Form **990-PF**

Department of the Treasury
Internal Revenue Service

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 separate instructions is at *www.irs.gov/form990pf.*

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning , and ending

Name of foundation: VAN RIPER-WOODARD FAMILY FOUNDATION, INC

A Employer identification number: 35-1939970

Number and street (or P O box number if mail is not delivered to street address): 1060 NORTH CAPITOL AVENUE — Room/suite: C-200

B Telephone number: (317) 488-7373

City or town, state or province, country, and ZIP or foreign postal code: INDIANAPOLIS, IN 46204

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year (*from Part II, col. (c), line 16*) ▶$ 1,106,190.

J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) (*Part I, column (d) must be on cash basis.*)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

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))

	Line	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received			N/A	
	2 Check ▶ ☒ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	23,174.	23,174.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	39,190.			
	b Gross sales price for all assets on line 6a 168,519.				
	7 Capital gain net income (from Part IV, line 2)		39,190.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 **Total.** Add lines 1 through 11	62,364.	62,364.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees STMT 2	6,750.	0.		0.
	c Other professional fees STMT 3	12,354.	0.		0.
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses				
	24 **Total operating and administrative expenses.** Add lines 13 through 23	19,104.	0.		0.
	25 Contributions, gifts, grants paid	56,500.			56,500.
	26 **Total expenses and disbursements.** Add lines 24 and 25	75,604.	0.		56,500.
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-13,240.			
	b **Net investment income** (if negative, enter -0-)		62,364.		
	c **Adjusted net income** (if negative, enter -0-)			N/A	

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year (a) Book Value	End of year (b) Book Value	End of year (c) Fair Market Value
Assets	1 Cash - non-interest-bearing	16,212.	1,275.	1,275.
	2 Savings and temporary cash investments	620.	791.	791.
	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			
	13 Investments - other STMT 4	782,834.	784,360.	1,104,124.
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers - see the instructions Also, see page 1, item I)	799,666.	786,426.	1,106,190.
Liabilities	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 ▶)			
	23 **Total liabilities** (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances	**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 ▶ [X] and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	792,760.	792,760.	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	6,906.	-6,334.	
	30 **Total net assets or fund balances**	799,666.	786,426.	
	31 **Total liabilities and net assets/fund balances**	799,666.	786,426.	

Part III 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	799,666.
2	Enter amount from Part I, line 27a	2	-13,240.
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	786,426.
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	786,426.

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	NATIONAL BANK OF INDPLS - SEE ATTACHED	P		
b	NATIONAL BANK OF INDPLS - SEE ATTACHED	P		
c	NATIONAL BANK OF INDPLS - SEE ATTACHED	P		
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	19,732.		22,651.	-2,919.
b	79,766.		55,536.	24,230.
c	69,021.		51,142.	17,879.
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a				-2,919.
b				24,230.
c				17,879.
d				
e				

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7; If (loss), enter -0- in Part I, line 7 } 2 39,190.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)
If gain, also enter in Part I, line 8, column (c)
If (loss), enter -0- in Part I, line 8 } 3 N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions 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 assets	(d) Distribution ratio (col (b) divided by col (c))
2013	59,851.	1,001,000.	.059791
2012	52,193.	884,773.	.058990
2011	44,368.	882,560.	.050272
2010	21,539.	874,711.	.024624
2009	52,475.	854,562.	.061406

2	Total of line 1, column (d)	2	.255083
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.051017
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	1,080,545.
5	Multiply line 4 by line 3	5	55,126.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	624.
7	Add lines 5 and 6	7	55,750.
8	Enter qualifying distributions from Part XII, line 4	8	56,500.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate
See the Part VI instructions

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 Date of ruling or determination letter ________ (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ [X] and enter 1% of Part I, line 27b		1	624.
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-)		2	0.
3	Add lines 1 and 2		3	624.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-		5	624.
6	Credits/Payments			
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a 944.		
b	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	6d		
7	Total credits and payments Add lines 6a through 6d		7	944.
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	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶		10	320.
11	Enter the amount of line 10 to be: **Credited to 2015 estimated tax** ▶ 320. **Refunded** ▶		11	0.

