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### Form 990-PF

#### 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. OMB No 1545-0052

Department of the Treasury Internal Revenue Service

دي ⊜ ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf Open to Public Inspection

2014, and ending For calendar year 2014 or tax year beginning A Employer identification number THE WILLIAM N AND ELIZABETH A RIETH Name of foundation CHARITABLE FOUNDATION 480100239 35-1970370 Room/suite B Telephone number (see instructions) Number and street (or P.O. box number if mail is not delivered to street address) P.O. BOX 1602 866-888-5157 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here SOUTH BEND, IN 46634 Initial return Initial return of a former public charity G Check all that apply: 1 Foreign organizations, check here Amended return Final return 2 Foreign organizations meeting the 85% test, check here and attach Name change Address change computation . . H Check type of organization: | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminate Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method: X Cash Fair market value of all assets at If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col. (c), line under section 507(b)(1)(B), check here . (Part I, column (d) must be on cash basis.) 16) ▶ \$ 1,302,939 (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per purposes ıncome income may not necessarily equal the amounts in column (a) (see instructions).) books (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to attach Sch. B 2 3 Interest on savings and temporary cash investments-28,438 28,438. 28,438 Dividends and interest from securities . . . . b Net rental income or (loss) 149,293 Net gain or (loss) from sale of assets not on line 10 Revenue Gross sales price for all assets on line 6a 846,622 149,293 Capital gain net income (from Part IV, line 2) . Income modifications Gross sales less returns and allowances · · · · **b** Less. Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) . . . . . . . 11 177,731 177,731 28,438 Total. Add lines 1 through 11 . . . . 9,809 4,905 13 Compensation of officers, directors, trustees, etc. . . Expenses 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits . . . . . . 16a Legal fees (attach schedule) . . . . . . . . . **b** Accounting fees (attach schedule) Administrative Other professional fees (attach schedule) . . . 17 3,348 Taxes (attach schedule) (see instructions. 1. ര് 18 19 Depreciation (attach schedule) and depletion . 20 and ' 21 Travel, conferences, and meetings . . . . . OGDEN, 22 Printing and publications . . . . . . . . . . . . Operating 23 Other expenses (attach schedule) . . . . . 24 Total operating and administrative expenses. <u>13,157</u> 4,905 Add lines 13 through 23. . . . . . . . . . . 60,000 25 Contributions, gifts, grants paid . . . . . . . 60,000 4,905 73.157 26 Total expenses and disbursements Add lines 24 and 25 60,000 27 Subtract line 26 from line 12: 104,574 Excess of revenue over expenses and disbursements . . 172,826 Net investment income (if negative, enter -0-)

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28,438.

Adjusted net income (if negative, enter -0-). . JSA For Paperwork Reduction Act Notice, see instructions. FAT586 A491 06/15/2015 12:58:17

Part II		Polones Chasts	Attached schedules and amounts in the ance Sheets description column should be for end-of-year		End o	<del></del>
	art II	Dalatice Streets	amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	ng		44.	$\phantom{aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa$
			ash investments	72,921.		
	3	Accounts receivable		`		
	ĺ	Less: allowance for doub	tful accounts >			
	}	Less: allowance for doub	tful accounts			
	l.					
	1		officers, directors, trustees, and other			
			ch schedule) (see instructions)			
	ı		ceivable (attach schedule)			
			tful accounts >	<b>_ j</b>		
S			в			
Assets	1		ferred charges			
As		•	government obligations (attach schedule)			
			stock (attach schedule) . STMT .2.	706,457.	836,983.	978,634.
Ì			oonds (attach schedule) STMT 3	93,077.	281,466.	282,667.
	11	Investments - land, buildings and equipment, basis Less: accumulated depreciat (attach schedule)	i, <b>b</b>			
	12	Investments - mortgage I	oans			
	13	Investments - other (attack	th schedule)	173,409.	41,594.	41,594.
		Land, buildings, and equipment basis		1		
- 1		Less, accumulated depreciat (attach schedule)	ion			
	15	Other assets (describe	<b>-</b> )			
		•	completed by all filers - see the ge 1, item l)	1,045,864.	1,160,087.	1,302,939.
٦	17	Accounts payable and ac	crued expenses			
ç						
Liabilities			s, trustees, and other disqualified persons			,
핅		· ·	es payable (attach schedule)			
اڌ:		• •	<b>&gt;</b>			
			·			
- }	23	Total liabilities (add lines	: 17 through 22)	<b>\</b>	NONE	
			ow SFAS 117, check here . ► 4 through 26 and lines 30 and 31.			
Balances	24	Unrestricted				
擅						
Net Assets or Fund		Foundations that do r	not follow SFAS 117, ▶ X			
ō	27	Capital stock, trust princip	pal, or current funds	1,045,864.	1,160,087.	
ets			and, bldg., and equipment fund			,
Ass			ted income, endowment, or other funds			
늄		• .	balances (see instructions)	1,045,864.	1,160,087.	
괴			net assets/fund balances (see			
-		instructions)		1,045,864.	1;160,087.	
P	art III	Analysis of Chang	ges in Net Assets or Fund Bala			
			alances at beginning of year - Part		nust agree with	
			on prior year's return)			1,045,864.
2		·	•			104,574.
3	Othe	er increases not include	ne 27a ed in line 2 (itemize) ► SEE STAT	EMENT 5	3	10,781.
						1,161,219.
5	Decr	eases not included in I	line 2 (itemize) ► SEE STAT	EMENT 6	5	1,132.
			ances at end of year (line 4 minus li			1,160,087.
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Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and 2-story b	acquired P - Purchase	acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
	DITOT TOTAL MODDED	D - Donation	(11,0.1, 0.07, 71.17			
b		BECORTITED		<u> </u>		
_ <u>~</u>	<del></del>					
_ <u>_</u>						
е						
	(e) Gross sales price		(h) Gain or (lo			
a	846,622.		697,329.			149,293.
b						
C						
d						
е			<u>                                     </u>			
	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69	. (1)	Gains (Col. (h) ga	iin minus
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col.	(k), but not less t Losses (from co	
а						149,293.
_ <u>b</u>						
C						
_ <u>d</u>						
е						
2	Capital gain net income o	r (not conital loca)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		149,293.
3	Net short-term capital gai	n or (loss) as defined in sections 1	222(5) and (6):			
	If gain, also enter in Pa	rt I, line 8, column (c) (see ins	tructions). If (loss), enter -0- in $\}$			
		<u></u>		3		
			uced Tax on Net Investment In section 4940(a) tax on net investment			
Wa	Yes," the foundation does n	he section 4942 tax on the distrib ot qualify under section 4940(e).	outable amount of any year in the ba Do not complete this part. ; see the instructions before making			Yes X No
<u> </u>	(a)	(b)	(c)	any citt	(d)	<del></del>
C.	Base period years elendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col. (b) divided by	
	2013	42,957.	1,190,426.		(COI. (D) GIVIGED BY	0.036085
	2012	26,827.	1,094,136.	<del></del>		0.024519
	2011	36,223.	1,092,274.			0.033163
	2010	46,316.	1,065,063.			0.043487
	2009	39,927.	957,384.			0.041704
2	Total of line 1, column (d)			2		0.178958
3		*				
	_	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				
	Enter the net value of non	dation has been in existence if less				
4			om Part X, line 5	4	1,	276,154.
<b>4</b> <b>5</b>		charitable-use assets for 2014 fro	om Part X, line 5	5	1,	276,154. 45,676.
	Multiply line 4 by line 3 .	charitable-use assets for 2014 fro			1,	
5	Multiply line 4 by line 3.  Enter 1% of net investmen	charitable-use assets for 2014 fro		5	1,	45,676.
5	Multiply line 4 by line 3.  Enter 1% of net investment  Add lines 5 and 6  Enter qualifying distribution	charitable-use assets for 2014 fro		5 6 7 8		45,676. 1,728. 47,404. 60,000.

