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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

2014

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For ca	alendar year 2014, or tax year beginning		, and ending	<u> </u>	
	RA RICHARDSON FOUNDATION, INC			A Employer Identification no 35-1076722	
	. BOX 888 STERTON, IN 46304			B Telephone number (see ins 219-707-0627	structions)
				C If exemption application is	s pending, check here 🕨
G Ch	neck all that apply· Initial return Final return	Initial return of a form Amended return	mer public charity	D 1 Foreign organizations, che	ck here ►
	Address change	Name change		2 Foreign organizations mee here and attach computati	ting the 85% test, check
H Cr	neck type of organization X Section 501 Section 4947(a)(1) nonexempt charitable t	1(c)(3) exempt private t	foundation private foundation	i '	
I Fai		counting method: X C		E If private foundation statu under section 507(b)(1)(A	
(fr	om Part II, column (c), line 16)	Other (specify)		F If the foundation is in a 60)-month termination \Box
<u>► ;</u>	(, a, r,	, column (d) must be or	n cash basis.)	under section 507(b)(1)(B), check here . ►
Part	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 instructions))	(a) Revenue and expenses per books	(b) Net investmer income	nt (c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (attach schedule)	71,400.			
	2 Ck ► If the foundn is not required to attach Sch B				
	3 Interest on savings and temporary cash investments 4 Dividends and interest from securities				
	5 a Gross rents				
	b Net rental income or (loss)				
R	6 a Net gain or (loss) from sale of assets not on line 10, b Gross sales price for all				
REVENU	assets on line 6a 7 Capital gain net income (from Part IV, line 2)				
E N	8 Net short-term capital gain				
Ŭ	9 Income modifications				
	10 a Gross sales less returns and allowances		T DEC	FIVED	
	b Less. Cost of goods sold			S	<u> </u>
	C Gross profit or (loss) (attach schedule)		\$ MV.		
	11 Other income (attach schedule)		MA B	LT.	
	12 Total. Add lines 1 through 11	71 400	1	O)=N: UT	
	13 Compensation of officers, directors, trustees, etc	71,400.		0)=N; U1 10.	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
A D	16a Legal fees (attach schedule) . SEE ST 1 b Accounting fees (attach sch) SEE ST 2	6,560.			6,560.
M 1	c Other prof fees (attach sch)	547.			547.
O I	17 Interest				
P S E T R R	18 Taxes (attach schedule/see instrs)				
O P E R A T	19 Depreciation (attach sch) and depletion SEE STMT 3	68.			
N V	20 Occupancy				
_	21 Travel, conferences, and meetings				
A E N X D P	22 Printing and publications				
E	SEE STATEMENT 4	3,889.			3,889.
Ŝ	24 Total operating and administrative	11 064			
\$	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV.	11,064. 62,602.			10,996. 62,602.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	73,666.		0.	73,598.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses	***			
•	and disbursements	-2,266.			<u></u>
	b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter 0-)			0.	
	The Majorated net mecome (it hegalize) enter 0.7			0.1	



