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## Return of Private Foundation

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

OMB No 1545-0052

2014

Department of the Treasury  
Internal Revenue ServiceDo 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](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2014 or tax year beginning

, and ending

Name of foundation  
**CARL MARSHALL REEVES AND MILDRED ALMEN REEVES FOUNDATION, INC.**

Number and street (or P.O. box number if mail is not delivered to street address) Room/suite  
**C/O MARY ANN NUNN, 3435 DUFFER DRIVE**

City or town, state or province, country, and ZIP or foreign postal code  
**COLUMBUS, IN 47203-2714**

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

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

I Fair market value of all assets at end of year (from Part II, col (c), line 16)  
**\$ 15,025,716.** (Part I, column (d) must be on cash basis)

J Accounting method: ☒ Cash ☐ Accrual  
☐ Other (specify) \_\_\_\_\_

A Employer identification number  
**35-2026200**

B Telephone number  
**812-343-1787**

C If exemption application is pending, check here ☐

D 1 Foreign organizations, check here ☐  
2 Foreign organizations meeting the 85% test, check here and attach computation ☐

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

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<br>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) |                                                                                             | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| 1                                                                                                                                                  | Contributions, gifts, grants, etc., received                                                |                                    |                           | N/A                     |                                                             |
| 2                                                                                                                                                  | Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B |                                    |                           |                         |                                                             |
| 3                                                                                                                                                  | Interest on savings and temporary cash investments                                          | 22,584.                            | 22,584.                   |                         | STATEMENT 1                                                 |
| 4                                                                                                                                                  | Dividends and interest from securities                                                      | 372,532.                           | 372,532.                  |                         | STATEMENT 2                                                 |
| 5a                                                                                                                                                 | Gross rents                                                                                 |                                    |                           |                         |                                                             |
| b                                                                                                                                                  | Net rental income or (loss)                                                                 |                                    |                           |                         |                                                             |
| 6a                                                                                                                                                 | Net gain or (loss) from sale of assets not on line 10                                       | 38,821.                            |                           |                         |                                                             |
| b                                                                                                                                                  | Gross sales price for all assets on line 6a                                                 | 723,126.                           |                           |                         |                                                             |
| 7                                                                                                                                                  | Capital gain net income (from Part IV, line 2)                                              |                                    | 38,821.                   |                         |                                                             |
| 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                                                               | 433,937.                           | 433,937.                  |                         |                                                             |
| 13                                                                                                                                                 | Compensation of officers, directors, trustees, etc                                          | 2,000.                             | 0.                        |                         | 2,000.                                                      |
| 14                                                                                                                                                 | Other employee salaries and wages                                                           |                                    |                           |                         |                                                             |
| 15                                                                                                                                                 | Pension plans, employee benefits                                                            |                                    |                           |                         |                                                             |
| 16a                                                                                                                                                | Legal fees                                                                                  |                                    |                           |                         |                                                             |
| b                                                                                                                                                  | Accounting fees STMT 3                                                                      | 2,300.                             | 0.                        |                         | 2,300.                                                      |
| c                                                                                                                                                  | Other professional fees STMT 4                                                              | 47,352.                            | 47,352.                   |                         | 0.                                                          |
| 17                                                                                                                                                 | Interest                                                                                    |                                    |                           |                         |                                                             |
| 18                                                                                                                                                 | Taxes STMT 5                                                                                | 15,999.                            | 15,999.                   |                         | 0.                                                          |
| 19                                                                                                                                                 | Depreciation and depletion                                                                  |                                    |                           |                         |                                                             |
| 20                                                                                                                                                 | Occupancy                                                                                   |                                    |                           |                         |                                                             |
| 21                                                                                                                                                 | Travel, conferences, and meetings                                                           |                                    |                           |                         |                                                             |
| 22                                                                                                                                                 | Printing and publications                                                                   |                                    |                           |                         |                                                             |
| 23                                                                                                                                                 | Other expenses STMT 6                                                                       | 2,377.                             | 0.                        |                         | 2,377.                                                      |
| 24                                                                                                                                                 | Total operating and administrative expenses. Add lines 13 through 23                        | 70,028.                            | 63,351.                   |                         | 6,677.                                                      |
| 25                                                                                                                                                 | Contributions, gifts, grants paid                                                           | 597,277.                           |                           |                         | 597,277.                                                    |
| 26                                                                                                                                                 | Total expenses and disbursements. Add lines 24 and 25                                       | 667,305.                           | 63,351.                   |                         | 603,954.                                                    |
| 27                                                                                                                                                 | Subtract line 26 from line 12:                                                              |                                    |                           |                         |                                                             |
| a                                                                                                                                                  | Excess of revenue over expenses and disbursements                                           | -233,368.                          |                           |                         |                                                             |
| b                                                                                                                                                  | Net investment income (if negative, enter -0-)                                              |                                    | 370,586.                  |                         |                                                             |
| c                                                                                                                                                  | Adjusted net income (if negative, enter -0-)                                                |                                    |                           | N/A                     |                                                             |

