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Form 990-PF Department of the Treasury

EXTENDED TO NOVEMBER 16, **Return of Private Foundation**

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

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

Internal Revenue Service For calendar year 2014 or tax year beginning and ending A Employer identification number Name of foundation JASPER WOOD PRODUCTS FOUNDATION, D/B/A GRAMELSPACHER FOUNDATION 35-6024934 Number and street (or P O box number if mail is not delivered to street address) B Telephone number P.O. BOX 2386 317-423-9800 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here INDIANAPOLIS, IN 46206-2386 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 358,720. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (b) Net investment (c) Adjusted net (d) Disbursements (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for chantable purposes (cash basis only) expenses per books income income N/A Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3 3. STATEMENT 12,499. 12,499 STATEMENT Dividends and interest from securities 5a Gross rents 1 Net rental income or (loss) 1,257 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 1,257. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 13,759 13,759 Total. Add lines 1 through 11 0. 0. Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees STMT 3 750 375 375. **b** Accounting fees c Other professional fees Administrative 17 Interest 166. STMT 4 0. 166. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Other expenses Operating 24 Total operating and administrative 916 375 expenses Add lines 13 through 23 541. 16,981 16,981. 25 Contributions, gifts, grants paid Total expenses and disbursements. 17,897 375 17,522. Add lines 24 and 25 27 Subtract line 26 from line 12 -4,1382 Excess of revenue over expenses and disbursements 13,384 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

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`	/ D / A	GRAMELSPACHER	マヘリパリン かってへん
,	/ D / D	GRAPICUSPACICA	- POUNDALION

Fo	rm 99	00-PF (2014) D/B/A GRAMELSPACHER FOU	NDATION	35-6	5024934 Page 2		
	Part Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (a) Book Value (b) Book			End of	End of year		
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments	33,675.	5,528.	5,528.		
	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						
		Less allowance for doubtful accounts ▶					
Assets	8	Inventories for sale or use					
Ass	10-	Prepaid expenses and deferred charges	81,708.	81,708.	97,319.		
-		Investments - U.S. and state government obligations STMT 5 Investments - corporate stock STMT 6	158,508.	182,517.	255,873.		
			130,300.	102,317.	233,073.		
		Investments - corporate bonds					
	''	Investments - land, buildings, and equipment basis		1			
	12	Less accumulated depreciation Investments - mortgage loans					
	13	Investments - other	-				
	14	Land, buildings, and equipment basis					
	''	Less accumulated depreciation		İ			
	15	Other assets (describe >					
	4	Total assets (to be completed by all filers - see the		-			
		instructions Also, see page 1, item I)	273,891.	269,753.	358,720.		
	17	Accounts payable and accrued expenses			<u> </u>		
	18	Grants payable					
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		. <u></u>			
jab	21	Mortgages and other notes payable					
_	22	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here					
Š		and complete lines 24 through 26 and lines 30 and 31	272 001	260 752			
S	24	Unrestricted	273,891.	269,753.			
ala	25	Temporarily restricted	-				
<u> </u>	26	Permanently restricted					
뎚		Foundations that do not follow SFAS 117, check here					
5	27	and complete lines 27 through 31.			,		
ets	28	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund					
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds					
Ę.	30	Total net assets or fund balances	273,891.	269,753.			
Z		Total not assets of land balanees	2,0,0520	2007.000			
	31	Total liabilities and net assets/fund balances	273,891.	269,753.			
F	art	Analysis of Changes in Net Assets or Fund B	alances				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line					
	(mu	st agree with end-of-year figure reported on prior year's return)		1	273,891.		
2	Ente	r amount from Part I, line 27a		2	-4,138.		
		r increases not included in line 2 (itemize)		3	0.		
		lines 1, 2, and 3		4	269,753.		
		eases not included in line 2 (itemize)		5	0.		
6_	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	269,753.		