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Dar	+ 11	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End o	of year
Гаг	. 11	Balance Sheets column 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	15,660.	26,197.	26,197.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less. allowance for doubtful accounts			į
	4	Pledges receivable			
	ł	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 sch).			
A		Less: allowance for doubtful accounts ▶		**** *	
S	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
S	10 a	a Investments – U.S. and state government obligations (attach schedule)			
	1	nvestments — corporate stock (attach schedule)			
	1	: Investments — corporate bonds (attach schedule)			
	[Investments – land, buildings, and equipment: basis			
		Less. accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
		Investments — other (attach schedule)			
	14	Land, buildings, and equipment: basis ► 100,077.			
		Less accumulated depreciation (attach schedule) SEE, STMT 5 > 2,742.	85,138.	97,335.	858,400.
	15	Other assets (describe ►			
	16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	100,798.	123,532.	884,597.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
A B I	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
1	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe SEE STATEMENT 6)	_	25,000.	
į E S	22	Total liabilities (add lines 17 through 22)	0.	25 000	
	23	Total liabilities (add lines 17 through 22)	U.	25,000.	
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U	24	Unrestricted	15,660.	1,197.	
ΤN	25	Temporarily restricted			
D	26	Permanently restricted	85,138.	97,335.	
A B A L A		Foundations that do not follow SFAS 117, check here . F and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see instructions)	100,798.	98,532.	
	31	Total liabilities and net assets/fund balances (see instructions)	100,798.	123,532.	
Part	111 /	Analysis of Changes in Net Assets or Fund Balance	S		
1	Total end-c	net assets or fund balances at beginning of year - Part II, colur of year figure reported on prior year's return).	mn (a), line 30 (must agre	ee with 1	100,798.
		amount from Part I, line 27a	• •	2	-2,266.
		increases not included in line 2 (itemize)		3	
		ines 1, 2, and 3		4	98,532.
5	Decrea	ises not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), line	e 30 6	98,532.

· (a) List and descri	d Losses for Tax on Investmer be the kind(s) of property sold (e.g , i use; or common stock, 200 shares Mi	real estate.	(b) How acquire P — Purchase D — Donation	(month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b			_		
<u> </u>					
d					
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other ba	<u></u>	(h) Gain or	(loss)
(e) Gloss sales price	(or allowable)	plus expense of sa		(e) plus (f) n	ninus (g)
a					
b		<u> </u>			·
С					
d					
е					
	owing gain in column (h) and owned b			(I) Gains (Col	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of colum over column (j), if		gain minus column (than -0-) or Losses (f	
					
b					
C			-		
					-
е					· · · · · · · · · · · · · · · · · · ·
		enter in Part I, line 7			
2 Capital gain net income or (i	net capital loss)If (loss), ent	enter in Part I, line 7 errer in Part I, line 7	2		
3 Net short-term capital gain o	or (loss) as defined in sections 1222(5)) and (6):			
	ine 8, column (c) (see instructions). If	(loss), enter -0-	-		
			3	1	
	er Section 4940(e) for Reduce			e	
(For optional use by domestic private	e foundations subject to the section 4940	(a) tax on het investment in	come)		
If section 4940(d)(2) applies, leave	e this part blank N/A				
Was the foundation liable for the s	section 4942 tax on the distributable a	mount of any year in the l	pase period?	☐Yes	□No
	ualify under section 4940(e). Do not c		·		ليبا
1 Enter the appropriate amount i	n each column for each year, see the ins	structions before making any	entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets (co	(d) Distribution Diumn (b) divided	
2013					
2012					
2011					
2010		 			
2009					
2 Total of line 1, column (d)			. 2		
	the 5-year base period - divide the t	otal on line 2 by 5, or by 1	·		
3 Average distribution ratio for number of years the foundat	ion has been in existence if less than	5 years	3		
•					
4 Enter the net value of nonch	arıtable-use assets for 2014 from Part	X, line 5	4		
			_		
5 Multiply line 4 by line 3.	••	• •	5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b) .		. 6		
7 Add lines 5 and 6.			7		
8 Enter qualifying distributions			8		
If line 8 is equal to or greater t	han line 7, check the box in Part VI, line	1b, and complete that part	using a 1% tax	rate. See the	