**CARL MARSHALL REEVES AND MILDRED ALMEN**  
**REEVES FOUNDATION, INC.**

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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 | End of year    |                       |
|-----------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-------------|-------------------|----------------|-----------------------|
|                             |                                                                                                      |                                                                                                 |             | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| Assets                      | 1                                                                                                    | Cash - non-interest-bearing                                                                     |             |                   |                |                       |
|                             | 2                                                                                                    | Savings and temporary cash investments                                                          |             | 585,653.          | 61,909.        | 61,909.               |
|                             | 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 STMT 9                                      |             | 1,019,218.        | 1,139,974.     | 1,761,127.            |
|                             | b                                                                                                    | Investments - corporate stock STMT 10                                                           |             | 8,840,676.        | 9,078,774.     | 13,202,680.           |
|                             | c                                                                                                    | Investments - corporate bonds                                                                   |             |                   |                |                       |
|                             | 11                                                                                                   | Investments - land, buildings, and equipment basis ▶                                            |             |                   |                |                       |
|                             | Less: accumulated depreciation ▶                                                                     |                                                                                                 |             |                   |                |                       |
| 12                          | Investments - mortgage loans                                                                         |                                                                                                 |             |                   |                |                       |
| 13                          | Investments - other                                                                                  |                                                                                                 |             |                   |                |                       |
| 14                          | Land, buildings, and equipment: basis ▶                                                              |                                                                                                 |             |                   |                |                       |
|                             | Less: accumulated depreciation ▶                                                                     |                                                                                                 |             |                   |                |                       |
| 15                          | Other assets (describe ▶)                                                                            |                                                                                                 |             |                   |                |                       |
| 16                          | <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) |                                                                                                 | 10,445,547. | 10,280,657.       | 15,025,716.    |                       |
| 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                                                                                                   | <b>Total liabilities</b> (add lines 17 through 22)                                              |             | 0.                | 0.             |                       |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>                              |                                                                                                 |             |                   |                |                       |
|                             | 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 ▶ <input checked="" type="checkbox"/>            |                                                                                                 |             |                   |                |                       |
|                             | and complete lines 27 through 31                                                                     |                                                                                                 |             |                   |                |                       |
|                             | 27                                                                                                   | Capital stock, trust principal, or current funds                                                |             | 1,389,245.        | 1,457,723.     |                       |
|                             | 28                                                                                                   | Paid-in or capital surplus, or land, bldg., and equipment fund                                  |             | 0.                | 0.             |                       |
|                             | 29                                                                                                   | Retained earnings, accumulated income, endowment, or other funds                                |             | 9,056,302.        | 8,822,934.     |                       |
| 30                          | <b>Total net assets or fund balances</b>                                                             |                                                                                                 | 10,445,547. | 10,280,657.       |                |                       |
| 31                          | <b>Total liabilities and net assets/fund balances</b>                                                |                                                                                                 | 10,445,547. | 10,280,657.       |                |                       |

**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<br>(must agree with end-of-year figure reported on prior year's return) | 1 | 10,445,547. |
| 2 | Enter amount from Part I, line 27a                                                                                                                            | 2 | -233,368.   |
| 3 | Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 8                                                                                            | 3 | 68,478.     |
| 4 | Add lines 1, 2, and 3                                                                                                                                         | 4 | 10,280,657. |
| 5 | Decreases not included in line 2 (itemize) ▶                                                                                                                  | 5 | 0.          |
| 6 | <b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30                                                  | 6 | 10,280,657. |

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

b SEE ATTACHED STATEMENT

c

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

b

c

d

e 723,126. 684,305. 38,821.

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

b

c

d

e 38,821.

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 38,821.

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 645,012. 13,506,299. .047756

2012 653,501. 11,808,951. .055339

2011 446,902. 11,030,313. .040516

2010 510,672. 10,234,481. .049897

2009 787,503. 9,598,460. .082045

2 Total of line 1, column (d)

2 .275553

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 .055111

4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5

4 14,622,276.

5 Multiply line 4 by line 3

5 805,848.

6 Enter 1% of net investment income (1% of Part I, line 27b)

6 3,706.

7 Add lines 5 and 6

7 809,554.

8 Enter qualifying distributions from Part XII, line 4

8 603,954.

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.

423521 11-24-14

3

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17120430 793896 018073.01

2014.03040 CARL MARSHALL REEVES AND MT 018073 1

**CARL MARSHALL REEVES AND MILDRED ALMEN  
REEVES FOUNDATION, INC.**

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**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

|                                                                                                                                                                                                                                               |    |        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------|
| <b>1a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions) | 1  | 7,412. |
| <b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b                                                                                      |    |        |
| <b>c</b> All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)                                                                                                              |    |        |
| <b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                            | 2  | 0.     |
| <b>3</b> Add lines 1 and 2                                                                                                                                                                                                                    | 3  | 7,412. |
| <b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                          | 4  | 0.     |
| <b>5 Tax based on investment income</b> Subtract line 4 from line 3. If zero or less, enter -0-                                                                                                                                               | 5  | 7,412. |
| <b>6 Credits/Payments:</b>                                                                                                                                                                                                                    |    |        |
| <b>a</b> 2014 estimated tax payments and 2013 overpayment credited to 2014                                                                                                                                                                    | 6a | 8,480. |
| <b>b</b> Exempt foreign organizations - tax withheld at source                                                                                                                                                                                | 6b |        |
| <b>c</b> Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                                  | 6c |        |
| <b>d</b> Backup withholding erroneously withheld                                                                                                                                                                                              | 6d |        |
| <b>7</b> Total credits and payments. Add lines 6a through 6d                                                                                                                                                                                  | 7  | 8,480. |
| <b>8</b> Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                                                                                             | 8  |        |
| <b>9 Tax due</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>                                                                                                                                                  | 9  |        |
| <b>10 Overpayment</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>                                                                                                                                     | 10 | 1,068. |
| <b>11</b> Enter the amount of line 10 to be: <b>Credited to 2015 estimated tax</b> <span style="float:right">1,068.</span> <b>Refunded</b> <span style="float:right">0.</span>                                                                | 11 |        |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                                      |    | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| <b>1a</b> 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>1b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?<br>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 | 1b |     | X  |
| <b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?                                                                                                                                                                                                                                                                                 | 1c |     | X  |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.<br>(1) On the foundation. <span style="float:right">\$ 0.</span> (2) On foundation managers. <span style="float:right">\$ 0.</span>                                                                                                      |    |     |    |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <span style="float:right">\$ 0.</span>                                                                                                                                                                |    |     |    |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                                | 2  |     | X  |
| <b>3</b> 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  |
| <b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                                | 4a |     | X  |
| <b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?                                                                                                                                                                                                                                                                     | 4b |     |    |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T                                                                                                                                                                          | 5  |     | X  |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• 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   |    |
| <b>7</b> 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   |    |
| <b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <span style="float:right">IN</span>                                                                                                                                                                                                     |    |     |    |
| <b>b</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   |    |
| <b>9</b> 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  |
| <b>10</b> Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and addresses                                                                                                                                                                                                          | 10 |     | X  |