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 any political campaign?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ $ 0. (2) On foundation managers ▶ $ 0.			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0.			
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.*	2		X
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		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV*	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ IN			
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	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

Part VII-A Statements Regarding Activities *(continued)*

			Yes	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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶ N/A

14 The books are in care of ▶ TURNER J.R.WOODWARD Telephone no ▶ (317)488-7373

Located at ▶ 1060 NORTH CAPITAL AVENUE, C-200, INDIANAPOLIS, I ZIP+4 ▶ 46204

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A

			Yes	No
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

				Yes	No
1a	During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ 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 ☒ 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 ☒ No			
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	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?		1c		X
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	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 ☒ No			
	If "Yes," list the years ▶ ____, ____, ____, ____				
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 statement - see instructions)	N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ ____, ____, ____, ____				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No			
b	If "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 **(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.)*	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions) ☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? | 5b | | X

Organizations relying on a current notice regarding disaster assistance check here ▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? SEE STATEMENT 5 ☒ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53 4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 6b | | X

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A | 7b | |

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 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
EDNA WOODARD VAN RIPER 1060 NORTH CAPITOL AVENUE INDIANAPOLIS, IN 46204	DIRECTOR 1.00	0.	0.	0.
TURNER J.R. WOODARD 1060 NORTH CAPITOL AVENUE INDIANAPOLIS, IN 46204	DIRECTOR 2.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(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

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "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 ▶ 0

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 N/A	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3 ▶	0.

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, 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	1a	1,094,000.
b	Average of monthly cash balances	1b	3,000.
c	Fair market value of all other assets	1c	0.
d	**Total** (add lines 1a, b, and c)	1d	1,097,000.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,097,000.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) STMT 6	4	16,455.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,080,545.
6	**Minimum investment return.** Enter 5% of line 5	6	54,027.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	54,027.
2a	Tax on investment income for 2014 from Part VI, line 5 2a 624.		
b	Income tax for 2014 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	624.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	53,403.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	53,403.
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, line 1	7	53,403.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	56,500.
b	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		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	56,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b	5	624.
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	55,876.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				53,403.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			4,507.	
b Total for prior years ______ , ______ , ______		0.		
3 Excess distributions carryover, if any, to 2014				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ $ 56,500.				
a Applied to 2013, but not more than line 2a			4,507.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2014 distributable amount				51,993.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
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		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 amount - see instructions		0.		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				1,410.
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)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7	0.			
9 **Excess distributions carryover to 2015.** Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				

Part XIV **Private Operating Foundations** (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV **Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see instructions.)**

1 ***Information Regarding Foundation Managers:***

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

EDNA WOODARD VAN RIPER

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

NONE

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

Check here ▶ ☐ 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

TURNER J.R.WOODARD, 317-488-7373
1060 NORTH CAPITOL, INDIANAPOLIS, IN 46204

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
INDIANAPOLIS ZOO 1200 W WASHINGTON ST INDIANAPOLIS, IN 46222	NONE	501 (C) (3)	DONATION	6,600.
COLLEGE MENTOR FOR KIDS! 212 WEST 10TH STREET INDIANAPOLIS, IN 46202	NONE	501 (C) (3)	DONATION	3,000.
INDIANAPOLIS SYMPHONY ORCHESTRA 450 MONUMENT CIRCLE INDIANAPOLIS, IN 46204	NONE	501 (C) (3)	DONATION	2,000.
LEE MEMORIAL HOSPITAL (BARBARA'S FRIENDS) 2776 CLEVELAND AVENUE FORT MYERS, FL 33901	NONE	509(C)(3)	DONATION	2,500.
MICKEYS CAMP 4905 E 56TH STREET INDIANAPOLIS, IN 76220	NONE	501 (C) (3)	DONATION	3,000.
Total SEE CONTINUATION SHEET(S)			▶ 3a	56,500.
b *Approved for future payment* NONE				
Total			▶ 3b	0.