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	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 personadvisory privileges? If 'Yes,' attach statement (see instructions)	on had	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	application?	13	X	^
	Website address ► FLORARICHARDSON.COM	11	<u></u>		I
14	The books are in care of ► JEANNETTE BAPST Telephone Located at ► 10 CREST DRIVE - DUNE ACRES CHESTERTON IN ZIP + 4 ►	no • 219-7 46304	07-0	627	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	30303	N/A		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15			N/A
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority of bank, securities, or other financial account in a foreign country?	ver a	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 enter the name of the foreign country	1). If 'Yes,'	10		^
Dat	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>		<u> </u>
Fai	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Γ.	Yes	No
1 a	a During the year did the foundation (either directly or indirectly).			103	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	}		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes X No			
ŀ	a If any answer is 'Yes' to 1a(1)-(6), did <mark>any</mark> 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	N/	/ A
	Organizations relying on a current notice regarding disaster assistance check here				
c	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 2014?		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)):				
a	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	Yes X No			
	If 'Yes,' list the years ► 20, 20, 20, 20	les VIVO		Ì	
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see instructions.)	a)(2))(2) to	2 b	N	/ ħ
c	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	ere.		- 147	71
	► 20 _ , 20 _ , 20 _ , 20				
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
L	of Yes, did it have excess business holdings in 2014 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]		
	by the Commissioner under section 4943(c)(/)) 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		.	1	
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)		3 b	N	'A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		Х
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			- 1	
	the tax year beginning in 2014?	•	4ь		<u>X</u>
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Part VII-B Statements Regarding Activit	ies for Which Form	1 4720 May Be Req	uired (continued)			
5 a During the year did the foundation pay or incu		- (1 4045(-))2	□v Ū	1		
(1) Carry on propaganda, or otherwise attempt			Yes X	No		
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?			No		
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No		
(4) Provide a grant to an organization other to in section 4945(d)(4)(A)? (see instructions)	han a charitable, etc, or s)	rganization described	Yes X	No		
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific on of cruelty to children	c, literary, or or animals?	Yes X	No		
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	itions e	5 1	N	/A
Organizations relying on a current notice rega	irding disaster assistanc	ce check here	▶ [_			
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Regi			N/A Yes] No		
6 a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	rectly, to pay premium:	s ∏Yes X	No		
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract? .	. 6t		X
If 'Yes' to 6b, file Form 8870. 7 a At any time during the tax year, was the found	dation a party to a prob	ibited toy chalter transc	otion? Tvos V	l No		
b If 'Yes,' did the foundation receive any procee					,	-
Part VIII Information About Officers, D					:S,	
and Contractors						
1 List all officers, directors, trustees, foundation				170 5		4
(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) Expen	se acco	
SEE STATEMENT 7						
		0.	0.			0.
				<u> </u>		
2 Compensation of five highest-paid employees (ot		(c) Compensation	ns). If none, enter NONE (d)Contributions to	(e) Expen		ount.
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(C) Compensation	employee benefit plans and deferred compensation	other a	allowan	ces
NONE						
Total number of other employees paid over \$50,000						0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<u> </u>
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 AID IN THE PRESERVATION OF INDIGENOUS FLORA AND FAUNA; PROMOTE STUDY	
OF NATURAL HISTORY, ETC.	
	73,666.
2	
3	
	<u> </u>
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
' N/A	1
	1
2	
All other program-related investments. See instructions	
3	
	······································
Total. Add lines 1 through 3	0.