N/A

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REEVES FOUNDATION, INC.**

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**Part 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 |     | 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?<br>Website address ► <u>WWW.CARLANDMILDREDREEVESFOUNDATION.ORG</u>                                                                                                                                                                   | 13 | X   |         |
| 14 | The books are in care of ► <u>MARY ANN NUNN</u> Telephone no. ► <u>(812) 343-1787</u><br>Located at ► <u>3435 DUFFER DRIVE, COLUMBUS, IN</u> ZIP+4 ► <u>47203</u>                                                                                                                                                                                        |    |     |         |
| 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<br>► 15 N/A                                                                                                                                                          |    |     |         |
| 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?<br>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 ► | 16 | Yes | No<br>X |

**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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                             |     |    |
| (2)                                                                                     | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                     |     |    |
| (3)                                                                                     | Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                         |     |    |
| (4)                                                                                     | Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?<br>Organizations relying on a current notice regarding disaster assistance check here<br>N/A                                                                                                                                                                                  | 1b  |    |
| 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>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<br>►                                                                                                                                                                                                                                                                                                                                                                               |     |    |
| 3a                                                                                      | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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  |

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**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)?

N/A

5b

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?

N/A

☐ 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 |
|----------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| SEE STATEMENT 11     |                                                           | 48,352.                                   | 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

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**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 DIRECT SUPPORT TO VARIOUS ORGANIZED CHARITIES.                                                                                                                                                                                                       |          |
|                                                                                                                                                                                                                                                        | 597,277. |
| 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 NONE                                                                                                            |        |
|                                                                                                                   | 0.     |
| 2                                                                                                                 |        |
|                                                                                                                   |        |
| All other program-related investments See instructions                                                            |        |
| 3 NONE                                                                                                            |        |
|                                                                                                                   | 0.     |
|                                                                                                                   | 0.     |
| <b>Total.</b> Add lines 1 through 3                                                                               |        |

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**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 | 14,628,356. |
| b | Average of monthly cash balances                                                                           | 1b | 216,594.    |
| c | Fair market value of all other assets                                                                      | 1c |             |
| d | <b>Total</b> (add lines 1a, b, and c)                                                                      | 1d | 14,844,950. |
| 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  | 14,844,950. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)  | 4  | 222,674.    |
| 5 | <b>Net value of noncharitable-use assets</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5  | 14,622,276. |
| 6 | <b>Minimum investment return</b> Enter 5% of line 5                                                        | 6  | 731,114.    |

**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  | 731,114. |
| 2a | Tax on investment income for 2014 from Part VI, line 5                                                    | 2a | 7,412.   |
| b  | Income tax for 2014. (This does not include the tax from Part VI.)                                        | 2b |          |
| c  | Add lines 2a and 2b                                                                                       | 2c | 7,412.   |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | 3  | 723,702. |
| 4  | Recoveries of amounts treated as qualifying distributions                                                 | 4  | 0.       |
| 5  | Add lines 3 and 4                                                                                         | 5  | 723,702. |
| 6  | Deduction from distributable amount (see instructions)                                                    | 6  | 0.       |
| 7  | <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7  | 723,702. |

**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 | 603,954. |
| 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 | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                 | 4  | 603,954. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b | 5  | 0.       |
| 6 | <b>Adjusted qualifying distributions</b> Subtract line 5 from line 4                                                              | 6  | 603,954. |

**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

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**Part XIII Undistributed Income** (see instructions)

|                                                                                                                                                                            | (a)<br>Corpus | (b)<br>Years prior to 2013 | (c)<br>2013 | (d)<br>2014 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2014 from Part XI, line 7                                                                                                                       |               |                            |             | 723,702.    |
| 2 Undistributed income, if any, as of the end of 2014                                                                                                                      |               |                            |             |             |
| a Enter amount for 2013 only                                                                                                                                               |               |                            | 340,404.    |             |
| 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: ▶ \$ 603,954.                                                                                                   |               |                            |             |             |
| a Applied to 2013, but not more than line 2a                                                                                                                               |               |                            | 340,404.    |             |
| 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                                                                                                                                     |               |                            |             | 263,550.    |
| 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                                                                |               |                            |             | 460,152.    |
| 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                                                                                                                                                         |               |                            |             |             |