Form **990-PF** (2014)

423611
11-24-14

09010513 765940 38390.0 2014.03040 VAN RIPER-WOODARD FAMILY FO 38390_01

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NEAR NORTH DEVELOPMENT CORPORATION 1800 NORTH MERIDIAN STREET INDIANAPOLIS, IN 46202	NONE	501 (C) (3)	DONATION	3,000.
NJTL OF INDIANPOLIS 911 E 86TH STREET, SUITE 31 INDIANAPOLIS, IN 46202	NONE	501 (C) (3)	DONATION	3,000.
PARK TUDOR SCHOOL 7200 N COLLEGE AVENUE INDIANAPOLIS, IN 46240	NONE	501 (C) (3)	DONATION	1,225.
SAM SCHMIDT PARALYSIS FOUNDATION - CONQUER PARALYSIS NOW PO BOX 3661 PRINCETON, NJ 08543	NONE	501 (C) (3)	DONATION	3,700.
TRADERS POINT CHARITY HORSE SHOW FBO RILEY CHILDREN'S FOUNDATION P.O. BOX 732 ZIONSVILLE, IN 46077	NONE	SEE RESPONSIBILITY STATEMENT	DONATION	2,000.
WFYI FOUNDATION, INC. 1630 NORTH MERIDIAN STREET INDIANAPOLIS, IN 46202	NONE	501(C)(3)	DONATION	3,000.
KEEP INDIANAPOLIS BEAUTIFUL 10290 FLETCHER AVENUE INDIANAPOLIS, IN 46203		501 (C) (3)	DONATION	1,275.
LUKEMIA AND LYMPHONA SOCIETY 9075 NORTH MERIDIAN ST INDIANAPOLIS, IN 46260	NONE	501 (C) (3)	DONATION	1,000.
INDIANA HISTORICAL SOCIETY 450 WEST OHIO STREET INDIANAPOLIS, IN 46202	NONE	501 (C) (3)	DONATION	1,000.
FRIENDS OF WHITE RIVER P.O. BOX 90171 INDIANAPOLIS, IN 46290	NONE	501 (C) (3)	DONATION	1,200.
Total from continuation sheets				39,400.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HISTORIC MADISON 500 WEST STREET MADISON, IN 47250	NONE	501 (C) (3)	DONATION	1,000.
HAGERTY EDUCATION PROGRAM AT AMERICA'S CAR MUSEUM 2702 EAST D STREET TACOMA, WA 98421	NONE	501 (C) (3)	DONATION	1,000.
CHARLES TINLEY ACCELERATED SCHOOL 3960 MEADOWS DRIVE INDIANAPOLIS, IN 46205	NONE	501 (C) (3)	DONATION	3,000.
INDIANA HORSE PATROL 77 N TIBBS INDIANAPOLIS, IN 46205	NONE	501 (C) (3)	DONATION	3,000.
NEW SONG MISSION P O BOX 488 NASHVILLE, IN 47448	NONE	501 (C) (3)	DONATION	3,000.
HOOSIER ENVIRONMENTAL COUNCIL 3951 N MERIDIAN ST, SUITE 100 INDIANAPOLIS, IN 46208	NONE	501 (C) (3)	DONATION	3,000.
CROWN HILL HERITAGE FOUNDATION 700 WEST 38TH ST, INDIANAPOLIS, IN 46208	NONE	501 (C) (3)	DONATION	5,000.
Total from continuation sheets				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income (a) Business code	Unrelated business income (b) Amount	Excluded by section 512, 513, or 514 (c) Exclusion code	Excluded by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	23,174.	
5 Net 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			14	39,190.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		62,364.	0.

13 Total. Add line 12, columns (b), (d), and (e) 13 62,364.

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)

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

		Yes	No
1 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)		X
(2) Other assets	1a(2)		X
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
(3) Rental of facilities, equipment, or other assets	1b(3)		X
(4) Reimbursement arrangements	1b(4)		X
(5) Loans or loan guarantees	1b(5)		X
(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

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

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(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 in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Signature of officer or trustee: [signature] Date: 5/13/15 Title: [signature]

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
JAMES E. WEAVER, CPA	[signature]	5/12/2015		P00102166

Firm's name ▶ SLATTERY & HOLMAN, P.C. Firm's EIN ▶ 35-1518557

Firm's address ▶ 12900 N. MERIDIAN ST., STE. 125 CARMEL, IN 46032 Phone no 317 843-5715

Form **990-PF** (2014)

423622 11-24-14

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST-MENT INCOME	(C) ADJUSTED NET INCOME
NBI - CAPITAL GAIN DIVIDENDS	780.	0.	780.	780.	
NBI - DIVIDENDS & INTEREST	22,171.	0.	22,171.	22,171.	
OTHER INVESTMENT INCOME	223.	0.	223.	223.	
TO PART I, LINE 4	23,174.	0.	23,174.	23,174.	