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see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out	charitable etc purposes		
a Average monthly fair market value of securities	· · · · · · ·	1 a	
b Average of monthly cash balances		1 b	
c Fair market value of all other assets (see instructions)		1 c	
d Total (add lines 1a, b, and c)		1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c			
(attach detailed explanation)	1e		
2 Acquisition indebtedness applicable to line 1 assets		2	
3 Subtract line 2 from line 1d		3	
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)		4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter her	e and on Part V, line 4.	5	0.
6 Minimum investment return. Enter 5% of line 5		6	0.
Part XI Distributable Amount (see Instructions) (Section 4942(j)) and certain foreign organizations check here ► X and do		ing foun	dations
1 Minimum investment return from Part X, line 6 N/A		1	
2a Tax on investment income for 2014 from Part VI, line 5	. 2a		
b Income tax for 2014 (This does not include the tax from Part VI.)	2b		
c Add lines 2a and 2b		2 c	
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	<u> </u>	5	
6 Deduction from distributable amount (see instructions)	L.	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and	d on Part XIII, line 1	7	
Part XII Qualifying Distributions (see instructions)			
1 Amounts paid (including administrative expenses) to accomplish charitable, e a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26.	etc, purposes:	1 a	73,598.
b Program-related investments — total from Part IX-B		1 b	
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 a Suitability test (prior IRS approval required)		3 a	
b Cash distribution test (attach the required schedule)		3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V,	<u> </u>	4	73,598.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net in Enter 1% of Part I, line 27b (see instructions)		5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4		6	73,598.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent year qualifies for the section 4940(e) reduction of tax in those years	s when calculating whether the found	dation	
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Part XIII Undistributed income (see instru	actions)	N/A		
,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				
2 Undistributed income, if any, as of the end of 2014:			-	
a Enter amount for 2013 only				
b Total for prior years: 20, 20, 20 3 Excess distributions carryover, if any, to 2014:				<u></u>
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013 .				
f Total of lines 3a through e				
4 Qualifying distributions for 2014 from Part				
XII, line 4: ► \$				
a 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)				
d Applied to 2014 distributable amount .	·			
e 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).)				
carrie arrivativi maet de erie ini ini delarini (eri)				
6 Enter the net total of each column as				
indicated below:	** ** **			
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				
e Undistributed income for 2013 Subtract line 4a from				
line 2a. Taxable amount — see instructions				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015			į	
7 Amounts treated as distributions out of	<u></u>			
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				
10 Analysis of line 9:	· · · · · · · · · · · · · · · · · · ·			
a Excess from 2010			ļ	
b Excess from 2011				
c Excess from 2012 . d Excess from 2013				., ,
e Excess from 2014				
e Excess from 2014		<u> </u>		Form 990-PF (2014)

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Part XIV Private Operating Foundati			VII-A, question		
1 a If the foundation has received a ruling or determined is effective for 2014, enter the date of the interest of the second of	mination letter that it				2/12/06
b Check box to indicate whether the foundation	-			►[4942(j)(3) or [_2/13/86 X 4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1 +3420/(3) 01 1	11 4342()(3)
income from Part I or the minimum investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
each year listed	·`		(0) ====	(2) 2011	N/A
b 85% of line 2a					N/A
c Qualifying distributions from Part XII, line 4 for each year listed	73,598.	64,334.	115,289.	51,784.	305,005.
d Amounts included in line 2c not used directly for active conduct of exempt activities .					0.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	73,598.	64,334.	115,289.	51,784.	305,005.
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:		ľ]	
(1) Value of all assets					N/A
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					N/A
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					N/A
(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					N/A
(4) Gross investment income					N/A
Part XV Supplementary Information (assets at any time during the	Complete this pay	art only if the fo	oundation had \$	5,000 or more i	n
Information Regarding Foundation Manage List any managers of the foundation who have close of any tax year (but only if they have NONE	rs: contributed more than contributed more tha	2% of the total cont in \$5,000) (See se	ction 507(d)(2).)		
b List any managers of the foundation who own 1 a partnership or other entity) of which the fo NONE	0% or more of the sto undation has a 10%	ck of a corporation (or greater interest	or an equally large p	ortion of the ownersh	ip of
2 Information Regarding Contribution, Grant, Check here ► X if the foundation only makes requests for funds. If the foundation makes complete items 2a, b, c, and d.	es contributions to pre gifts, grants, etc (se	selected charitable of instructions) to in	organizations and documents or organizations.	zations under other	ted conditions,
a The name, address, and telephone number or e	-mail address of the p	erson to whom appl	ications should be ad	ddressed.	
b The form in which applications should be su	omitted and informa	tion 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:

Form 990-PF (2014) FLORA RICHARDSON FOUNDATION, INC. 35-1076722 Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or Recipient Purpose of grant or status of Amount contribution recipient Name and address (home or business) substantial contributor a Paid during the year WESTCHESTER TWP HISTORICAL NONE N/A EDUCATIONAL 1,000. MUSEUM 700 W. PORTER AVE. CHESTERTON, IN 46304 IN DUNES ENVIRONMENTAL LEARNING NONE N/A ELEMENTARY EDUCATION 38,799. CENTER PROGRAMS 700 HOWE ROAD CHESTERTON, IN 46304 INDIANA UNIVERSITY NONE EDUCATIONAL 21,803. P.O. BOX 66057 INDIANAPOLIS, IN 46266 NONE VALPARAISO UNIVERSITY EDUCATIONAL 1,000. 1700 CHAPEL DRIVE VALPARAISO, IN 46383 Total 3 a 62,602. **b** Approved for future payment