D/B/A GRAMELSPACHER FOUNDATION

Part IV Capital Gains ar	nd Losses for Tax on	Investment	t Income	_				002	1331 Tage 3
(a) List and describ	e the kind(s) of property sold (e	g , real estate,	<u></u>	P	- Purç	nase į ·	c) Date a	cquired	(d) Date sold (mo , day, yr)
2-story brick warehouse, or common stock, 200 shs MLC Co) 1a CATERPILLAR, INC.			D	D - Donation			0/08	04/10/14	
b				.0/3	3700_	04/10/14			
C									
d				L_	·				
<u>e</u>	40.5	T		L.,					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	st or other basis expense of sale					in or (loss (f) minus	
a 10,317.			9,06	0.					1,257.
b									
<u>c</u>									
e e	-								
Complete only for assets showing	gain in column (h) and owned by	y the foundation	on 12/31/69			(1)	Gains (Co	ol (h) gain	minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			còl (k), but n	ot less that from col (n -0-) or
a									1,257.
b						 			
d .									
e									
2 Capital gain net income or (net capit		er in Part I, line		}	2				1,257.
3 Net short-term capital gain or (loss)	/ (!! (!-000)) ***		'	7					
If gain, also enter in Part I, line 8, co	. ,	and (O)]				,	
If (loss), enter -0- in Part I, line 8 Part V Qualification Unit	dor Soction 4040(a) fa	r Dodugod	Toy on Not		3	nont Inco		N/A	•
(For optional use by domestic private for						ient ince	ine		
		1 4540(u) tax on	i ilot ilivostiliolit ili	icom	• 1				
f section 4940(d)(2) applies, leave this	part blank								
Was the foundation liable for the section			-	riod?					Yes X No
f "Yes," the foundation does not qualify Enter the appropriate amount in each				ntries	<u> </u>				
(a)	(b)		ioro maning arry o	(c)				Dioteit	(d) oution ratio
Base period years Calendar year (or tax year beginning			Net value of no		rıtable-				rided by col (c))
2013		11,588.				2,145		····	.033869
<u>2012</u> 2011		9,612. 466.	-			4,597. 7,439.			.032628
2010		3,902.				0,992			.024237
2009		8,902.				6,280.			.083760
							`		176006
Total of line 1, column (d)Average distribution ratio for the 5-y	was base period divide the total	l on has 0 by E	ar his the assessment				2		.176980
the foundation has been in existence		ii oii iiile 2 by 5,	or by the number	OI ye	1415		3		.035396
	,								
4 Enter the net value of noncharitable-	use assets for 2014 from Part X	(, line 5					4		369,618.
5 Multiply line 4 by line 3							5		13,083.
6 Enter 1% of net investment income	(1% of Part I line 27h)						6	,	134.
	(
7 Add lines 5 and 6							7		13,217.
8 Enter qualifying distributions from P	•	•					8		17,522.
If line 8 is equal to or greater than lin	ne 7, check the box in Part VI, lin	ne 1b, and comp	olete that part usin	ig a 1	% tax	rate			

JASPER WOOD PRODUCTS FOUNDATION, INC.

Forn	990-PF(2014) D/B/A GRAMELSPACHER FOUNDATION	35-	6024	1934		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see	instru		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			1	34.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			1	34.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			1	34.
6	Credits/Payments				+	
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7	Ĺ			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 7	9			1	34.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			10		X
đ	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ► \$ O . (2) On foundation managers ► \$ O .					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ► \$O .				1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	ļ	X
_	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	r				.,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3_	<u> </u>	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N	/ 7	4a	-	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	IN	/A	4b	_	Х
ס	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		^
c	If "Yes," attach the statement required by General Instruction T					
0	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	lan				
	remain in the governing instrument?	IdW		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	,		7	X	<u> </u>
•	bid the tourisation have at least 40,000 in assets at any time during the year. If Tes, Complete Fait II, Cor (c), and Fait XV			-		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
vu	IN					
h	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	Х	Ì
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar			· · · · · · · · · · · · · · · · · · ·	
-	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	1	x
10		тмт	8	10	X	

JASPER WOOD PRODUCTS FOUNDATION, INC.