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

**NONE**

**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:

**SEE STATEMENT 12**

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

**c** Any submission deadlines:

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

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**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business)                                                | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                      | Amount   |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------|----------|
| a Paid during the year                                                                          |                                                                                                                    |                                      |                                                          |          |
| BARTHOLOMEW CONSOLIDATED SCHOOL CORPORATION<br>1200 CENTRAL AVE<br>COLUMBUS, IN 47201           | NONE                                                                                                               | CHARITABLE                           | EQUIPMENT FOR EARLY LEARNING CENTER                      | 919.     |
| BASCOM PALMER EYE INSTITUTE OF UNIVERSITY OF MIAMI<br>1638 N W 10TH AVE<br>MIAMI, FL 33145      | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION OF THE EYE RESEARCH STUDY           | 17,374.  |
| COLUMBUS AREA ARTS COUNCIL<br>300 WASHINGTON STREET<br>COLUMBUS, IN 47201                       | NONE                                                                                                               | CHARITABLE                           | PROFESSIONAL ARTIST FEE FOR COMMUNITY ARTS               | 8,000.   |
| COLUMBUS PHILHARMONIC<br>315 FRANKLIN ST<br>COLUMBUS, IN 47201                                  | NONE                                                                                                               | CHARITABLE                           | SCHOLARSHIPS, INSTRUMENTS, TEACHERS, MUSICIAN FEES       | 10,000.  |
| COLUMBUS REGIONAL SHELTER FOR VICTIMS OF DOMESTIC VIOLENCE<br>P O BOX 103<br>COLUMBUS, IN 47201 | NONE                                                                                                               | CHARITABLE                           | SPECIAL OUTINGS AND ACTIVITIES FOR VICTIMIZED CHILDREN   | 3,457.   |
| Total                                                                                           |                                                                                                                    |                                      | SEE CONTINUATION SHEET(S)                                | 597,277. |
| b Approved for future payment                                                                   |                                                                                                                    |                                      |                                                          |          |
| IUPUC<br>4601 CENTRAL AVENUE<br>COLUMBUS, IN 47201                                              | NONE                                                                                                               | CHARITABLE                           | FURNITURE, FIXTURES, AND EQUIPMENT FOR RENOVATION OF LAB | 49,910.  |
| BARTHOLOMEW CONSOLIDATED SCHOOL CORPORATION<br>1200 CENTRAL AVE<br>COLUMBUS, IN 47201           | NONE                                                                                                               | CHARITABLE                           | EQUIPMENT FOR EARLY LEARNING CENTER                      | 850.     |
| COLUMBUS REGIONAL SHELTER FOR VICTIMS OF DOMESTIC VIOLENCE<br>P O BOX 103<br>COLUMBUS, IN 47202 | NONE                                                                                                               | CHARITABLE                           | SPECIAL ACTIVITIES AND OUTINGS FOR VICTIMIZED CHILDREN   | 4,000.   |
| Total                                                                                           |                                                                                                                    |                                      | SEE CONTINUATION SHEET(S)                                | 608,855. |

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**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>• Name and address (home or business)                                                               | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                                                            | Amount   |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------------|----------|
| DUKE EYE CENTER<br>2351 ERWIN RD<br>DURHAM, NC 27710                                                             | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 40,000.  |
| FOUNDATION FOR YOUTH<br>405 HOPE AVENUE<br>COLUMBUS, IN 47201                                                    | NONE                                                                                                               | CHARITABLE                           | REAL ESTATE ACQUISITION<br>COSTS                                                               | 14,018.  |
| KIDSCOMMONS<br>309 WASHINGTON STREET<br>COLUMBUS, IN 47201                                                       | NONE                                                                                                               | CHARITABLE                           | EXHIBIT<br>MATERIALS/PROGRAMS AND<br>CURRICULA EDUCATIONAL<br>MATERIALS IN CHILDRENS<br>MUSEUM | 7,100.   |
| STORM EYE INSTITUTE, UNIVERSITY OF<br>SOUTH CAROLINA<br>167 ASHLEY AVE<br>CHARLESTON, SC 29425                   | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 30,000.  |
| UNIVERSITY OF UTAH MORAN EYE CENTER<br>65 MARIO CAPECCHI DRIVE<br>SALT LAKE, UT 84132                            | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 93,462.  |
| UNIVERSITY OF WISCONSIN - DEPT OF<br>OPHTHALMOLOGY & VISUAL SCIENCES<br>1300 UNIVERSITY AVE<br>MADISON, WI 53706 | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 50,000.  |
| VANDERBILT UNIVERSITY<br>2311 PIERCE AVENUE<br>NASHVILLE, TN 37232                                               | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 30,000.  |
| VOLUNTEERS IN MEDICINE<br>836 JACKSON ST<br>COLUMBUS, IN 47201                                                   | NONE                                                                                                               | CHARITABLE                           | DIABETES TESTING -<br>MEDICAL SUPPLIES AND<br>EQUIPMENT                                        | 8,840.   |
| WASHINGTON UNIVERSITY<br>660 SOUTH EUCLID AVENUE<br>ST LOUIS, MO 63110                                           | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 122,287. |
| ATTERBURY BAKALAR MUSEUM<br>4772 RAY BOLL BLVD<br>COLUMBUS, IN 47203                                             | NONE                                                                                                               | CHARITABLE                           | EXHIBIT DISPLAYS FOR<br>MUSEUM                                                                 | 10,000.  |
| Total from continuation sheets                                                                                   |                                                                                                                    |                                      |                                                                                                | 557,527. |

CARL MARSHALL REEVES AND MILDRED ALMEN  
REEVES FOUNDATION, INC.