3 b

Total

Form 990-PF (2014)

Part XVI-A Analysis of Income-Producing Activities

BAA

Inter gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(a)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
a			code		
b	 				<u> </u>
С					
d					
e					
f			ļ <u>.</u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments	ļ				
Interest on savings and temporary cash investments .					
Dividends and interest from securitiesNet rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			 		
6 Net rental income or (loss) from personal property	-				
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			 		
1) Other revenue					
a					
b					
С					
d			ļ		·
e 12 Subtotal Add columns (b), (d), and (e)					
12 Subtotal Add columns (b), (d), and (e)			<u> </u>		
13 Total Add line 12 columns (b) (d) and (e)				13	Ω
	ons)			13 _	0.
See worksheet in line 13 instructions to verify calculation		chmont of Evenn	t Purpo	-	0.
Part XVI-B Relationship of Activities to the	Accompli			ses	
Part XVI-B Relationship of Activities to the	Accompli			ses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli			ses	
Part XVI-B Relationship of Activities to the	Accompli			ses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli			ses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli			ses	
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Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli			ses	
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Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli			ses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli			ses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli			ses	

TEEA0502L 06/17/14

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

										Vaa	NI-
1 Did the	organization directl	y or indirectly	engage in any	of the following	with any	other organizat	tion			Yes	No
describ	ed in section 501(c) to political organization	of the Code (other than sec	tion 501(c)(3) or	ganızatıo	ns) or in sectior	า 527,				
-	•										
	ers from the reportin	g toundation t	o a noncharita	ble exempt orga	nization o	of:					
(1) Cas				• • • • • • • • • • • • • • • • • • • •					1 a (1)		X
(2) Oth	ner assets								1 a (2)		X
b Other tr	ransactions:										
(1) Sal	es of assets to a no	ncharitable ex	empt organiza	tion					1 b (1)		Х
	chases of assets fro								1 b (2)		X
	ntal of facilities, equ			-		•••					
• •	mbursement arrang	•	01 433013 ,		•	• •	• •		1 b (3)		X
• •	_		•	• • • • • • • • • • • • • • • • • • • •		• • • •	•	•	1 b (4)		X
• •	ins or loan guarante								1 b (5)		X
(6) Per	formance of service	s or members	hip or fundrais	ing solicitations					1 b (6)		X
c Sharing	of facilities, equipn	nent, mailing l	ists, other asse	ets, or paid empl	oyees				1 c		X
								•			
d If the ar	nswer to any of the ds, other assets, or se	above is 'Yes,	complete the	following schedi	ıle Colur	nn (b) should a	lways show	the fair m	narket valu	ue of	
any tran	nsaction or sharing a	arrangement	the reporting to	oundation, if the fo	oundation f the good	received less that	an tair marke	et value in	4		
(a) Line no.	(b) Amount involved			exempt organization							
	(b) Amount involved	(C) Name	Of Honorial Habie e	xempt organization	- (d) Description of tra	ansiers, transa	cuons, and s	maring arran	gements	
N/A											
<u> </u>					1				- -		
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				·							
					_						
		<u> </u>									
2 a Is the fou	undation directly or in	directly affiliate	d with, or relate	d to, one or more	tax-exem	pt organizations					
describe	ed in section 501(c)	of the Code (o	ther than secti	on 501(c)(3)) or	ın sectioi	n 527?			Yes	XV	10
b If 'Yes,'	complete the follow	ing schedule								ш	
(a)	Name of organizat	on	(b) Tv	pe of organization	n	1 (c) Description	on of relat	ionshin		
N/A	<u> </u>		(+	,				—
Ν/ Λ						- 					
· · · · · · · · · · · · · · · · · · ·						-					
			ļ								
Under p	enalties of perjury, I declar	e that I have exam	ned this return, inc	luding accompanying	schedules a	nd statements, and to	o the best of my	y knowledge a	and belief, it	s true,	
Sign correct,	and complete Declaration	of preparer (other	than taxpayer) is be	ased on all information	n of which pr	reparer has any know	vledge				
	1. 1	16 115	#/		.	TREASUR	ER		May the iR this return		s
Here	Marwell.			ľ		PRESIDENT	-,		preparer st	nown bei	ow
Signat	ture of officer or trustee		7	Date		itle			(see instru	es :] _{No} [
	Print/Type preparer's nar	ne	Preparer	's signature /		Date	Charl	I A F	TIN		
			/g/	1/htt.	14	1 6.10 1	Check	□"			
Paid	KRIS HARTRUN	IFT		XIVWI	i(f)	10-12-1	self emp	loyed]	2003474	151	
Preparer	Firm's name	ITTREDGE	& ZEHNER,	P.C.			Firm's EIN ►	46-16	12770		
Jse Only	Firm's address 🟲 🛮 2	09 S. CAI	LUMET ROAD	, SUITE 1					 _		_
	l c	HESTERTON		4-2475	·		Phone no	(219)	926-8	836	
	<u>`</u>		, 11. 1000						Form 990 -		1141
41.7C									01111 330	٠٠ (٢	~ ~ ~ /