Form	990-PF(2014) D/B/A GRAMELSPACHER FOUNDATION	35-6024	934	Pa	ige 5
Pá	art 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 i	privileges?			
	If "Yes," attach statement (see instructions)		12_		X _
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	-	13	X	
	Website address ►N/A				
14		► 317-42		00	
	Located at ▶ P.O. BOX 2386, INDIANAPOLIS, IN	ZIP+4 ▶ <u>46</u>	206		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			. ▶[
	and enter the amount of tax-exempt interest received or accrued during the year	15	<u> N/</u>		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		, \		No
	securities, or other financial account in a foreign country?	-	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name	e of the			
~	foreign country		L		
P 6	art 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.		<u> </u>	es	<u>No</u>
1a	During the year did the foundation (either directly or indirectly)				
		es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	[T]			
		es X No			
		es X No			
		es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	. .			
		es X No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"				
	If the foundation agreed to make a grant to or to employ the official for a period after	. T.			
		es X No			
0	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	N7 / 7			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
_	Organizations relying on a current notice regarding disaster assistance check here				
G	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			-	X
2	before the first day of the tax year beginning in 2014? Taxes on fallura to distribute process (continued 4042) (does not easily factorize the foundation was a private easily factorized to a second falluration was a private easily factorized to a falluration was a falluration with a falluration was a falluration win the falluration was a falluration with a falluration was a fall		1c		<u> </u>
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))				
а	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?	es X No			
	If "Yes," list the years \blacktriangleright				
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	t			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack				
	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				
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			1	
O.	· · · · · · · · · · · · · · · · · · ·	es X No			
h	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons at				
-	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to (
	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	3ь	1	
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	,	4a	\dashv	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that		-	
-	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		46		Х
		Fo	m 990-		
		. •		- 1-	/

<u>b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?</u> Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

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

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

1 List all officers, directors, trustees, foundation managers and th	eir 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
M.B. GRAMELSPACHER	PRESIDENT & T	REASURER		
P.O. BOX 2386				
INDIANAPOLIS, IN 46206	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those	included on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE			33.750.3250.	
	—			
	_			
Total number of other employees paid over \$50,000				0

Form **990-PF** (2014)

Х

6b

7b

Yes X No

N/A

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

Total. Add lines 1 through 3	▶	0.
3		
All other program-related investments. See instructions		
2		
1 <u>N/A</u>		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2	Amount
Part IX-B Summary of Program-Related Investments		
4		
3		
2		
		16,891.
NEED	ATIONS IN	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 TO PROVIDE GENERAL SUPPORT FOR CHARITABLE ORGANIZ.		Expenses
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information	tion such as the	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
	-	
NONE		
(a) Name and address of each person paid more than \$50,000 NONE	(b) Type of service	(c) Compensation

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
	Average monthly fair market value of securities	1a	349,918.
b	Average of monthly cash balances	1b	349,918. 25,329.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	375,247.
е	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.
	Subtract line 2 from line 1d	3	375,247.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,629.
	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	369,618.
	Minimum investment return Enter 5% of line 5	6	369,618. 18,481.
	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	d certain	
1	Minimum investment return from Part X, line 6	1	18,481.
2a	Tax on investment income for 2014 from Part VI, line 5		
	income tax for 2014 (This does not include the tax from Part VI)		
C .	Add lines 2a and 2b	2c	134.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	134. 18,347.
	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	18,347.
6	Deduction from distributable amount (see instructions)	6	0.
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	18,347.
	rt 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	17,522.
b	Program-related investments - total from Part IX-B	1b	17,522.
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		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	17,522.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ncome Enter 1% of Part I, line 27b	5	134.
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	17,388.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940(e) reduction of tax in those years	,	

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				18,347.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			14,028.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2014		Ų • į		
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 > \$ 17,522.				
			14,028.	
a Applied to 2013, but not more than line 2a			14,020.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				3,494.
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		1		
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract	.,,.	···· <u>·</u>	· . ,	
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				14,853.
7 Amounts treated as distributions out of		~~~~~		14,055.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
	0.			
may be required - see instructions)	- 0.			
8 Excess distributions carryover from 2009	0.			
not applied on line 5 or line 7		·····	·····	
9 Excess distributions carryover to 2015.	ο.			
Subtract lines 7 and 8 from line 6a	U .		······································	······································
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				•
c Excess from 2012				
d Excess from 2013	1			
e Excess from 2014 423581 11-24-14				Form 990-PF (2014)
11-24-14				FORM 44415-PF /2014\