Х

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

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Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
• •	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Maharta address N/A			
14	The books are in care of ► 1ST SOURCE BANK  Telephone no. ► (574) 235	279	0	
	Located at ▶ P O BOX 1602, SOUTH BEND, IN ZIP+4 ▶ 46634			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\Box$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	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			1
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1.	During the year did the foundation (either directly or indirectly)			
1.0	(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			ł
	disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			ĺ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			l
	the benefit or use of a disqualified person)?	l		ĺ
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			1
	foundation agreed to make a grant to or to employ the official for a period after			İ
	termination of government service, if terminating within 90 days.) Yes X No			1
ь	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			İ
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		Х
	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	`		1
	were not corrected before the first day of the tax year beginning in 2014?	1c		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)):	ľ		
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			1
	6e, Part XIII) for tax year(s) beginning before 2014?	- 1		İ
	If "Yes," list the years	- 4		1
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			i
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			Ĭ.,
	all years listed, answer "No" and attach statement - see instructions.)	2b		X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			ŀ
	at any time during the year?			
b	olf "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	- 1		ŀ
	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)	_3ь_		<u>_</u> _
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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
		0.0	N_DE	10044

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Par	VII-B Statements Regarding Activities	for Which Form	4720 May Be Rec	uired (continued)		
5a	During the year did the foundation pay or incur any amo	ount to:				
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	on 4945(e))?	. Yes X No	,	√ .
	(2) Influence the outcome of any specific public el	ection (see section	4955), or to carry o			-
	directly or indirectly, any voter registration drive?			. Yes X No	) [	
	(3) Provide a grant to an individual for travel, study, or o	other similar purposes	i?	. Yes X No	•	
	(4) Provide a grant to an organization other than a	charitable, etc., or	ganization described	ın — —		ļ
	section 4945(d)(4)(A)? (see instructions)			Yes X No	,	İ
	(5) Provide for any purpose other than religious, c	harıtable, scientıfıc,	literary, or educations	al — —	1 1	}
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	,	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	.	
	Regulations section 53.4945 or in a current notice regard	rding disaster assistai	nce (see instructions)?		5b	
	Organizations relying on a current notice regarding disas	ster assistance check	here			
c	If the answer is "Yes" to question 5a(4), does the	ax				
	because it maintained expenditure responsibility for the	grant?		Yes No	,	
	If "Yes," attach the statement required by Regulations set					1
6a	Did the foundation, during the year, receive any ful	nds, directly or indi-	rectly, to pay premiui	ms		]
	on a personal benefit contract?			Yes X No	. [	
b	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a	personal benefit contra	nct?	6b	X
	If "Yes" to 6b, file Form 8870.					
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?.	. Yes X No	. ] [	İ
	If "Yes," did the foundation receive any proceeds or have	any net income attri	butable to the transacti	on?	7b	
	VIII Information About Officers, Directo	rs, Trustees, Fou	Indation Manager	s, Highly Paid Emp	oloyees,	
1	and Contractors ist all officers, directors, trustees, foundation management	anagers and their	compensation (see	instructions)		
<del></del>		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense	account.
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	wances
GARY I	LACKETOR	TRUSTEE				
100 N	MICHIGAN ST, SOUTH BEND, IN 46601	1	9,809.	-0-		-0
		<u> </u>				
						· ·
	compensation of five highest-paid employees	(other than thos	se included on line	e 1 - see instructio	ns). If no	ne, enter
	NONE."	T		(d) Contributions to		
(a)	lame and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expense	
		devoted to position	<u> </u>	compensation	other allo	wances
NONE			NONE	NONE	NC	ONE
		<u> </u>	<u></u>			
Total	number of other employees paid over \$50,000		<u> </u>		NC	ONE
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**3NONE** 

Total. Add lines 1 through 3

All other program-related investments. See instructions.

