2228					
h	The form in which applications should be s	ubmitted and inform	nation and materials	s they should incli	ide	
,	WRITTEN FORM SHOULD CONTACT INF			•		
_	Any submission deadlines					_
C	NONE					
ام	Any restrictions or limitations on awards,	such as by geograp	hical areas charita	hle fields kinds of	institutions or othe	
u	factors	sacinas by geograp	mear areas, chailta	bic licius, kilius Ul	madicaciona, or othe	-1
	NONE					

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total		<u> </u>		43,150

Form 990-P	,					Page 12
	A Analysis of Income-Produci amounts unless otherwise indicated		s usiness income	Excluded by section	n 512, 513, or 514	(e)
1 Program	service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
b						
d e						
g Fees a 2 Members 3 Interest	nd contracts from government agencies ship dues and assessments on savings and temporary cash					
4 Dividend	ents	522100	1	l		
a Debt-fi	al income or (loss) from real estate nanced property bt-financed property					
property	al income or (loss) from personal					
8 Gain or (vestment income (loss) from sales of assets other than					
10 Gross pr	me or (loss) from special events ofit or (loss) from sales of inventory.					
b	venue a					
d						
13 Total. A 6	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify ca			:	13	1
	Relationship of Activities to Explain below how each activity for which the accomplishment of the foundation's instructions)	the Accomp	ported ın column (e) of Part XVI-A c	ontributed import	
+						

Form 990-PF	(2014)								Рa	ge 1 3
Part XVII	Information Roncharitable				saction	s and Relati	onships With			
	ganızatıon dırectly or ı 01(c) of the Code (othe								Yes	No
organızatı	ons?									
	from the reporting four									
								1a(1)		No
(2) Othe	rassets							1a(2)		No
b Other tra										
(1) Sales	of assets to a noncha	ırıtable exemp	ot organizatio	n				1b(1)		No
(2) Purc	hases of assets from a	noncharitable	e exempt orga	anızatıon				1b(2)		No
(3) Renta	al of facilities, equipme	ent, or other a	ssets					1b(3)		No
(4) Reim	bursement arrangemer	nts						1b(4)		No
(5) Loan	s or loan guarantees.							1b(5)		No
(6) Perfor	mance of services or r	membership o	r fundraısıng	solicitations.				1b(6)		No
c Sharing o	f facılıtıes, equipment,	maılıng lısts,	other assets	, or paid employ	ees			1 c		No
of the goo	wer to any of the above ds, other assets, or se nsaction or sharing arr	ervices given rangement, sh	by the reporti low in column	ng foundation I (d) the value o	f the fou f the god	ndation received ds, other assets	d less than fair mark s, or services receive	et value ed	1	
(a) Line No	(b) Amount involved	(c) Name of r	oncharitable exe	empt organization	(a)	Description of transf	ers, transactions, and sha	aring arra	ngemer	nts
+										
-										
described	ndation directly or indi I in section 501(c) of tl complete the following	he Code (othe	•	•				. ⊢ _{Y€}	es F	√ _{No}
	(a) Name of organizatio	n	(L) Type of organiza	ition		(c) Description of relati	onship		
=										
Sign the info	er penalties of perjury, best of my knowledge a rmation of which prepai *****	and belief, it is	s true, correc				(other than taxpaye May the return		sed on	all
	Signature of officer or t	trustee		Date	•	Title	below	tr)? 🔽 1		
	Print/Type preparer's		Preparer's S	Signature		Date	Check if self- employed ▶	PTIN		
Paid Preparer	Firm's name ► JL ACCOUNTING &	TAX SERVIC	E INC		L		Firm's EIN ►	ı		
Use Only	Firm's address ► 1415 LINCOLN WAY 46561	Y WEST STE	J OSCEOLA	, IN			Phone no (574 7730	1)675-		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient		
a Paid during the year				
BOYS & GIRLS CLUB OF NAPPANEE 107 E MARION ST NAPPANEE,IN 46550		NFP	DEVELOPMENTCHARACTER	3,000
NORTHWOOD ATHLETICS 23959 CR 106 ELKHART,IN 46514		NFP	ATHLETICS	6,000
KELSEY MIKEL FOUNDATION 29284 COUNTY ROAD 36 WAKARUSA,IN 46573		PF	NORTHWOOD STUDENT	1,375
THE SPA 23221 US 20 E ELKHART,IN 46516		501C3	WOMANS MINISTRIES	500
FRESH PAINT OUTREACH 202 W WATERFORD ST WAKARUSA,IN 46573		NFP	CHILDRENSINTERCITYMINISTRIES	900
WAKARUSA LIONS CLUB 320 S ELKHART ST WAKARUSA,IN 46573		NFP	HELP PEOPLE WITHSEEING PROBLEMS	10,000
FAMILY CHRISTIAN DEVELOP 151 S LOCKE ST NAPPANEE,IN 46550		NFP	COMMUNITY ASSTPROGRAMS	2,500
WOMEN'S CARE CENTER 607 LINCOLN WAY WEST MISHAWAKA,IN 46544		NFP	SUPPORT ANDCOUNSELINGEDUCATION TO WOMEN	10,000
NAPPANEE MISSIONARY CHURCH 70417 STATE ROAD 19 NAPPANEE,IN 46550		NFP	MISSION TRIPSBENEVOLENCE	4,000
VARIOUS FESTIVALS VARIOUS STREETS NAPPANEE,IN 46550		NFP	ASSIST CHILDRENYOUNG PEOPLE	4,875
Total				43,150