Part XIV Private Operating F	oundations (see ins	tructions and Part VI	I-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 fo	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)									
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years						
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total				
investment return from Part X for									
each year listed									
b 85% of line 2a	·								
c Qualifying distributions from Part XII,									
line 4 for each year listed					<u> </u>				
d Amounts included in line 2c not									
used directly for active conduct of									
exempt activities			-						
e Qualifying distributions made directly									
for active conduct of exempt activities									
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			<u> </u>						
alternative test relied upon									
a "Assets" alternative test - enter									
(1) Value of all assets	-								
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)									
b "Endowment" alternative test - enter		· · ·							
2/3 of minimum investment return shown in Part X, line 6 for each year listed									
c "Support" alternative test - enter									
(1) Total support other than gross									
investment income (interest,									
dividends, rents, payments on securities loans (section									
512(a)(5)), or royalties)									
(2) Support from general public									
and 5 or more exempt organizations as provided in									
section 4942(j)(3)(B)(iii)									
(3) Largest amount of support from									
an exempt organization				_					
(4) Gross investment income									
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets				
at any time during t	·	uctions.)							
1 Information Regarding Foundation	•								
a List any managers of the foundation wh year (but only if they have contributed n			ributions received by the f	foundation before the clos	se of any tax				
NONE	1010 (11411 \$5,000) (000 30	JOHON 307 (4)(2))							
	a own 100/ as mars of the		/a. a. a. a						
b List any managers of the foundation wh other entity) of which the foundation has			(or an equally large portio	ii of the ownership of a pa	irulersnip or				
NONE		•							
2 Information Regarding Contributi	on Grant Gift Loan	Scholambia etc. D			· · ·				
				nt accent uncollected recei	acts for funds of				
Check here \times 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 11									
b The form in which applications should b	e submitted and informati	on and materials they s	hould include						
c Any submission deadlines									
				_					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, chantable fields	kinds of institutions, or o	ther factors					

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year GOOD NEWS MINISTRIES NONE DONATION FOR 16 N. RURAL STREET CHARITABLE MISSION INDIANAPOLIS, IN 46201 500. INDIANA UNIVERSITY FOUNDATION NONE DONATION FOR 950 N. MERIDIAN STREET, #250 CHARITABLE MISSION INDIANAPOLIS, IN 46204 100. KEEP INDIANAPOLIS BEAUTIFUL NONE DONATION FOR 1029 FLETCHER AVE. #100 CHARITABLE MISSION INDIANAPOLIS, IN 46203 1,140. LISC INDIANAPOLIS NONE DONATION FOR 202 E. MARKET STREET CHARITABLE MISSION INDIANAPOLIS, IN 46204 500. ST. RICHARD'S EPISCOPAL NONE DONATION FOR 33 E 33RD ST CHARITABLE MISSION INDIANAPOLIS, IN 46205 10,300. SEE CONTINUATION SHEET(S) ► 3a 16,981. Total b Approved for future payment NONE 0<u>.</u> Total **▶** 3b

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

Enter gross amounts unless otherwise indicated	Unrelate	ed business income		ded by section 512, 513, or 514	(e)	
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
	code					
a			╁			
	_		╁			
C			+-			
d			┼~		 = -	
f	_		 			
g Fees and contracts from government agencies	_		+			
2 Membership dues and assessments			<u> </u>			
3 Interest on savings and temporary cash	-					
Investments			14	3.		
4 Dividends and interest from securities			$\frac{14}{14}$			
5 Net rental income or (loss) from real estate			1	,		
a Debt-financed property			1			
b Not debt-financed property				-		
6 Net rental income or (loss) from personal						
property						
7 Other investment income			T		· · · · ·	
8 Gain or (loss) from sales of assets other					<u>-</u>	
than inventory			18	1,257.		
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			<u> </u>			
12 Subtotal Add columns (b), (d), and (e)		0	•	13,759.		
13 Total Add line 12, columns (b), (d), and (e)				13	13,759.	
(See worksheet in line 13 instructions to verify calculations))					