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn fou	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,295,588.
b	Average of monthly cash balances	1b	NONE
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	1,295,588.
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	1,295,588.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	$\Gamma T$	
	instructions)	4	19,434.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,276,154.
6	Minimum investment return. Enter 5% of line 5	6	63,808.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	63,808.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.) . 2b	] [	
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	62,080.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	62,080.
6	Deduction from distributable amount (see instructions).	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	62,080.
	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		60.000
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	60,000.
	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	_	
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	60,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	1,728.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	58,272.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years.	alculatiı	ng whether the foundation

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_	n 990-PF (2014)  rt XIII Undistributed Income (see instruc	ctions)			Page S
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
•	line 7	`			62,080.
2	Undistributed income, if any, as of the end of 2014:				
а	Enter amount for 2013 only			17,387.	
ь	Total for prior years: 20 12 ,20,20		NONE		
3	Excess distributions carryover, if any, to 2014:	,		Ì	
a	From 2009 NONE		* * * * * * * * * * * * * * * * * * * *	• • • • • •	4
b	From 2010 NONE				
C	From 2011 NONE	•			
d	From 2012 NONE				
0	From 2013 NONE				
f	Total of lines 3a through e	NONE			<del></del>
4	Qualifying distributions for 2014 from Part XII, line 4. ► \$ 60,000.				
a	Applied to 2013, but not more than line 2a			17,387.	
b	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election required - see instructions)	NONE			
d	Applied to 2014 distributable amount				42,613.
	Remaining amount distributed out of corpus	NONE	, ,		
5	Excess distributions carryover applied to 2014	NONE			NONE
6	(If an amount appears in column (d), the same amount must be shown in column (a).)  Enter the net total of each column as				
	indicated below:  Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
8 h	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE		·
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a)		NONE		
	Subtract line 6c from line 6b. Taxable				<del></del>
u	amount - see instructions		NONE		
е	Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instructions				,
	Undistributed income for 2014. Subtract lines	}			
•	4d and 5 from line 1. This amount must be	1	l'		
	distributed in 2015				<u> 19,467.</u>
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)	NONE			
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	NONE	.,		
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	NONE			
10	Analysis of line 9:	İ	_		
a	Excess from 2010 NONE	]	.]		
b	Excess from 2011 NONE				
_	Excess from 2012 NONE		*		
d	Excess from 2013 NONE		ł		
_e	Excess from 2014 NONE				Form <b>990-PF</b> (2014)

_	t XIV Private Ope	rating Foundations	(see instructions a	nd Part VII-A, ques	tion 9)		NOT 7	APPLICAB
	If the foundation has re							
	foundation, and the ruling				▶			
ь	Check box to indicate w				in section	4942(	)(3) or	4942(j)(5)
	Γ	Тах уеаг		Prior 3 years			T .	
2 a	Enter the lesser of the ad-	(a) 2014	(b) 2013	(c) 2012	(d) 20	11	1 '	e) Total
	I or the minimum investment	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	return from Part X for each year listed							
L							1	
							· · · · · · ·	
	Qualifying distributions from Part XII, line 4 for each year listed			ļ				
d	Amounts included in line 2c not used directly for active conduct of exempt activities						ļ	
е	Qualifying distributions made	-					Ì	
	directly for active conduct of exempt activities Subtract line 2d from line 2c			}				
3	Complete 3a, b, or c for the							
я	alternative test relied upon "Assets" alternative test - enter			1				
_	(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 invest-	ľ			1		ľ	
	ment return shown in Part X, line 6 for each year listed							
	"Support" alternative test - enter							<u>-</u>
	(1) Total support other than						1	
	gross investment income (interest, dividends, rents,				j		ļ	
	payments on securities loans (section 512(a)(5)),							
	or royalties)		<u> </u>		<u> </u>			
	(2) Support from general public and 5 or more						ĺ	
	exempt organizations as						ļ	
	provided in section 4942 (j)(3)(B)(iii)							
	(3) Largest amount of support from an exempt organization.							
	(4) Gross investment income						f	
ar		ary Information (Co during the year - see		only if the foun	dation had	\$5,000	or mor	e in assets
	Information Regarding I			<del></del>				
а	List any managers of th before the close of any t	e foundation who ha ax year (but only if the	ve contributed mor y have contributed r	e than 2% of the to nore than \$5,000). (\$	tal contributio See section 50	ns receiv )7(d)(2).)	ed by th	e foundation
	N/A			<u></u>				
	List any managers of the ownership of a partnersh					n equall	y large p	ortion of the
	N7 / 74							
	N/A Information Regarding (	Contribution, Grant G	ift, Loan, Scholarshi	p. etc., Programs:		<del> </del>	<del></del>	
					ritabla arma	antions :	مصطاحة=	not
	Check here $\blacktriangleright X$ if the unsolicited requests for	funds, if the foundat	akes contributions ion makes gifts, gra	nts, etc. (see instru	ctions) to ind	zacions a ividuals d	ina aoes ir organiz	not accept ations unde