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OMB No 1545-0047

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2014

Employer identification number

TUTTLE PRIVATE FAMILY	. ,						
Organization tune (shock of		26-2619460					
Organization type (check of	one)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	1					
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	☐ 501(c)(3) taxable private foundation						
, ,	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule and	pecial Rule See instructions					
General Rule							
	iling Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a c						
Special Rules							
under sections 509(a received from any or	described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 / 3\%$ supply (1) and $170(b)(1)(A)(v)$, that checked Schedule A (Form 990 or 990-EZ), Parthe contributor, during the year, total contributions of the greater of (1) \$5,000 or) Form 990-EZ, line 1 Complete Parts I and II	II, line 13, 16a, or 16b, and that					
during the year, total	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific cruelty to children or animals. Complete Parts I, II, and III						
during the year, cont this box is checked,	ed from any one contributor, butions totaled more than \$1,000 If usively religious, charitable, etc, ause it received nonexclusively						

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

Name of organization
TUTTLE PRIVATE FAMILY FOUNDATION

Employer identification number 26-2619460

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SCOTT TUTTLE 1025 E WATERFORD WAKARUSA, IN46573	\$30,00	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization **Employer identification number** TUTTLE PRIVATE FAMILY FOUNDATION 26-2619460 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is

Part II	needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$_	

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2014)			Page 4
	organization PRIVATE FAMILY FOUNDATION			Employer identification number
IUIILE	PRIVATE FAMILY FOUNDATION			26-2619460
Part III		rom any one ter the total of structions)	contributor. Complet	cribed in section 501(c)(7), (8), or (10) te columns (a) through (e) and the following line charitable, etc., contributions of \$1,000 or less for \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and		Transfer of gift Relation	onship of transferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and		Transfer of gift Relation	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and		Transfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			Transfer of gift	
	Transferee's name, address, and	∠IP 4 	Relation	onship of transferor to transferee