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

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

423621 11-24-14

Fori	m 990-PF (2014) D/B/A GRAMELSPACHER FOUNDATION 3	5-6024934	Pag	ge 13
P	Information Regarding Transfers To and Transactions and Relationships With Exempt Organizations	Noncharitable		
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of	Y	/es	No
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
а	Transfers from the reporting foundation to a noncharitable exempt organization of		- 1	

	the Cod	te (other than section 501(c)	(3) organizations) or in section 52	7 relating to political organiz	ations?				
2		•	ation to a noncharitable exempt or	- · · · · · · · · · · · · · · · · · · ·	41.011.0				
۰	(1) Ca	•	mon to a nonchantable exempt of	gamzation of			12/1)	1	X
							1a(1)		X
_		her assets					1a(2)	- -	
D		ransactions						- 1 .	v
		les of assets to a noncharitat	• •				1b(1)		<u>X</u>
	• •		ncharitable exempt organization				1b(2)		X
	(3) Re	intal of facilities, equipment, o	or other assets				1b(3)		X
	(4) Re	imbursement arrangements					1b(4)		X
	(5) Lo	ans or loan guarantees					1b(5)		<u>X</u>
	(6) Pe	rformance of services or mei	mbership or fundraising solicitatio	ins			1b(6)		<u>X_</u>
C	Sharing	g of facilities, equipment, mai	iling lists, other assets, or paid em	ployees			10		X
d	If the a	nswer to any of the above is '	"Yes," complete the following sche	dule Column (b) should alwa	ays show the fair m	arket value of the goods, o	ther assets	 },	
			oundation. If the foundation receive						
			other assets, or services received		•	,			
1) L	ine no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and s	hanno arran	gements	
	1	· · · · · · · · · · · · · · · · · · ·	N/A		(.,,				
				P. 144					
		· <u>-</u>							
				<u>. </u>					
			= -:=						
				·					
			·						
					<u></u>				
			1						
					L				
									
		··				•		-	
							.		
	le tha f	oundation directly or indirect	ly affiliated with, or related to, one	ar mara tay-ayamat araanisa	tions described				
. a		·	•	. •	mons described	<u></u>	Yes	X	A1.
			than section 501(c)(3)) or in sect	1011 327 7		<u> </u>	Yes	Δ	NO
Q	n Yes,	complete the following sche		(h) Type of arganization	4.	a) Description of relationsh			
		(a) Name of orga	anization	(b) Type of organization	{	c) Description of relationsh	пр		
		N/A							
							_		
			=				_		
	Un	der penalties of penjury, I declare t	that I have examined this return, including	ng accompanying schedules and st	tatements, and to the t	est of my knowledge	the IRS disc	cuss this	_
Si	gn and	d belief, it is true, correct, and com	nat I have examined this return, including the property of the	n taxpayer) is based on all informat	tion of PRESID	ENT AND retu	m with the p	reparer	
Нe	re	1. 10A1 1 A A A	Wald W	1 18/11/15	TREASU		Yes	$\overline{}$	No
	\$	ignature of officer or trustee	U PARTE	Date	Title				
		Print/Type preparer's na	me Preparer's si			Check If PTIN			
		BRANDON L.				self- employed			
Pa	id /	CPA	17.	LCI CPA	8/12/15	' '	13272	1.8	
	epare		ENWALT CPAS, IN	,	377-77	Firm's EIN ► 35-14			
	e Onl		PHAUDI CLUS! IN	•		Lituu.2 FIIA ► 27 — T.d	20332	1	
J			A 2 M VIEDMONTO C	mp p p m			-		
			42 W. VERMONT S			317.3	. 1 . 2 . 2	00	
		1 <u>N</u> .	DIANAPOLIS, IN	40224		Phone no 317-24	11-29	<u>99</u>	