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 Durin Recipient Name and address (home or business)	g the Year or Appr	oved for F	uture Payment	<del>, ···</del>
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		<del> </del>
a Paid during the year				
SEE STATEMENT 12				60,000.
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Total		· · · · · · · ·	▶ 3a	60,000.
<b>b</b> Approved for future payment				
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				-
			<del> </del>	
Total	<u> </u>	<u></u>		_

Part XVI-A Analysis of Income-Pro	ducing Acti	vities			
Enter gross amounts unless otherwise indicated.	Unrel	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
1 Program service revenue:	Business code	Amount	EXCUSION CODE		(See instructions.)
a b	_		<del> </del>		
b	L	<u> </u>	<del></del>		
d	i				
8	4				
f					· · · · · · · · · · · · · · · · · · ·
g Fees and contracts from government agencie.	б		<b> </b>		
2 Membership dues and assessments			<u> </u>		· <del></del>
3 Interest on savings and temporary cash investments			<del> </del>	00 120	
4 Dividends and interest from securities	•		14	28,438.	
5 Net rental income or (loss) from real estate					
a Debt-financed property			<del></del>	<del></del>	
<b>b</b> Not debt-financed property	1		<del></del>		
6 Net rental income or (loss) from personal property			<del> </del>		
7 Other investment income			18	149,293.	
8 Gain or (loss) from sales of assets other than invento	-		10	143,233.	
9 Net income or (loss) from special events	ı	<del></del>			
10 Gross profit or (loss) from sales of inventory.			<del></del>		····
11 Other revenue: ab	,		<del> </del>		
<del></del>			<del> </del>		
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				177,731.	
13 Total. Add line 12, columns (b), (d), and (e)					177,731.
(See worksheet in line 13 instructions to verify ca					
Part XVI-B Relationship of Activitie	s to the Ac	complishment of Ex	cempt Purp	oses	
Line No. Explain below how each active	vity for which	n income is reported	in column (e	e) of Part XVI-A contribu	ted importantly to the
▼ accomplishment of the founda	tion's exemp	t purposes (other than	by providing	funds for such purposes	s). (See instructions.)
			<del></del>	<del></del>	<del></del>
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JSA 4E1492 1 000

Form 99	0-PF (2						35-19 <u>7</u> 03					ge <b>13</b>
Part		Exempt Orga	nizations	ansfers To and Tr						chari		
iı	n sect	e organization direct ion 501(c) of the Co zations?	tly or indirectly ode (other than	engage in any of the section 501(c)(3) orga	following anizations	g with an s) or in s	y other org ection 527,	anization relating t	described o political		Yes	No
			g foundation to	a noncharitable exem	pt organi	zation of:						
		· · · · · · · · · · · · · · · · · · ·	_							1a(1)	ļ	Х
•	-									1a(2)	ļ	X
		ransactions:										v
-				npt organization							T	X
				de exempt organization assets						1b(3)	T	X
										$\overline{}$		X
				· · · · · · · · · · · · · · · · · · ·								X
		-		or fundraising solicita								_X
				ts, other assets, or paid							<u> </u>	X
v	alue d	of the goods, other	assets, or servi	s," complete the follo ces given by the repo Jement, show in colur	orting fou	ındation.	If the found	dation red	eived less	than	fair m	narket
(a) Line		(b) Amount involved		oncharitable exempt organiz			ription of trans					
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	$\perp$											
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							·					
		·	-	iliated with, or related				_		<b>-</b> 7		a
		ed in section 501(c) "complete the follov		her than section 501(c	c)(3)) or i	n section	52//	• • • • •	l	Y	es 🔼	Я ио
<u> </u>	168,	(a) Name of organization		(b) Type of organ	nization			(c) Descript	on of relation:	hip		
		<del></del>					<del></del>		<del> </del>			
				ned this return, including accommodayer) is based on all information				to the best of	of my knowledg	e and b	odief, it	is true,
Sign	$  \triangleright \gamma  $	Kun- Adm	ms. Art	7/7/15		AV			May the IRS			return below
Here	Sign	ature of officer or trustee		Date		Title		<del></del>	(see instruction	· -	Yes [	No
	L	Print/Type preparer's na	me	Preparer's signature			Date	Che	ock if F	TIN		
Paid							<u> </u>	4	employed			
Prepa		Firm's name						Firm's EIN	<b>&gt;</b>			
Use C	nly	Firm's address		<del></del>					- · <del></del>			
								Рнопе по.	<del></del>		- F-	
									For	m 996	ローピト	(2014)

FORM 990PF, PART I - TAXES 

> REVENUE AND **EXPENSES** PER BOOKS 448. 2,900.