FORM 990-PF ACCOUNTING FEES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST-MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	6,750.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	6,750.	0.		0.

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST-MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	11,515.	0.		0.
MISCELLANEOUS FEES	173.	0.		0.
FOREIGN TAXES	166.	0.		0.
FEDERAL INCOME TAX	500.	0.		0.
TO FORM 990-PF, PG 1, LN 16C	12,354.	0.		0.

FORM 990-PF OTHER INVESTMENTS STATEMENT 4

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LISTED SECURITIES	COST	784,360.	1,104,124.
TOTAL TO FORM 990-PF, PART II, LINE 13		784,360.	1,104,124.

FORM 990-PF EXPENDITURE RESPONSIBILITY STATEMENT STATEMENT 5
PART VII-B, LINE 5C

GRANTEE'S NAME

TRADERS POINT CHARITY HORSE SHOW

GRANTEE'S ADDRESS

P O BOX 732
ZIONSVILLE, IN 46077

GRANT AMOUNT	DATE OF GRANT	AMOUNT EXPENDED
2,000.	07/28/14	

PURPOSE OF GRANT

THIS GRANT IS FOR A CHARITABLE CONTRIBUTION TO THE JAMES WHITCOMB RILEY FOUNDATION. SEE THE VERIFICATION ATTACHED INDICATING THAT THE CONTRIBUTION WAS PROPERLY REMITTED TO THE JAMES WHITCOMB RILEY FOUNDATION.

FORM 990-PF	CASH DEEMED CHARITABLE EXPLANATION STATEMENT PART X, LINE 4	STATEMENT 6

PLEASE SEE THE ATTACHED VERIFICATION OF REMITTANCE TO JAMES WHITCOMB RILEY FOUNDATION BY TRADER'S POINT CHARITY HORSE SHOW.

FROM : TRADER'S POINT HUNT CHARITY HORSE SHOW

TO: VAN RIPER-WOODARD FAMILY FOUNDATION, INC.

SUBJECT: VERIFICATION OF REMITTANCE TO JAMES WHITCOMB RILEY
CHILDREN'S FOUNDATION

THE $2,000 REMITTED BY VAN RIPER-WOODARD FAMILY FOUNDATION, INC TO TRADER'S POINT CHARITY HORSE SHOW ON OR ABOUT JULY 28, 2014 HAS BEEN PROPERLY DISBURSED TO THE JAMES WHITCOMB RILEY CHILDREN'S FOUNDATION.

TRADER'S POINT HUNT CHARITY HORSE SHOW

Title [illegible]

Signature [illegible] Date 5/12/15

Printed Name Pam Holdgrafer

2014 Tax Information Statement

Payer's Name and Address:
THE NATIONAL BANK OF INDIANAPOLIS
107 N PENNSYLVANIA ST., STE 500
INDIANAPOLIS, IN 46204

Account Number:	**008971**
Recipient's Tax ID Number:	**35-1939970**
Payer's Federal ID Number:	**35-1904483**
Payer's State ID Number:	
State:	**IN**
Questions?	**(317)261-9677**

☐ **Corrected** ☐ **2nd TIN notice**

Recipient's Name and Address: Ref: 1
VAN RIPER WOODARD FAMILY FOUNDATION
1060 N. CAPITOL AVENUE, STE C-200
INDIANAPOLIS, IN 46204

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
Covered (Box 5 is not checked)

Description of property *(Box 1a)*

Cusip Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
Short Term Sales Reported on 1099-B										
40.0	IAC INTERACTIVECORP COM PAR $ 001									
44919P508	03/24/2014	11/26/2013	A	2,876.74	2,238 00		0.00	638.74	0.00	0 00
5.0	INTERCONTINENTAL EXCHANGE IN COM									
45866F104	08/04/2014	03/24/2014	A	962.57	1,028 92		0 00	-66 35	0.00	0 00
115.0	LAS VEGAS SANDS CORP COM									
517834107	09/29/2014	03/24/2014	A	6,897.55	9,165 45		0 00	-2,267.90	0 00	0.00
65.0	LAS VEGAS SANDS CORP COM									
517834107	09/29/2014	06/20/2014	A	3,898 61	4,881.95		0 00	-983.34	0 00	0.00
50.0	LAS VEGAS SANDS CORP COM									
517834107	09/29/2014	09/05/2014	A	2,998.93	3,139.77		0.00	-140.84	0.00	0.00
3 75	NOW INC COM									
67011P100	06/16/2014	12/19/2013	A	125.09	114 91		0.00	10.18	0 00	0.00
4.75	NOW INC COM									
67011P100	06/16/2014	08/01/2013	A	158 44	131.96		0.00	26.48	0.00	0 00
0 25	NOW INC COM									
67011P100	07/10/2014	08/01/2013	A	8.67	6.94		0 00	1.73	0 00	0.00