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Schedule of Contributors

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

OMB No 1545-0047

2014

Name of the organization		Employer identification number					
FLORA RICHARDSON FOUNDATION, INC. 35-1076722							
Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization	·					
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation					
	501(c)(3) taxable private foundation						
Check if your organization is covered by the Ge	neral Rule or a Special Rule						
Note. Only a section 501(c)(7), (8), or (10) orga	inization can check boxes for both the General Rule and a S	necial Rule. See instructions.					
* * * * * * * * * * * * * * * * * * * *	inization sail shoot boxes for both this deficial ridge and a c	poolar rate. God motractions.					
General Rule	or 990 PE that received, during the year, contributions total	oling \$5,000 or more (in maney or					
property) from any one contributor. Comple	, or 990-PF that received, during the year, contributions tota te Parts I and II. See instructions for determining a contribut	or's total contributions					
Special Rules							
For an organization described in section 50	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp	ort test of the regulations					
\longrightarrow under sections 509(a)(1) and 170(b)(1)(A)(vi)	that checked Schedule A (Form 990 or 990-FZ). Part II. line 13-1	I6a or 16b and that					
Form 990, Part VIII, line 1h, or (ii) Form 990	ie year, total contributions of the greater of (1) \$5,000 or (2) D-EZ, line 1. Complete Parts I and II	276 of the amount off (i)					
For an organization described in section 50 during the year, total contributions of more	l (c)(7), (8), or (10) filing Form 990 or 990-EZ that received fi than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lit	rom any one contributor, rerary, or educational					
purposes, or for the prevention of cruelty to	children or animals. Complete Parts I, II, and III	cresy or occasamental					
_							
	(c)(7), (8), or (10) filing Form 990 or 990 EZ that received fi						
	r religious, charitable, etc., purposes, but no such contribution to total contributions that were received during the year for a						
charitable, etc., purpose. Do not complete a	ny of the parts unless the General Rule applies to this organ	nization because					
it received nonexclusively religious, charitab	it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.						