FOREIGN TAXES FEDERAL TAX PAYMENT - PRIOR YE

DESCRIPTION

TOTALS 3,348. =========

FORM 990PF, PART II - CORPORATE STOCK

ENDING FMV 	62,369. 53,294. 31,441. 47,273. 38,920. 267,708. 23,924. 43,665. 56,272. 50,976. 118,200. 123,324. 20,992. 20,266. 20,266.
ENDING BOOK VALUE	47,592. 27,325. 29,389. 51,729. 14,899. 252,584. 22,886. 29,255. 59,315. 29,754. 114,105. 95,725. 20,000. 20,000. 22,425.
	TOTALS
DESCRIPTION	DODGE & COX INTERNATIONAL FMI LARGE CAP FUND GATEWAY FUND ISHARES MSCI EAFE ETF ISHARES RUSSELL 1000 GROWTH ISHARES RUSSELL 2000 ETF ISHARES RUSSELL 2000 ETF NEUBERGER BER MU/C OPP OAKWARK INTERNATIONAL PRIMECAP ODYSSEY STOCK FUND SPDR S&P DIVIDEND ETF SPDR S&P DIVIDEND ETF STATTON SMALL CAP VALUE FD T ROWE PRICE MIDCAP GROWTH VANGUARD EMERGING MARKETS ETF

480100239

7

STATEMENT

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STATEMENT

ENDING BOOK VALUE	.986,9	12,8/1.	32,315.	39,294,	.000,06	20,000.	50,000
DESCRIPTION	BARCLAYS BANK MTN Z CPN	BLACKROCK STRAT INC OPPS	EATON VANCE FLIG RATE ADV FEDERATED HIGH YID ROND	JP MORGAN SHORT DURAT BOND	METROPOLITAN WEST TOTAL RETURN	TEMPLETON GLOBAL BOND	VANGUARD S/T INVEST GR-ADM

7,557. 14,830. 19,804. 31,988. 9,537. 39,987. 90,500.

ENDING FMV 282,667.

281,466.

TOTALS

FORM 990PF, PART II - OTHER INVESTMENTS

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ENDING FMV

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41,594.

41,594.

41,594.

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FEDERATED TREASURY OBLIGATION

DESCRIPTION

TOTALS

41,594.

21

STATEMENT

# FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION	AMOUNT 
1/2/14 EATON VANCE FLTG RATE 1/3/14 DOUBLINE TOTAL RETURN 1/2/14 HARTFORD CAPITAL APPREC 1/2/14 J MORGAN STR INCOME 1/2/14 JP MORGAN SHORT DUR BD INCOME 1/31/14SPDR TR UNIT SERIES 1 COST BASIS ADJ DUE TO TRANSFER 4812A0573	158. 102. 182. 54. 52. 252. 9,981.
TOTAL	10,781.

## FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION	AMOUNT 
ROUNDING DIFFERENCE  1/2/15 EATON VANCE FLTG RATE  1/2/15 FEDERATED HIGH YLD BD  1/2/15 METROPOLITAN WEST TOTAL RETURN  1/2/15 VANGUARD ST/T INVEST  1/31/15 SPDR TR UNIT SERIES 1  1/2/15 BLACKROCK STRAT INC INCOME	4. 139. 49. 146. 78. 681. 35.
TOTAL	1,132.

RECIPIENT NAME: PINE VALLEY EDUCATION FOUNDATION ADDRESS: 3000 PINE VALLEY ROAD SAN RAMON, CA 94583 **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: 6,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: ARC OF MERCER COUNTY ADDRESS: PO BOX 137 CELINA, OH 45822 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: INTERNATIOANL FRIENDSHIPS ADDRESS: 2500 N HIGH STREET, SUITE 200 COLUMBUS, OH 43202 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

1,000.

RECIPIENT NAME:

Harbor Life Ministries

ADDRESS:

P.O. BOX 502

Norwalk, OH 44857

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

PACE CENTER

MERCER COUNTY FAIR

ADDRESS:

1001 W MARKET STREET

CELINA, OH 45822

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

Hanover College

ADDRESS:

P.O. BOX 108

Hanover, IN 47243-0108

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

THE WILLIAM N AND ELIZABETH A RIETH 35-1970370 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: World Partners ADDRESS: P.O. BOX 9127 Fort Wayne, IN 46899-9127 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 3,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: BRENNEMAN MEMORIAL MISSIONARY CHURCH ADDRESS: 61115 STATE ROAD 15 GOSHEN, IN 46528 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID ..... 2,500. RECIPIENT NAME: GOSHEN BAND BOOSTERS ADDRESS: PO BOX 1076 Goshen, IN 46527 **RELATIONSHIP:** NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID ......

FOUNDATION STATUS OF RECIPIENT:

GENERAL

PUBLIC CHARITY

1,500.

THE WILLIAM N AND ELIZABETH A RIETH 35-1970370 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: GOSHEN COLLEGE ADDRESS: 1700 S MAIN ST Goshen, IN 46526 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ...... 3,500. RECIPIENT NAME: International Health & Development Network ADDRESS: 3950 MILL STONE DRIVE Springfield, IL 62707 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ...... 500. RECIPIENT NAME: CHROMATICA ADDRESS: C/O DAVIE SUTTON CONCORD, CA 94518 **RELATIONSHIP:** NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID ......

480100239

NONE

CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT:

3,000.

THE WILLIAM N AND ELIZABETH A RIETH

35-1970370
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

FRIENDS OF ST. JOHN'S LUTHERAN CHURCH

ADDRESS:

23280 COUNTY ROAD 32

GOSHEN, IN 46526

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NON

RECIPIENT NAME:

MONTEVIDEO EDUCATION FOUNDATION

ADDRESS:

MONTEVIDEO ELEMENTARY SCHOOL

SAN RAMON, CA 94583

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

In Network

ADDRESS:

10432 CHICAGO DRIVE, SUITE 2

Zeeland, MI 49464

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

 THE WILLIAM N AND ELIZABETH A RIETH 35-1970370 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
Willamette University
ADDRESS:
900 STATE ST.
SALEM, OR 97301
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL
FOUNDATION STATUS OF RECIPIENT:

RECIPIENT NAME:
OUTREACH MINISTRY - EQUIPNET
ADDRESS:
21 VOLTERRA COURT
DANVILLE, CA 94526
AMOUNT OF GRANT PAID

RECIPIENT NAME:
CRU U S MINISTRY
ADDRESS:
100 LSKE HART DRIVE
ORLANDO, FL 32832
AMOUNT OF GRANT PAID

TOTAL GRANTS PAID:

60,000.

#### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

OMB No. 1545-0092

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

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041 **Employer identification number** 

35-1970370 THE WILLIAM N AND ELIZABETH A RIETH Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on (h) Gain or (loss) Subtract column (e) Adjustments (d) the lines below. (e) Proceeds to gain or loss from from column (d) and Form(s) 8949, Part I, (or other basis) combine the result with This form may be easier to complete if you round off cents (sales price) line 2, column (g) column (a) to whole dollars. 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b. 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 290,607. 278,965. 11,642 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . . . 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . . . . . . Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2013 Capital Loss 6 Net short-term capital gain or (loss), Combine lines 1a through 6 in column (h). Enter here and on 11,642 Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) Adjustments Subtract column (e) the lines below. (d) to gain or loss from Form(s) 8949, Part II. from column (d) and Proceeds Cost This form may be easier to complete if you round off cents (sales price) (or other basis) combine the result with column (g) line 2. column (a) to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 535,163. 418,364. 116,799. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . 11 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. . . . . . . 12 20,852 14 14 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2013 Capital Loss 15 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on 137.651

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

Schedule D (Form 1041) 2014

Sche	dule D (Form 1041) 2014				Page 2
	t    Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this pa	$\overline{}$	(see instr.)	or trust's	11 510
17	Net short-term gain or (loss)	17		ļ	11,642.
18	Net long-term gain or (loss):	l			120 664
	Total for year	18a			137,651.
	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b			
	28% rate gain	18c			110 000
	Total net gain or (loss). Combine lines 17 and 18a	19		1.1.15.1	149,293.
Vote gain:	e: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 s, go to Part V, and <mark>do not</mark> complete Part IV. If line 19, column (3), is a n	(or Fo et loss	rm 990-1, Part I, line s, complete Part IV a	4a). If lines 18a and nd the <b>Capital Loss</b> C	19, column (2), are ne a <mark>rryover Worksheet,</mark> a
	ssary		<del></del>		
_	t IV Capital Loss Limitation  Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Po	ort I lu		maller of:	
20 a	The loss on line 19, column (3) or b \$3,000			20 (	
Vote	: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041,	page	1, line 22 (or Form 9	90-T, line 34), is a los	s, complete the Capita
	Carryover Worksheet in the instructions to figure your capital loss carryover.				
_	t V Tax Computation Using Maximum Capital Gains Rate			<del></del>	
	n 1041 filers. Complete this part only if both lines 18a and 19 in colu		- ·	amount is entered i	n Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor				
	tion: Skip this part and complete the <b>Schedule D Tax Worksheet</b> in the in ther line 18b, col. (2) or line 18c, col. (2) is more than zero, or	nstruc	uons II:		
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
	n 990-T trusts. Complete this part only if both lines 18a and 19 at	re dai	ns or qualified div	idends are included	l in income in Part
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part				
	her line 18b, col. (2) or line 18c, col. (2) is more than zero.		p		
	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3-	۸۱	21	<del>- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-</del>	<del></del>
:1	Enter the smaller of line 18a or 19 in column (2)	+/	'   21		
22	· · ·		`		
	but not less than zero		<del> </del>	1 1	
23	Enter the estate's or trust's qualified dividends			.	
	from Form 1041, line 2b(2) (or enter the qualified		.	.	-
	dividends included in income in Part I of Form 990-T) 23		<del>_</del> -	1 1	
4	Add lines 22 and 23				
25	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g; otherwise, enter -0 ▶ 25		<b> </b>		
6	Subtract line 25 from line 24. If zero or less, enter -0-				
27	Subtract line 26 from line 21. If zero or less, enter -0				
28	Enter the smaller of the amount on line 21 or \$2,500		<del></del>		
9	Enter the smaller of the amount on line 27 or line 28				
0	Subtract line 29 from line 28. If zero or less, enter -0 This amount is		1 1	▶ 30	
1	Enter the smaller of line 21 or line 26		. 31		
2	Subtract line 30 from line 26				
3	Enter the smaller of line 21 or \$12,150		33		
4	Add lines 27 and 30				•
5	Subtract line 34 from line 33. If zero or less, enter -0		35		
6	Enter the smaller of line 32 or line 35	·	36		
7	Multiply line 36 by 15%			▶ 37	···
8	Enter the amount from line 31		38		
9	Add lines 30 and 36		39		
0	Subtract line 39 from line 38. If zero or less, enter -0		40		
1	Multiply line 40 by 20%	<b>.</b> .	• • • • • • • • • • • • • • • • • • • •	▶ 41	
2	Figure the tax on the amount on line 27. Use the 2014 Tax Rate Schedule for E	states			
	and Trusts (see the Schedule G instructions in the instructions for Form 1041) .		42		
3	Add lines 37, 41, and 42		43		
4	Figure the tax on the amount on line 21. Use the 2014 Tax Rate Schedule for E				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041) .		44		
_	Tay on all tayable income. Enter the smaller of line 42 or line 44 h			Sahadula	

G, line 1a (or Form 990-T, line 36) . . . . . .

## Form 8949

### Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

20**14** 

ttachment

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return
THE WILLIAM N AND BLIZABETH A RIETH

Social security number or taxpayer identification number

35-1970370

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments your bought in 2014 or later).