35-2026200

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

| Recipient<br>Name and address (home or business)                         | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                                                 | Amount  |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------|---------|
| COLUMBUS CHILD CARE CENTER<br>903 MCCLURE ROAD<br>COLUMBUS, IN 47201     | NONE                                                                                                               | CHARITABLE                           | SECURITY EQUIPMENT                                                                  | 456.    |
| HEALTHY LIFESTYLES<br>2400 E 17TH ST<br>COLUMBUS, IN 47201               | NONE                                                                                                               | CHARITABLE                           | EQUIPMENT TO HELP<br>MANAGE CHRONIC<br>CONDITIONS RELATING TO<br>REACH PROGRAM      | 3,341.  |
| MILL RACE CENTER<br>900 LINDSEY STREET<br>COLUMBUS, IN 47201             | NONE                                                                                                               | CHARITABLE                           | DIGITAL MESSAGE BOARD<br>SYSTEM                                                     | 10,000. |
| SU CASA OF COLUMBUS<br>1531 13TH ST<br>COLUMBUS, IN 47201                | NONE                                                                                                               | CHARITABLE                           | COMPUTER EQUIPMENT,<br>PROJECTOR AND RELATED<br>LEARNING MATERIALS AND<br>EQUIPMENT | 1,478.  |
| UNIVERSITY OF TEXAS<br>301 UNIVERSITY BLVD<br>GALVESTON, TX 77555        | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                | 25,000. |
| HOSPICE OF SOUTH CENTRAL INDIANA<br>2626 E 17TH ST<br>COLUMBUS, IN 47201 | NONE                                                                                                               | CHARITABLE                           | HOSPICE CARE FACILITY                                                               | 100.    |
| COLUMBUS PARK FOUNDATION<br>P O BOX 858<br>COLUMBUS, IN 47202            | NONE                                                                                                               | CHARITABLE                           | RESTORATION OF<br>HAMILTON CENTER                                                   | 50,000. |
| LINCOLN CENTRAL NEIGHBORHOOD<br>1039 SYCAMORE ST<br>COLUMBUS, IN 47201   | NONE                                                                                                               | CHARITABLE                           | TRANSITIONING SMALL<br>THEATER TO DIGITAL                                           | 50,000. |
| CENTRAL MIDDLE SCHOOL<br>725 7TH ST<br>COLUMBUS, IN 47201                | NONE                                                                                                               | CHARITABLE                           | TIMPANI FOR SCHOOL<br>BAND                                                          | 11,445. |
| Total from continuation sheets                                           |                                                                                                                    |                                      |                                                                                     |         |

CARL MARSHALL REEVES AND MILDRED ALMEN  
REEVES FOUNDATION, INC.

35-2026200

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

| Recipient<br>Name and address (home or business)                                                             | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                                                            | Amount   |
|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------------|----------|
| FOUNDATION FOR YOUTH<br>405 HOPE AVENUE<br>COLUMBUS, IN 47201                                                | NONE                                                                                                               | CHARITABLE                           | REAL ESTATE ACQUISITION<br>COSTS                                                               | 30,000.  |
| FOUNDATION FOR YOUTH<br>405 HOPE AVENUE<br>COLUMBUS, IN 47201                                                | NONE                                                                                                               | CHARITABLE                           | REPAIR AND RENNOVATION<br>OF DAM PROJECT                                                       | 30,000.  |
| KIDSCOMMONS<br>309 WASHINGTON STREET<br>COLUMBUS, IN 47201                                                   | NONE                                                                                                               | CHARITABLE                           | EXHIBIT<br>MATERIALS/PROGRAMS AND<br>CURRICULA EDUCATIONAL<br>MATERIALS IN CHILDRENS<br>MUSEUM | 30,000.  |
| UNIVERSITY OF UTAH MORAN EYE CENTER<br>65 MARIO CAPECCHI DRIVE<br>SALT LAKE, UT 84132                        | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 60,000.  |
| UNIVERSITY OF WISCONSIN - DEPT OF<br>OTHAIMOLOGY & VISUAL SCIENCES<br>1500 HIGHLAND AVE<br>MADISON, WI 53719 | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 55,122.  |
| VOLUNTEERS IN MEDICINE<br>836 JACKSON ST<br>COLUMBUS, IN 47201                                               | NONE                                                                                                               | CHARITABLE                           | DIABETES TESTING -<br>MEDICAL SUPPLIES AND<br>EQUIPMENT                                        | 13,652.  |
| WASHINGTON UNIVERSITY<br>660 SOUTH EUCLID AVENUE<br>ST LOUIS, MO 63110                                       | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 170,654. |
| TUFTS MEDICAL CENTER<br>800 WASHINGTON ST, BOX #231<br>BOSTON, MA 02111                                      | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 100,000. |
| WILLS EYE HOSPITAL<br>840 WALNUT ST<br>PHILADELPHIA, PA 19107                                                | NONE                                                                                                               | CHARITABLE                           | MACULAR DEGENERATION<br>OF THE EYE RESEARCH<br>STUDY                                           | 14,667.  |
| COLUMBUS PARK FOUNDATION<br>P O BOX 858<br>COLUMBUS, IN 47202                                                | NONE                                                                                                               | CHARITABLE                           | RESTORATION OF<br>HAMILTON CENTER                                                              | 50,000.  |
| Total from continuation sheets                                                                               |                                                                                                                    |                                      |                                                                                                | 554,095. |

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

| Enter gross amounts unless otherwise indicated                | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (e)<br>Related or exempt<br>function income |
|---------------------------------------------------------------|---------------------------|---------------|--------------------------------------|---------------|---------------------------------------------|
|                                                               | (a)<br>Business<br>code   | (b)<br>Amount | (c)<br>Exclu-<br>sion<br>code        | (d)<br>Amount |                                             |
| 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<br>investments       |                           |               | 14                                   | 22,584.       |                                             |
| 4 Dividends and interest from securities                      |                           |               | 14                                   | 372,532.      |                                             |
| 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<br>property       |                           |               |                                      |               |                                             |
| 7 Other investment income                                     |                           |               |                                      |               |                                             |
| 8 Gain or (loss) from sales of assets other<br>than inventory |                           |               |                                      |               | 38,821.                                     |
| 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.            |                                      | 395,116.      | 38,821.                                     |
| 13 Total Add line 12, columns (b), (d), and (e)               |                           |               |                                      | 13            | 433,937.                                    |

(See worksheet in line 13 instructions to verify calculations.)