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

2014 Tax Information Statement

Ref: 1

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107 N PENNSYLVANIA ST., STE 500
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Recipient's Tax ID Number: 35-1939970
Payer's Federal ID Number: 35-1904483
Payer's State ID Number:
State: IN
Questions? (317)261-9677

☐ Corrected ☐ 2nd TIN notice

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INDIANAPOLIS, IN 46204

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

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Covered (Box 5 is not checked)

Description of property *(Box 1a)*

Cusip Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
2.812	OPPENHEIMER DEVLPNG MKT-Y									
683974505	03/26/2014	12/09/2013	A	101 09	104.23		0.00	-3.14	0.00	0.00
25.0	ROSS STORES INC COM									
778296103	06/20/2014	12/19/2013	A	1,704.25	1,838 75		0.00	-134 50	0.00	0 00
Total Short Term Sales Reported on 1099-B				**19,731.94**	**22,650.88**		**0.00**	**-2,918.94**	**0.00**	**0.00**

Report on Form 8949, Part I, with Box A checked

Cusip Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
Long Term Sales Reported on 1099-B										
15.0	AMERICAN EXPRESS CO COM									
025816109	03/24/2014	08/30/2012	D	1,355.06	859.64		0 00	495 42	0.00	0.00
10.0	AMPHENOL CORP NEW CL A									
032095101	09/05/2014	02/16/2012	D	1,040 68	564.32		0.00	476 36	0.00	0.00
16.0	APPLE INC COM									
037833100	06/20/2014	03/22/2013	D	1,466 71	1,052.73		0 00	413.98	0.00	0 00
10.0	APPLE INC COM									
037833100	09/05/2014	03/22/2013	D	987.88	657.95		0 00	329.93	0.00	0.00
2.0	APPLE INC COM									
037833100	09/29/2014	03/22/2013	D	199.98	131.59		0.00	68.39	0.00	0.00

2014 Tax Information Statement

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2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
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Description of property *(Box 1a)*

Cusip Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
8.0	APPLE INC COM									
037833100	09/29/2014	08/01/2013	D	799.90	520 91		0.00	278.99	0 00	0 00
36.6666	CDK GLOBAL INC COM									
12508E101	10/03/2014	10/13/2011	D	1,071.88	696.17		0.00	375 71	0 00	0.00
24.3334	CDK GLOBAL INC COM									
12508E101	10/03/2014	11/30/2011	D	711.35	461 09		0 00	250.26	0.00	0 00
0.6666	CDK GLOBAL INC COM									
12508E101	10/16/2014	11/30/2011	D	16.65	12.63		0.00	4.02	0.00	0 00
10.0	CELGENE CORP COM									
151020104	09/05/2014	09/01/2011	D	936.88	297 39		0.00	639 49	0 00	0.00
20.0	COLGATE PALMOLIVE CO COM									
194162103	03/24/2014	03/05/2012	D	1,269.37	935.10		0.00	334.27	0 00	0 00
15.0	COMCAST CORP NEW CL A									
20030N101	09/05/2014	06/20/2011	D	835.19	357.00		0.00	478 19	0 00	0.00
15.0	CVS HEALTH CORPORATION									
126650100	09/05/2014	08/01/2013	D	1,223 07	928.65		0 00	294.42	0.00	0.00

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2014 Tax Information Statement

Payer's Name and Address:
THE NATIONAL BANK OF INDIANAPOLIS
107 N PENNSYLVANIA ST., STE 500
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State:	**IN**
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1060 N. CAPITOL AVENUE, STE C-200
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2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
Covered (Box 5 is not checked)