Form **990-PF** (2014)

	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
UNIVERSITY OF NOTRE DAME	NONE		DONATION FOR	'
400 MAIN BUILDING			CHARITABLE MISSION	
NOTRE DAME, IN 46556				1,50
CROSS ROADS OF AMERICA	NONE		DONATION FOR	
7125 FALL CREEK ROAD			CHARITABLE MISSION	
INDIANAPOLIS, IN 46256				4.5
EARTHWATCH INSTITUTE	NONE		DONATION FOR	
114 WESTERN AVENUE			CHARITABLE MISSION	
BOSTON, MA 02134				10
MKNA	NONE		DONATION FOR	
526 EAST 52ND STREET			CHARITABLE MISSION	_
INDIANAPOLIS, IN 46205				5
SIERRA CLUB	NONE		DONATION FOR	
85 SECOND STREET 2ND FLOOR	NONE		DONATION FOR CHARITABLE MISSION	
SAN FRANCISCO, CA 94105			CHARITABLE MISSION	1
			-	
WFYI	NONE		DONATION FOR	
1630 NORTH MERIDIAN STREET			CHARITABLE MISSION	
INDIANAPOLIS, IN 46202				12
NATIONAL GEOGRAPHIC	NONE		DONATION FOR	
1145 17TH STREET NW			CHARITABLE MISSION	
WASHINGTON, DC 20036				6
ST. THOMAS AQUANIS	NONE		DONATION FOR	
4600 NORTH ILLINOIS STREET			CHARITABLE MISSION	
INDIANAPOLIS, IN 46208				1,37
ND CLUB OF INDIANA	NONE		DONATION FOR	
100 ECK CENTER			CHARITABLE MISSION	
NOTRE DAME, IN 46556			-	54
AUTT DDDN'G MIGHT	1000			
CHILDREN'S MUSEUM	NONE		DONATION FOR	
3000 N. MERIDIAN ST INDIANAPOLIS, IN 46208			CHARITABLE MISSION	
Total from continuation sheets				4,44

FORM 990-PF INTERES	ST ON SAVI	NGS AND TE	MPORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE		REV	A) ENUE BOOKS		(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME	E
FIDELITY INTEREST IN	COME		3.		3.		
TOTAL TO PART I, LIN	NE 3		3.		3.		
FORM 990-PF	DIVIDEND	S AND INTE	REST FR	OM SECUE	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN	F	(A) REVENUE R BOOKS	(B) NET INVES MENT INCO		
FIDELITY	12,499	•	0.	12,499.	12,49	9.	
TO PART I, LINE 4 =	12,499	•	0.	12,499.	12,49	9.	
FORM 990-PF		ACCOUNT	ING FEE	:S		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
	_	EXPENSES	NET I MENT	NVEST-	ADJUSTED	CHARITAE E PURPOSE	
	- - ., LN 16B =	EXPENSES PER BOOKS	NET I	NVEST- INCOME	ADJUSTED	CHARITAE E PURPOSE	ES
DESCRIPTION ACCOUNTING FEES TO FORM 990-PF, PG 1	_ _, LN 16B =	EXPENSES PER BOOKS 750	NET I	INVEST- INCOME	ADJUSTED	CHARITAE E PURPOSE	'5.
ACCOUNTING FEES TO FORM 990-PF, PG 1	_ , LN 16B =	EXPENSES PER BOOKS 750	NET I	NVEST-INCOME 375. 375. B) NVEST-	ADJUSTED NET INCOM	CHARITAE E PURPOSE 37 37 STATEMENT (D) CHARITAE	75. 4
ACCOUNTING FEES TO FORM 990-PF, PG 1 FORM 990-PF	_ _, LN 16B =	EXPENSES PER BOOKS 750 750 TA	NET I	NVEST-INCOME 375. 375. B) NVEST-	ADJUSTED NET INCOM	CHARITAE E PURPOSE 37 STATEMENT (D) CHARITAE E PURPOSE	75. 4