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

[illegible]

|                  |                                                                                                                      |
|------------------|----------------------------------------------------------------------------------------------------------------------|
| <b>Part XVII</b> | <b>Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations</b> |
|------------------|----------------------------------------------------------------------------------------------------------------------|

|   |                                                                                                                                                                                                                                                                                                                                                                                              | 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. |       |    |

[illegible]

**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 |  |                      |                                                                                                | May the IRS discuss this return with the preparer shown below (see instr) ?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |              |
|                        | <br>Signature of officer or trustee                                                                                                                                                                                              |  | 5-2-15<br>Date       | <br>Title |                                                                                                                                         |              |
| Paid Preparer Use Only | Print/Type preparer's name                                                                                                                                                                                                                                                                                          |  | Preparer's signature |                                                                                                | Check <input type="checkbox"/> if self-employed                                                                                         | PTIN         |
|                        | Firm's name ▶                                                                                                                                                                                                                                                                                                       |  |                      |                                                                                                |                                                                                                                                         | Firm's EIN ▶ |
|                        | Firm's address ▶                                                                                                                                                                                                                                                                                                    |  |                      |                                                                                                |                                                                                                                                         | Phone no.    |

**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,<br>2-story brick warehouse; or common stock, 200 shs. MLC Co. |                                     | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|--------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------|--------------------------------------|----------------------------------|
| 1a                                                                                                                                   | ACM INCOME                          | P                                                |                                      | 12/31/14                         |
| b                                                                                                                                    | BP PLC                              | P                                                |                                      | 12/31/14                         |
| c                                                                                                                                    | GMAC NOTES                          | P                                                |                                      | 12/31/14                         |
| d                                                                                                                                    | I SHARES SILVER                     | P                                                |                                      | 12/31/14                         |
| e                                                                                                                                    | RAYONIER ADVANCE MATERIAL           | P                                                |                                      | 12/31/14                         |
| f                                                                                                                                    | BLACKROCK INV TRUST                 | D                                                |                                      | 12/31/14                         |
| g                                                                                                                                    | REMC CREDITS                        | P                                                |                                      | 12/31/14                         |
| h                                                                                                                                    | ACG                                 | P                                                |                                      | 12/31/14                         |
| i                                                                                                                                    | CAPITAL GAIN DIVIDEND DISTRIBUTIONS | P                                                |                                      | 12/31/14                         |
| j                                                                                                                                    |                                     |                                                  |                                      |                                  |
| k                                                                                                                                    |                                     |                                                  |                                      |                                  |
| l                                                                                                                                    |                                     |                                                  |                                      |                                  |
| m                                                                                                                                    |                                     |                                                  |                                      |                                  |
| n                                                                                                                                    |                                     |                                                  |                                      |                                  |
| o                                                                                                                                    |                                     |                                                  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| a 37,779.             |                                            | 43,231.                                         | -5,452.                                      |
| b 217,532.            |                                            | 202,495.                                        | 15,037.                                      |
| c 250,000.            |                                            | 242,082.                                        | 7,918.                                       |
| d 40,159.             |                                            | 43,010.                                         | -2,851.                                      |
| e 41.                 |                                            | 25.                                             | 16.                                          |
| f 177,100.            |                                            | 153,462.                                        | 23,638.                                      |
| g 141.                |                                            |                                                 | 141.                                         |
| h 187.                |                                            |                                                 | 187.                                         |
| i 187.                |                                            |                                                 | 187.                                         |
| j                     |                                            |                                                 |                                              |
| k                     |                                            |                                                 |                                              |
| l                     |                                            |                                                 |                                              |
| m                     |                                            |                                                 |                                              |
| n                     |                                            |                                                 |                                              |
| o                     |                                            |                                                 |                                              |

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<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | (l) Losses (from col. (h))<br>Gains (excess of col. (h) gain over col. (k),<br>but not less than "-0-") |
|---------------------------|--------------------------------------|-------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| a                         |                                      |                                                 | -5,452.                                                                                                 |
| b                         |                                      |                                                 | 15,037.                                                                                                 |
| c                         |                                      |                                                 | 7,918.                                                                                                  |
| d                         |                                      |                                                 | -2,851.                                                                                                 |
| e                         |                                      |                                                 | 16.                                                                                                     |
| f                         |                                      |                                                 | 23,638.                                                                                                 |
| g                         |                                      |                                                 | 141.                                                                                                    |
| h                         |                                      |                                                 | 187.                                                                                                    |
| i                         |                                      |                                                 | 187.                                                                                                    |
| j                         |                                      |                                                 |                                                                                                         |
| k                         |                                      |                                                 |                                                                                                         |
| l                         |                                      |                                                 |                                                                                                         |
| m                         |                                      |                                                 |                                                                                                         |
| n                         |                                      |                                                 |                                                                                                         |
| o                         |                                      |                                                 |                                                                                                         |

|                                                                                                                                                                                    |   |         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---------|
| 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7<br>If (loss), enter "-0-" in Part I, line 7 }                                              | 2 | 38,821. |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)<br>If gain, also enter in Part I, line 8, column (c).<br>If (loss), enter "-0-" in Part I, line 8 } | 3 | N/A     |

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

| SOURCE                  | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|-------------------------|-----------------------------|---------------------------------|-------------------------------|
| VARIOUS                 | 22,584.                     | 22,584.                         |                               |
| TOTAL TO PART I, LINE 3 | 22,584.                     | 22,584.                         |                               |