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
  - (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- X (C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	acquired Date sold or	(d) Proceeds	(e) Cost or other basis See the	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss). Subtract column (e)		
(Example. 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed (Mo., day, yr.)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) (g) Code(s) from Amount of adjustment		from column (d) and combine the result with column (g)	
690.156 INV BALANCED-RISK	01/14/2013	01/13/2014	8,254.00	8,689.00			-435.00	
961.293 PIMCO COMMODITYPL	02/04/2013	==	10,084.00	10,949.00			-865.00	
223.13 DELAWARE EMERGING M FUND-INST	06/18/2013		3,436.00	3,204.00			232.00	
1042.154 INV BALANCED-RISK	08/01/2013		12,725.00	13,100.00			-375.00	
5337.625 CAPITAL PRIVATE C	10/29/2013	05/08/2014	63,304.00	59,854.00		-	3,450.00	
3572.467 JPMORGAN GL RES E	02/11/2014	05/08/2014	65,090.00	59,378.00			5,712.00	
792.206 PIMCO COMMODITYPL	02/11/2014	05/08/2014	8,960.00	8,492.00			468.00	
400. ISHARES MSCI EAFE ETF	10/29/2013	07/30/2014	27,127.00	26,587.00			540.00	
433. VANGUARD MSCI EUROPE	03/18/2014	07/30/2014	25,373.00	25,283.00			90.00	
1294.577 BROWN ADV JAPAN A	03/07/2014	10/20/2014	13,075.00	12,946.00			129.00	
2396.461 EQUINOX CAMPBELL	10/29/2013	10/20/2014	26,673.00	25,139.00			1,534.00	
1970.743 GOTHAM ABSOLUTE R	01/13/2014	10/20/2014	26,506.00	25,344.00			1,162.00	
2 Totals. Add the amounts in colum act negative amounts). Enter ear your Schedule D, line 1b (if Box A Box B above is checked), or line 3	ch total here and A above is checke	i include on d), line 2 (if	290,607.	278,965.			11,642.	

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions. JSA 4X2615 2.000

Form 8949 (2014)

Page

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

THE WILLIAM N AND ELIZABETH A RIETH

Social security number or taxpayer identification number

35-1970370

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report-these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	te acquired Date sold or	(d) Proceeds (sales price)	(e) Cost or other basis. See the	Adjustment, if if you enter an a enter a coo See the sepa	(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example. 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	yr.) (see instructions) see Column (e) (f) (g) Code(s) from Amount of		(g) Amount of adjustment	combine the result with column (g)	
1111.03 INV BALANCED-RISK	00/10/0010	01 (10 (001)	12 000 00	14 140 00			242.40
1020.537 JPMORGAN INTL CUR	09/18/2012	01/13/2014	13,288.00	14,148.00			-860.00
1020.537 DEMONGAN INTO COR	10/08/2012	01/15/2014	11,236.00	11,482.00			-246.00
. WORTHLESS SECURITY - ENR						<del>.</del>	
WRITE OFF DATE 12/21/20	ļ	01/16/2014	24.00				24.00
. WORLDCOM INC-MCI GROUP		01/23/2014	9.00				9.00
12000. GS CONT BUFF EQ SPX		<u> </u>					7.00
	01/11/2013	01/29/2014	13,800.00	11,880.00			1,920.00
668.365 COLUMBIA ASIA PACI R5	02/04/2013	02/11/2014	8,742.00	8,789.00			-47.00
620.673 DELAWARE EMERGING			-				
FUND-INST	02/04/2013	02/11/2014	9,558.00	8,013.00			1,545.00
1545.59 PIMCO COMMODITYPL	02/04/2013	03/07/2014	17,218.00	17,604.00			-386.00
874.823 T ROWE PRICE NEW A	,,						
	10/10/2011	03/07/2014	14,111.00	12,215.00			1,896.00
12000. DEUTSCHE BK LOND MT							
3/19/14	09/14/2012	03/19/2014	13,897.00	11,850.00			2,047.00
12000. HSBC BREN MXEA 3/19	03/01/2013	03/19/2014	13,269.00	11,880.00			<u>1,</u> 389.00
10000. SG BRENT CBEN 3/24/	03/02/2023	<u> </u>	23,203,00	22/002.00			17505.00
<u> </u>	03/08/2013	03/24/2014	11,045.00	9,900.00			1,145.00
12000. BARC BREN MXEA 04/1	03/28/2013	04/16/2014	13,188.00	11,880.00			1,308.00
36.85 INV BALANCED-RISK AL	03/20/2013	01/10/2011	13/100:00	11,000.00			1,300.00
	01/14/2013	05/08/2014	450.00	464.00			-14.00
2 Totals. Add the amounts in col (subtract negative amounts). El include on your Schedule D, lir checked), line 9 (if Box E above (if Box F above is checked) ▶	here and above is or <b>line 10</b>	25 was incorrect				IDC	

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2014)