FORM 990-PF U.S. AND S	TATE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	5
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE	[
FIDELITY CAPITAL & INCOME		X	81,708.	97,31	9.
TOTAL U.S. GOVERNMENT OBLIGAT	IONS	_			
TOTAL STATE AND MUNICIPAL GOV	ERNMENT OBLIG	ATIONS	81,708.	97,31	.9.
TOTAL TO FORM 990-PF, PART II	, LINE 10A	_	81,708.	97,31	.9.
		<u> </u>			
FORM 990-PF	CORPORATE	STOCK		STATEMENT	6
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE	
FIDELITY LEVERAGED COMPANY ST STOCKS	OCK	-	80,510. 102,007.	144,59 111,27	
TOTAL TO FORM 990-PF, PART II	, LINE 10B	=	182,517.	255,87	3.
FORM 990-PF INT	EREST AND PEN	ALTIES		STATEMENT	7
TAX DUE FROM FORM 990-PF, PA LATE PAYMENT INTEREST LATE PAYMENT PENALTY		ALTIES			34. 1. 3.

FORM 990-PF	LIST OF SUBS	TANTIAL CO		RS	STAT	EMENT	8
NAME OF CONTRIBUTOR		ADDRESS					
CMW INC.		P.O. BOX INDIANAP	2266 OLIS, IN	46206			
FORM 990-PF	LATE	PAYMENT P	ENALTY		STAT	EMENT	9
DESCRIPTION	DATE	AMOUN	T BA	LANCE	MONTHS	PENAL	ΤY
TAX DUE DATE FILED	05/15/1 08/21/1		134.	134. 134.			3.
TOTAL LATE PAYMENT PI	ENALTY						3.
FORM 990-PF	LATE	PAYMENT I	NTEREST		STAT	EMENT	10
DESCRIPTION	DATE	AMOUNT	BALANCE	E RAT	E DAYS	INTER	EST
TAX DUE DATE FILED	05/15/15 08/21/15	134.		.3403	00 98		1.
TOTAL LATE PAYMENT IN	NTEREST						1.

. . . .

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 11 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MARK B. GRAMELSPACHER, PRESIDENT JASPER WOOD PRODUCTS FOUNDATION, INC. P.O. BOX 2386 INDIANAPOLIS, IN 46206

TELEPHONE NUMBER

317-423-9800

FORM AND CONTENT OF APPLICATIONS

THE APPLICATION MUST BE SUBMITTED IN THE FORM OF A LETTER AND SHOULD DESCRIBE THE APPLICANTS PURPOSE AND ACTIVITIES IN GENERAL. IF THE REQUESTED AMOUNT IS USED FOR A SPECIFIC PURPOSE, PROJECT, OR PROGRAM, THEN IT SHOULD BE CLEARLY EXPLAINED. APPLICANTS OR REQUESTS LONGER THAN FIVE PAGES WILL NOT BE ACCEPTED.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