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

| SOURCE            | GROSS<br>AMOUNT | CAPITAL<br>GAINS<br>DIVIDENDS | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|-------------------|-----------------|-------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| VARIOUS           | 372,532.        | 0.                            | 372,532.                    | 372,532.                          |                               |
| TO PART I, LINE 4 | 372,532.        | 0.                            | 372,532.                    | 372,532.                          |                               |

## FORM 990-PF ACCOUNTING FEES STATEMENT 3

| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| TAX PREPARATION FEES         | 2,300.                       | 0.                                |                               | 2,300.                        |
| TO FORM 990-PF, PG 1, LN 16B | 2,300.                       | 0.                                |                               | 2,300.                        |

## FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 4

| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| ASSET MANAGEMENT FEES        | 37,027.                      | 37,027.                           |                               | 0.                            |
| INVESTMENT MANAGEMENT FEES   | 10,325.                      | 10,325.                           |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 16C | 47,352.                      | 47,352.                           |                               | 0.                            |

| FORM 990-PF                 | TAXES                        |                                   |                               | STATEMENT                     | 5 |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|---|
| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |   |
| EXCISE TAXES                | 11,400.                      | 11,400.                           |                               | 0.                            |   |
| FOREIGN TAXES               | 4,599.                       | 4,599.                            |                               | 0.                            |   |
| TO FORM 990-PF, PG 1, LN 18 | 15,999.                      | 15,999.                           |                               | 0.                            |   |

| FORM 990-PF                                  | OTHER EXPENSES               |                                   |                               | STATEMENT                     | 6 |
|----------------------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|---|
| DESCRIPTION                                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |   |
| SEMI ANNUAL MEETINGS<br>ASSOCIATED COSTS     | 2,011.                       | 0.                                |                               | 2,011.                        |   |
| OFFICE SUPPLIES, POSTAGE, &<br>WEB MAINTANCE | 366.                         | 0.                                |                               | 366.                          |   |
| TO FORM 990-PF, PG 1, LN 23                  | 2,377.                       | 0.                                |                               | 2,377.                        |   |

| FOOTNOTES |  |  |  | STATEMENT | 7 |
|-----------|--|--|--|-----------|---|
|-----------|--|--|--|-----------|---|

ELECTION REGARDING  
EXCESS QUALIFYING DISTRIBUTION TO PRIOR YEARS  
CARL MARSHALL REEVES AND MILDRED ALMEN REEVES  
FOUNDATION, INC. HEREBY  
ELECTS \$340,404 OF 2014'S QUALIFYING DISTRIBUTIONS  
TO BE APPLIED TO 2013'S UNDISTRIBUTED INCOME  
UNDER IRC SEC. 4942.

|             |                                                |           |   |
|-------------|------------------------------------------------|-----------|---|
| FORM 990-PF | OTHER INCREASES IN NET ASSETS OR FUND BALANCES | STATEMENT | 8 |
|-------------|------------------------------------------------|-----------|---|

|                                                    |         |
|----------------------------------------------------|---------|
| DESCRIPTION                                        | AMOUNT  |
| DIFFERENCE BETWEEN BOOK / TAX BASIS ON SCH D ITEMS | 68,478. |
| TOTAL TO FORM 990-PF, PART III, LINE 3             | 68,478. |

|             |                                            |           |   |
|-------------|--------------------------------------------|-----------|---|
| FORM 990-PF | U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS | STATEMENT | 9 |
|-------------|--------------------------------------------|-----------|---|

| DESCRIPTION                                      | U.S.<br>GOV'T | OTHER<br>GOV'T | BOOK VALUE | FAIR MARKET<br>VALUE |
|--------------------------------------------------|---------------|----------------|------------|----------------------|
| VARIOUS BONDS                                    |               | X              | 50,086.    | 90,303.              |
| VARIOUS MUTUAL FUNDS                             | X             |                | 1,089,888. | 1,670,824.           |
| TOTAL U.S. GOVERNMENT OBLIGATIONS                |               |                | 1,089,888. | 1,670,824.           |
| TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS |               |                | 50,086.    | 90,303.              |
| TOTAL TO FORM 990-PF, PART II, LINE 10A          |               |                | 1,139,974. | 1,761,127.           |

|             |                 |           |    |
|-------------|-----------------|-----------|----|
| FORM 990-PF | CORPORATE STOCK | STATEMENT | 10 |
|-------------|-----------------|-----------|----|

| DESCRIPTION                             | BOOK VALUE | FAIR MARKET<br>VALUE |
|-----------------------------------------|------------|----------------------|
| VARIOUS CORPORATE STOCK                 | 9,078,774. | 13,202,680.          |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 9,078,774. | 13,202,680.          |