Description of property *(Box 1a)*

Cusip Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
6.0	EOG RES INC COM									
26875P101	03/24/2014	02/16/2012	D	1,132 07	707.64		0.00	424.43	0.00	0.00
10.0	EOG RES INC COM									
26875P101	06/20/2014	02/16/2012	D	1,181.67	589 70		0.00	591.97	0 00	0 00
22.779	FIDELITY ADV FLO RT H/INC									
315807552	09/25/2014	12/10/2012	D	224.60	226 00		0.00	-1.40	0 00	0 00
204.29	FIDELITY ADV FLO RT H/INC									
315807552	09/25/2014	02/17/2012	D	2,014.30	2,000 00		0 00	14.30	0.00	0.00
65.0	INTERCONTINENTAL EXCHANGE IN COM									
45866F104	08/04/2014	06/20/2011	D	12,513.43	7,805 20		0.00	4,708 23	0.00	0.00
20.0	NORDSTROM INC COM									
655664100	09/05/2014	08/30/2012	D	1,405.86	1,157 20		0.00	248.66	0.00	0.00
37.5	NOW INC COM									
67011P100	06/16/2014	02/16/2012	D	1,250.86	1,241 77		0 00	9 09	0.00	0.00
35.0	PETSMART INC COM									
716768106	03/24/2014	03/22/2013	D	2,301 80	2,176.30		0.00	125.50	0.00	0 00

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2014 Tax Information Statement

Payer's Name and Address:
THE NATIONAL BANK OF INDIANAPOLIS
107 N PENNSYLVANIA ST., STE 500
INDIANAPOLIS, IN 46204

Account Number:	**008971**
Recipient's Tax ID Number:	**35-1939970**
Payer's Federal ID Number:	**35-1904483**
Payer's State ID Number:	
State:	**IN**
Questions?	**(317)261-9677**
☐ **Corrected**	☐ **2nd TIN notice**

Recipient's Name and Address: Ref: 1
VAN RIPER WOODARD FAMILY FOUNDATION
1060 N. CAPITOL AVENUE, STE C-200
INDIANAPOLIS, IN 46204

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
Covered (Box 5 is not checked)

Description of property *(Box 1a)*

Cusip Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
30.0	PETSMART INC COM									
716768106	03/24/2014	02/16/2012	D	1,972 97	1,646.94		0.00	326.03	0.00	0.00
130.0	PETSMART INC COM									
716768106	03/24/2014	10/13/2011	D	8,549.53	5,839 56		0.00	2,709 97	0 00	0.00
20.0	PNC FINL SVCS GROUP INC COM									
693475105	03/24/2014	03/05/2012	D	1,731.03	1,175 20		0.00	555.83	0.00	0 00
175.0	ROSS STORES INC COM									
778296103	06/20/2014	06/20/2011	D	11,929.78	6,659 99		0.00	5,269.79	0.00	0.00
30.0	TESORO CORP COM									
881609101	09/05/2014	03/22/2013	D	1,997 58	1,759.27		0 00	238 31	0.00	0 00
30.0	VANGUARD INDEX FDS SML CP GRW ETF									
922908595	04/15/2014	06/20/2011	D	3,541.71	2,432 19		0.00	1,109.52	0.00	0.00
12.941	VANGUARD S/T INVEST GRADE ADMIRAL CLASS									
922031836	03/10/2014	12/31/2012	D	138.86	139.69		0 00	-0.83	0 00	0 00
919.025	VANGUARD S/T INVEST GRADE ADMIRAL CLASS									
922031836	03/10/2014	02/21/2012	D	9,861.14	9,861.14		0 00	0.00	0.00	0 00

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2014 Tax Information Statement

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State: IN
Questions? (317)261-9677

☐ **Corrected** ☐ **2nd TIN notice**

Recipient's Name and Address: Ref: 1
VAN RIPER WOODARD FAMILY FOUNDATION
1060 N. CAPITOL AVENUE, STE C-200
INDIANAPOLIS, IN 46204

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
Covered (Box 5 is not checked)