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DLN: 93491135023455

OMB No 1545-0172

Department of the Treasury

Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

		Information at	oout Form 4562 and its	sepa	rate instruction	ıs is at <u>www.<i>i1</i></u>	s.gov/form45	<u>62.</u>	Sequence No 179
	e(s) shown on return TLE PRIVATE FAM				r activity to which PF page 1	this form relates			lentifying number
								2	6-2619460
Pa			Certain Property				nlata Dart I		
1			isted property, con	<i>ipiet</i>	<u>.e Part V bero</u>	re you com	<u>ριείε Part 1.</u> 	1	
		`							
2			laced in service (see					2	
3			rty before reduction i		•	tructions)		3	
4	Reduction in limita	ition Subtract line	3 from line 2 If zero	orle	ss, enter -0-			4	
5	Dollar limitation fo	rtax year Subtra	ct line 4 from line 1 I	fzerd	or less, enter	-0- If marrie	d filing		
	separately, see ins	structions • •						5	
6	(a) Description of p	roperty		(b) Cost (bu		(c) Elected	cost	
					on	у)			_
					+				\dashv
	Linkad was walkii. F		l.n. 20			 			₽
7	Listed property E					. 7		T _	<u> </u>
8			operty Add amounts					8	
9	Tentative deduction	on Enterthe small	er of line 5 or line 8					9	
10	Carryover of disall	owed deduction fro	om line 13 of your 20	13 F	orm 4562 •			10	
11	Business income l	ımıtatıon Enter th	e smaller of business	ınco	me (not less th	nan zero) or lır	ne 5 (see		
	ınstructions)							11	
12	Section 179 exper	nse deduction Add	d lines 9 and 10, but o	do no	t enter more th	an line 11		12	
			015 Add lines 9 and			.▶ 13			
			below for listed pro			<u> </u>			
							ınclude listed	prope	rty) (See instructions)
14			ualified property (othe					1	(See matractions)
	the tax year (see i					cy / placea iii .		14	
4 =	, ,	,		-					
	Property subject to			• •				15	
			<u> </u>					16	
Par	t IIII MACRS [Depreciation (Do not include liste			e instruction	าร.)		
	MAGRGILLI				ction A	2011			
1/		•	d in service in tax yea					17	
18			ts placed in service o				_		
	asset accounts, cl	neck here				<u></u>	. ▶1		
	Section B—As	sets Placed in	Service During	<u> 201</u>	<u>4 Tax Year</u>	Using the	General De	preci	iation System
		(b) Month and	(c) Basis for						
(a) Classification of	(b) Month and year placed in	depreciation (business/investme	nt	(d) Recovery	(e) Convent	ion (f) Metl	nnd	(g)Depreciation
	property	service	use		period		(1)		deduction
			only—see instructio	ns)					
L9a	3-year property								
b	5-year property		4,0	92	5	HY	200 D	В	818
c :	7-year property								
d	10-year property								
е	15-year property								
f	20-year property								
g	25-year property				25 yrs		S/L		
h	Residential rental				27 5 yrs	MM	S/L		
	property				27 5 yrs	ММ	S/L		
iΝ	lonresidential real				39 yrs	MM	S/L		
	property					MM	S/L		
	Sed	tion C—Assets Pla	ced in Service During	2014	Tax Year Using	the Alternat	ive Depreciati	on Sys	stem
20a	Class life						S/L		
b	12-year				12 yrs		S/L		
	40-year				40 yrs	MM	S/L		
Pai	t IV Summ	ary (see instruc	ctions.)						
21 l	isted property Ente	er amount from line	e 28 · · · · ·					21	
22 1	Total. Add amounts	from line 12, lines	14 through 17, lines	19 a	nd 20 ın colum	nn (g), and line	21 Enter		
			your return Partnersh					22	81
23 F	•		, service during the cu		•				
	ortion of the basis a				,,	. 23			

Form 4562 (2014) Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? (c) (e) (i) (b) Business/ (d) (f) (g) (h) Basis for depreciation Elected Type of property (list Date placed in investment Cost or other Recover Method/ Depreciation/ (business/investment section 179 vehicles first) deduction basis period Convention service use use only) cost percentage 25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -S/L -S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	Vehi	a) cle 1	-	cle 2	Vehi	cle 3	Vehi	cle 4	Vehi	-	Vehi	-
31 Total commuting miles driven during the year .												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32		_										
34 Was the vehicle available for personal use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use? .												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by	your Ye :	s h	No
employees?			
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .			
39 Do you treat all use of vehicles by employees as personal use?	🗀		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the us vehicles, and retain the information received?			
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)	🗀		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.			

Part VI Amortization	n					
(a) Description of costs	(b) Date amortization begins	(c) A mortizable amount	(d) Code section	A mort	e) ization od or ntage	(f) A mortization for this year
42 A mortization of costs that b	egins during your 2	2014 tax year (see ınstruct	ions)			
43 A mortization of costs that b	egan before your 2	014 tax year			43	
44 Total. Add amounts in colum	nn (f) See the instr	uctions for where to report			44	

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TY 2014 Depreciation Schedule

Name: TUTTLE PRIVATE FAMILY FOUNDATION

EIN: 26-2619460

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAPTOP COMPUTER	2014-02-20	4,092		200DB	5 00	818			

TY 2014 Other Expenses Schedule

Name: TUTTLE PRIVATE FAMILY FOUNDATION

EIN: 26-2619460

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	120			
DUES AND SUBSCRIPTIONS	595			