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 11

| NAME AND ADDRESS                                                | TITLE AND<br>AVRG HRS/WK           | COMPEN-<br>SATION | EMPLOYEE<br>BEN PLAN CONTRIB | EXPENSE<br>ACCOUNT |
|-----------------------------------------------------------------|------------------------------------|-------------------|------------------------------|--------------------|
| LARRY E. NUNN<br>3435 DUFFER DRIVE<br>COLUMBUS, IN 47203        | PRESIDENT<br>4.00                  | 200.              | 0.                           | 0.                 |
| MARY ANN NUNN<br>3435 DUFFER DRIVE<br>COLUMBUS, IN 47203        | SECRETARY/TREASURER<br>3.00        | 200.              | 0.                           | 0.                 |
| MARY LU ORR<br>9232 W. TULIP DRIVE<br>COLUMBUS, IN 47201        | DIRECTOR<br>1.00                   | 200.              | 0.                           | 0.                 |
| W. GEORGE BRUEGGEMANN<br>411 PLAZA DRIVE<br>COLUMBUS, IN 47201  | DIRECTOR<br>1.00                   | 200.              | 0.                           | 0.                 |
| EMILY A. MABE<br>5151 MONTEPELIER CT<br>COLUMBUS, IN 47203      | DIRECTOR<br>1.00                   | 200.              | 0.                           | 0.                 |
| TOM BIGLEY<br>3445 RIVERSIDE DR<br>COLUMBUS, IN 47201           | DIRECTOR<br>1.00                   | 0.                | 0.                           | 0.                 |
| LARRY E. NUNN ESTATE<br>3435 DUFFER DR<br>COLUMBUS, IN 47203    | ASSET MANAGEMENT FEES<br>8.00      | 33,862.           | 0.                           | 0.                 |
| FIRST FINANCIAL BANK, N.A.<br>P O BOX 929<br>COLUMBUS, IN 47202 | INVESTMENT MANAGEMENT FEES<br>5.00 | 10,326.           | 0.                           | 0.                 |
| MARY ANN NUNN<br>3435 DUFFER DR<br>COLUMBUS, IN 47203           | ASSET MANAGEMENT FEES<br>8.00      | 3,164.            | 0.                           | 0.                 |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII                    |                                    | 48,352.           | 0.                           | 0.                 |

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION  
PART XV, LINES 2A THROUGH 2D

STATEMENT 12

## NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MARY ANN NUNN  
3435 DUFFER DRIVE  
COLUMBUS, IN 47203

## TELEPHONE NUMBER

812-343-1787

## EMAIL ADDRESS

MANUNN@CARLANDMILDREDRE

## FORM AND CONTENT OF APPLICATIONS

APPLICATIONS SHOULD BE SUBMITTED IN LETTER FORM STATING PURPOSE OF ORGANIZATION AND NATURE OF REQUEST. SEE ATTACHED GRANT APPLICATIONS. THERE ARE TWO SEPARATE APPLICATIONS - ONE TO BE USED FOR LOCAL COMMUNITY ORGANIZATIONS AND A SECOND ONE USED REGARDING MACULAR DEGENERATION RESEARCH.

## ANY SUBMISSION DEADLINES

PRIOR TO SEMI-ANNUAL MEETING

## RESTRICTIONS AND LIMITATIONS ON AWARDS

50% OF GRANTS TO BE USED FOR MACULAR DEGENERATION OF THE EYE RESEARCH. 50% OF GRANTS TO BE USED FOR LOCAL COMMUNITY ORGANIZED CHARITIES. THESE ARE THE GUIDELINES OF THE ORGANIZATION'S PURPOSE OR MISSION.

Local Community Organization Request Due May 15

CARL MARSHALL REEVES & MILDRED ALMEN REEVES  
FOUNDATION, INC.

Attn: Mary Ann Nunn

3435 Duffer Drive

Columbus, IN 47203

E mail: [manunn@carlandmildredreevesfoundation.org](mailto:manunn@carlandmildredreevesfoundation.org)

CONFIDENTIAL APPLICATION

Name of Applicant \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Name of contact person \_\_\_\_\_

List your board members

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List the main services your organization provides

Describe any new programs and/or any special or unmet needs

Write a brief summary of the specific reasons you are applying for this grant, the amount, and its purpose.  
Include how you will account for the monies and report on their use.

The Reeves Foundation does not allow charging of overhead expenses to funds granted for research use. The policy of the Foundation is to fund the project itself and/or any capital expenditures. The monies contributed should not be used for overhead or any indirect administrative costs.

Can you confirm to this policy?      Yes      or      No

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Please enclose the following:

- a copy of the applicant organization's IRS 501(c)(3) tax exemption letter.
- a copy of your annual report.
- a copy of the applicants most recent financial statement. Also, include a budget of revenue and expense for the current year.

Additional sheets may be attached to provide any clarification or further explanation.

Note: Application must be fully completed. Partially completed applications cannot be accepted, unless omissions are explained.

The Foundation's purpose is to provide grants for research for macula degeneration of the eye and support other local, community charities in the Columbus, IN area (whether medical, educational, or other charitable purposes) chosen by the board and/or founder.

**PLEASE SUBMIT SIX (6) SETS OF YOUR APPLICATION FOR REVIEW BY THE FOUNDATION'S BOARD.**

Macular Degeneration Research Request Due September 1

CARL MARSHALL REEVES & MILDRED ALMEN REEVES  
FOUNDATION, INC.

Attn: Mary Ann Nunn

3435 Duffer Drive

Columbus, IN 47203

E mail: [manunn@carlandmildredreevesfoundation.org](mailto:manunn@carlandmildredreevesfoundation.org)

CONFIDENTIAL APPLICATION

Name of Applicant \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Name of contact person \_\_\_\_\_

List your board members

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List the main services your organization provides

Describe any new programs and/or any special or unmet needs

Indicate your publications specifically related to this project.

List other current sources of support for funding of this project.

Write a brief summary of the specific reasons you are applying for this grant, the amount, and its purpose. Include how you will account for the monies and report on their use.

The Reeves Foundation does not allow charging of overhead expenses to funds granted for research use. The policy of the Foundation is to fund the project itself and/or any capital expenditures. The monies contributed should not be used for overhead or any indirect administrative costs.

Can you confirm to this policy?      Yes      or      No

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Please enclose the following:

- a copy of the applicant organization's IRS 501(c)(3) tax exemption letter.
- a copy of your annual report.
- a copy of the applicants most recent financial statement. Also, include a budget of revenue and expense for the current year.

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**PLEASE SUBMIT SIX (6) SETS OF YOUR APPLICATION FOR REVIEW BY THE FOUNDATION'S BOARD.**