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

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

	B (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 of 1 of Part
Name of org	RICHARDSON FOUNDATION, INC.	1 ' '	er identification number
Part I.			.076722
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FLORA S. RICHARDSON IRREV. TRUST		Person X Payroll
	ONE FIRST NATIONAL PLAZA CHICAGO, IL 60670	\$7 <u>1,400</u> .	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for

Page

1

of Part II

Name of organization

BAA

Employer identification number

FLORA RIGHARDSON FOUNDATION, INC.

| 35-1076722 | Part II | Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		4	
		\$	
(-) N-			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<u> </u>	-	
]\$	
(a) No.	(h)	(c)	(4)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
İ			
		1	
		\$ 	
(a) No	(h)	(6)	(4)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(=) N =	45		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
}			
		\$	
(a) No	(b)	(c)	(4)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
Ţ		\$	
l			

1 to

of Part III

Name of organization FLORA RICHARDSON FOUNDATION, INC.

Employer identification number 35-1076722

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8) or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)					
	Use duplicate copies of Part III if additional	space is needed	ructions.)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	N/A					
		(e)				
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee			
(a) No. from	(b)	(c) Use of gift	(d)			
No. from Part I	Purpose of gift	Use of gift	Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	Transferee's name, address	(e) Transfer of gift , and ZIP + 4	Relationship of transferor to transferee			

FLORA RICHARDSON FOUNDATION, INC.	35-1076722
(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 6,560. TOTAL \$ 6,560. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES \$ 6,560. \$ 6,560.
(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME TOTAL \$ 547. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES \$ 547. \$ 547.
	EXPENSES INVESTMENT ADJUSTED NET INCOME (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NOTAL S 6,560. (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME PER BOOKS INCOME NET INCOME TOTAL S 547. TOTAL S 547. TOTAL S 547. TOTAL S 547. CURRENT NET INCOME

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FEDERAL STATEMENTS

PAGE 2

FLORA RICHARDSON FOUNDATION, INC.

35-1076722

STATEMENT 5 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		 BASIS	 ACCUM. DEPREC.	 BOOK VALUE	 FAIR MARKET VALUE
IMPROVEMENTS LAND		\$ 3,250. 96,827.	\$ 2,742.	\$ 508. 96,827.	\$ 0. 858,400.
	TOTAL	\$ 100,077.	\$ 2,742.	\$ 97,335.	\$ 858,400.

STATEMENT 6 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

EARNEST DEPOSIT. \$ 25,000.

TOTAL \$ 25,000.

STATEMENT 7 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED		BUTION TO	
BARBARA PLAMPIN 18 EAST ROAD-DUNE ACRES CHESTERTON, IN 46304	BOARD MEMBER 1.00	\$ 0.	\$ 0.	\$ 0.
GAYLE S. TONKOVICH 1612 WARWICK AVENUE WHITING, IN 46394	PRESIDENT 1.00	0.	0.	0.
BILL SCHAUDT P.O. BOX 486 BEVERLY SHORES, IN 46301	VICE PRESIDENT 1.00	0.	0.	0.
KENNETH BROCK 1265 REDBUD DRIVE CHESTERTON, IN 46304	BOARD MEMBER 1.00	0.	0.	0.
ROBERT F. HARTMANN 36 EAST ROAD, DUNE ACRES CHESTERTON, IN 46304	BOARD MEMBER 1.00	0.	0.	0.
JEANNETTE BAPST 10 CREST DRIVE - DUNE ACRES CHESTERTON, IN 46304	TREASURER 3.00	0.	0.	0.

2014

FEDERAL STATEMENTS

PAGE 3

FLORA RICHARDSON FOUNDATION, INC.

35-1076722

STATEMENT 7 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
TINA BENGS 2910 COACHMAN TRAIL VALPARAISO, IN 46385	BOARD MEMBER 1.00	\$ 0.	\$ 0.	\$ 0.
DOMINIC MARTEN 1524 DUFFER DRIVE CHESTERTON, IN 46304	BOARD MEMBER 1.00	0.	0.	0.
WENDY SMITH 749 ACADIA ROAD VALPARAISO, IN 46385	SECRETARY 1.00	0.	0.	0.
JUDITH GREY 3 SOUTH 069 BUTTERNUT LN GLEN ELLYN, IL 60137	BOARD MEMBER 1.00	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.