Description of property *(Box 1a)*

Cusip Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
50.0	WILLIAMS COS INC DEL COM									
969457100	03/24/2014	09/01/2011	D	2,030.41	1,101.25		0.00	929.16	0.00	0.00
50 0	WILLIAMS COS INC DEL COM									
969457100	06/20/2014	09/01/2011	D	2,892.94	1,101 25		0 00	1,791 69	0.00	0 00
20.0	WILLIAMS COS INC DEL COM									
969457100	09/05/2014	09/01/2011	D	1,180 38	440.50		0.00	739.88	0 00	0.00
Total Long Term Sales Reported on 1099-B				**79,765.52**	**55,535.96**		**0.00**	**24,229.56**	**0.00**	**0.00**

Report on Form 8949, Part II, with Box D checked

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2014 Tax Information Statement

Account Number:	008971	
Recipient's Tax ID Number:	35-1939970	
Payer's Federal ID Number:	35-1904483	
Payer's State ID Number:		
State:	IN	
Questions?	(317)261-9677	
☐ **Corrected**	☐ **2nd TIN notice**	

Recipient's Name and Address: Ref: 1
VAN RIPER WOODARD FAMILY FOUNDATION
1060 N. CAPITOL AVENUE, STE C-200
INDIANAPOLIS, IN 46204

Payer's Name and Address:
THE NATIONAL BANK OF INDIANAPOLIS
107 N PENNSYLVANIA ST., STE 500
INDIANAPOLIS, IN 46204

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.
Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property *(Box 1a)*

CUSIP Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
Long Term Sales Reported on 1099-B										
10.0	AMGEN INC COM									
031162100	09/05/2014	10/05/2009	E	1,372.46	586.77		0.00	785 69	0.00	0.00
150.0	CHUBB CORP COM									
171232101	08/04/2014	10/05/2009	E	12,991.21	7,386.00		0.00	5,605.21	0.00	0.00
200 0	COLGATE PALMOLIVE CO COM									
194162103	03/24/2014	01/05/2010	E	12,693.71	8,356.99		0 00	4,336.72	0.00	0.00
726 278	FIDELITY ADV FLO RT H/INC									
315807552	09/25/2014	06/15/2010	E	7,161 10	6,812 49		0.00	348.61	0 00	0.00
1.0	GOOGLE INC CLASS A									
38259P508	03/24/2014	08/28/2008	E	1,151 38	472.57		0.00	678.81	0 00	0 00
12.0	GOOGLE INC CLASS C									
38259P706	09/29/2014	08/28/2008	E	6,889.39	2,839.13		0.00	4,050 26	0.00	0 00
10.0	HOME DEPOT INC COM									
437076102	09/05/2014	03/13/1996	E	909.97	227.79		0.00	682.18	0.00	0 00

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2014 Tax Information Statement

Ref: 1

Payer's Name and Address:
THE NATIONAL BANK OF INDIANAPOLIS
107 N PENNSYLVANIA ST., STE 500
INDIANAPOLIS, IN 46204

Account Number: 008971
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Questions? (317)261-9677

☐ **Corrected** ☐ **2nd TIN notice**

Recipient's Name and Address:
VAN RIPER WOODARD FAMILY FOUNDATION
1060 N. CAPITOL AVENUE, STE C-200
INDIANAPOLIS, IN 46204

Reported to the IRS is proceeds less commissions and option premiums.
For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.
Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property *(Box 1a)*

CUSIP Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
23 0	ISHARES TR RUS MID-CAP ETF									
464287499	04/15/2014	10/20/2009	E	3,453.20	1,847.18		0.00	1,606.02	0.00	0.00
66.729	OPPENHEIMER DEVLPNG MKT-Y									
683974505	03/26/2014	06/24/2011	E	2,398 91	2,294.81		0 00	104.10	0 00	0.00
283.797	PIMCO TOTAL RETURN FUND									
693390700	09/25/2014	11/30/2011	E	3,093.39	3,059.33		0.00	34.06	0.00	0.00
679.506	PIMCO TOTAL RETURN FUND									
693390700	09/25/2014	06/24/2011	E	7,406 61	7,422 09		0 00	-15 48	0 00	0.00
716.44	TEMPLETON GLOBAL BD FD-AD									
880208400	09/25/2014	06/20/2011	E	9,500.00	9,836 72		0.00	-336.72	0 00	0.00
Total Long Term Sales Reported on 1099-B				**69,021.33**	**51,141.87**		**0.00**	**17,879.46**	**0.00**	**0.00**

Report on Form 8949, Part II, with Box E checked

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