FAT586 A491

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

THE WILLIAM N AND ELIZABETH A RIETH

35-1970370

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired		(d) Proceeds	(e) Cost or other basis. See the	Adjustment, if If you enter an a enter a coo See the sepa	(h) Gain or (loss). Subtract column (e) from column (d) and		
(Example. 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)	
1579.941 EDGEWOOD GROWTH F	01/06/2011	05/08/2014	29,371.00	18,201.00			11,170.00	
1164.114 ARTISAN INTL VALU	01/31/2011	05/08/2014	43,759.00	31,757.00			12,002.00	
993.935 JPMORGAN INTL VALU	08/11/2011		15,237.00	13,517.00			1,720.00	
3205.791 JPMORGAN US EQUIT	05/30/2012		45,490.00	30,117.00			15,373.00	
342.99 JP MORGAN INTREPID	10/10/2011		12,262.00	5,998.00			6,264.00	
506.797 PIMCO COMMODITYPL	02/04/2013	05/08/2014	5,732.00	5,772.00			-40.00	
2201.787 COLUMBIA ASIA PAC JAPAN R5		10/20/2014	31,177.00	28,480.00	,		2,697.00	
1887.86 DOUBLELINE TOTAL R			20,842.00	21,238.00			-396.00	
733.946 JPMORGAN INTL VALU		10/20/2014	10,033.00	9,981.00			52.00	
618.456 JPMORGAN CHINA REG	01/01/1950		13,142.00	11,293.00			1,849.00	
1651.765 JPMORGAN GROWTH A	01/01/1950		23,075.00	8,540.00			14,535.00	
2127.939 JPMORGAN STR INCO		10/20/2014	25,046.00	22,555.00			2,491.00	
3009.802 JPMORGAN MKT EXPA		10/20/2014	39,127.00	20,000.00			19,127.00	
1350.358 T ROWE PRICE NEW		10/20/2014	23,159.00	17,325.00			5,834.00	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked) >  Note If you checked Box D above but the basis reported to the IBS was incorrect, enter in column (e) the basis as reported to the IBS and enter								

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2014)

FAT586 A491

Attachment Sequence No. 12A Page 2 Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side Social security number or taxpayer identification number THE WILLIAM N AND ELIZABETH A RIETH Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later). Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1. Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions). You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. vou enter an amount in column (g) (e) Gain or (loss). enter a code in column (f). (a) (c) (d) Cost or other See the separate instructions Subtract column (e) Date sold or Proceeds Description of property Date acquired basis. See the from column (d) and (sales price) disposed (Example 100 sh. XYZ Co.) (Mo., day, yr.) Note below and combine the result (g) (Mo., day, yr.) (see instructions) see Column (e) Code(s) from Amount of with column (g) in the separate adjustment instructions instructions 555.732 ASTON FAIRPOINTE M 10/08/2012 | 12/18/2014 26,853.00 18,030.00 8,823.00 827.726 HARTFORD CAPITAL A 06/18/2013 | 12/18/2014 31,023.00 25,455.00 5,568.00

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶

418,364 116,799. Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2014)

FAT586 A491

E

#### Form **8868**

(Rev. January 2014)

Department of the Treasury

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

File a separate application for each return.

Frame and be instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

Internal Revenu										
<ul><li>If you are</li></ul>	filling for an Automatic 3-Month Extension,	complete (	only Part I and check th	is box			!	<u> X</u> ]		
· ·	filing for an Additional (Not Automatic) 3-M		•				269			
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.										
	Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for									
	n required to file Form 990-T), or an additio									
	uest an extension of time to file any of the									
	Transfers Associated With Certain Persona									
instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.  Part 1 Automatic 3-Month Extension of Time. Only submit original (no copies needed).										
	n required to file Form 990-T and requesting				nle					
-							ı			
All other con	porations (including 1120-C filers), partnershi	ps. REMICs	, and trusts must use Fo	orm 7004 to request an	ext	ensio	n of tin	ne		
to file incom			•	Enter filer's identifying						
	Name of exempt organization or other filer, see in	structions.		Employer identification nu	ımb	er (EIN	l) or			
Type or	THE WILLIAM N AND ELIZABETH	A RIETH	[							
print	CHARITABLE FOUNDATION 480100	239		35-19	70	370				
File by the	Number, street, and room or suite no. If a P.O. box		tions.	Social security number (S						
due date for filing your	P.O. BOX 1602									
return. See instructions.	City, town or post office, state, and ZIP code. For	a foreign add	dress, see instructions.							
	SOUTH BEND, IN 46634			<u> </u>						
Enter the Re	turn code for the return that this application i	s for (file a	separate application for	r each return)			L	0 4		
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Application		Return	Application				_	eturn		
Is For		Code	Is For	<del></del>				ode		
	Form 990-EZ	01	Form 990-T (corporati	on)				07		
Form 990-BL		02	Form 1041-A					08		
Form 4720 (	<del></del>	03	Form 4720 (other than	n individual)				09		
Form 990-PF		04	Form 5227					10		
	(sec. 401(a) or 408(a) trust)	06	05 Form 6069					11		
roim 990-i	(trust other than above)		Form 8870	<del></del>				12		
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for the	organization's return for:									
►X	calendar year 2014 or									
▶	tax year beginning	, 20	, and ending	,	20					
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	application is for Form 990-BL, 990-PF, 99	ю-т, 4720	, or 6069, enter the 1	tentative tax, less any		1	_			
	indable credits. See instructions.	4700	COCO	f 1-1.1 Ps 1	3a	\$	1_,	<u>728.</u>		
	application is for Form 990-PF, 990-T,						1	<b>600</b>		
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	nic Federal Tax Payment System). See instru		and lorin, if let	dence, by dainy ti fro	3с			30.		
	are going to make an electronic funds withdrawal		t) with this Form 8868, se	e Form 8453-EO and Form			for nav			
instructions.		,			. 55		.u. pu			
	t and Paperwork Reduction Act Notice, see instr	uctions.		<del></del>	Forr	n 886	8 (Rev.	1-2014)		