Form **8868** (Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

•	are filing for an Automatic 3-Month Extension, complete	•				ightharpoonup X
•	are filing for an Additional (Not Automatic) 3-Month Ex	-		•		
	complete Part II unless you have already been granted a		•	•		
	nic filing (e-file) You can electronically file Form 8868 if y					
	I to file Form 990-T), or an additional (not automatic) 3-moi		· ·		•	
	o file any of the forms listed in Part I or Part II with the exc il Benefit Contracts, which must be sent to the IRS in pap					
	w irs.gov/efile and click on e-file for Charities & Nonprofits		see instructions). For more details	on the elec	atomic ming of t	nis ioini,
Part			ubmit original (no copies ne	eded).		
	ration required to file Form 990-T and requesting an autor					
art I o						▶ □
VI othe	· corporations (including 1120-C filers), partnerships, REM	ICs, and tr	rusts must use Form 7004 to reques	st an exten	sion of time	
o file in	come tax returns.			Enter file	er's identifying	number
Гуре ог	Name of exempt organization or other filer, see instru-	ctions		Employer	identification n	umber (EIN) or
orint	JASPER WOOD PRODUCTS FOUND	, INC.				
ile by the	D/B/A GRAMELSPACHER FOUNDAT	CION			35-6024	934
lue date f	Number, street, and room or suite no. If a P.O. box, s	ee instruct	ions.	Social se	curity number (SSN)
ling your etum See P.O. BOX 2386					<u>-</u>	
nstruction	only, to mile post office, state, and Em occorr of a re		ress, see instructions.			
	INDIANAPOLIS, IN 46206-238	00				
	- Datum and factor was the think the analysis to facilities					0 4
nter th	e Return code for the return that this application is for (file	a separai	te application for each return)			0 4
Applica	tion	Return	Application .			Return
s For		Code	Is For		Code	
	00 or Form 990-EZ	01	Form 990-T (corporation)			07
orm 99		02	Form 1041-A		· · · · · · · · · · · · · · · · · · ·	08
	'20 (Individual)	03				
Form 99	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10
orm 99	00-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
orm 99	00-T (trust other than above)	06	Form 8870			12
	MARK B. GRAMELS			_		
	pooks are in the care of P.O. BOX 2386 -	- IND	IANAPOLIS, IN 4620	16		
Tele	phone No ► 317-423-9800		Fax No. 🕨			
	organization does not have an office or place of business					▶ ∟_
_	s is for a Group Return, enter the organization's four digit		\		r the whole grou	•
<u>∞x</u> •	. If it is for part of the group, check this box				ers the extension	on is for.
1 1	equest an automatic 3-month (6 months for a corporation AUGUST 15, 2015, to file the exemp				Th	
_	for the organization's return for:	t organiza	tion return for the organization nam	led above.	ine extension	
	X calendar year 2014 or					
	tax year beginning	an	d ending			
	tax year beginning		a criding		_ ·	
2 If	the tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retur	'n	
[Change in accounting period					
3a If	this application is for Forms 990·BL, 990·PF, 990·T, 4720	or 6069,	enter the tentative tax, less any			
<u>n</u>	onrefundable credits. See instructions.		· · · · · · · · · · · · · · · · · · ·	3a	\$	0.
b If	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	y refundable credits and			_
<u>e</u> :	stimated tax payments made. Include any prior year overp	payment al	lowed as a credit	3b_	\$	0.
	alance due. Subtract line 3b from line 3a. Include your pa		·			•
	y using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
	n. If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form	8453-EO a	nd Form 8879-E	O for payment
nstruct	ions.					

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA

423841 05-01-14 Form 8868 (Rev. 1-2014)

Form	8868 (Rey. 1-2014)		······································		· · · · · · · · · · · · · · · · · · ·	Page 2	
• If y	ou are filing for an Additional (Not Automatic) 3-Month Ex	xtension, c	complete only Part II and check this	s box		$\triangleright \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	
	Only complete Part II if you have already been granted an		•	iled Form	8868.		
	ou are filing for an Automatic 3-Month Extension, comple					 	
Par	t II Additional (Not Automatic) 3-Month E	xtensio					
			Enter filer's	i .		ee instructions	
Type			TNG	Employer identification number (Elf			
print	JASPER WOOD PRODUCTS FOUNDA		INC.		25 60	24024	
File by due da					35-602		
filing ye	number, street, and room of suite no. If a P.O. box, s	see instruc	tions.	Social se	curity numbe	er (SSN)	
return instruc			ress, see instructions.				
Enter	the Return code for the return that this application is for (fil	le a separa	te application for each return)			0 4	
Appli	cation	Return	Application		<u> </u>	Return	
Is Fo		Code	Is For			Code	
	990 or Form 990-EZ	01	13 7 01			Joue	
	990-BL	02	Form 1041-A			08	
	4720 (individual)	03	Form 4720 (other than individual)			09	
	990-PF	04	Form 5227			10	
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		_	11	
	990-T (trust other than above)	06	Form 8870			12	
STO	P! Do not complete Part II if you were not already granted	d an auton	natic 3-month extension on a prev	iously file	d Form 886	В.	
Te ● If t	I request an additional 3-month extension of time until	ss in the Ur Group Exe and atta NOVEMI check reas	Fax No. Inted States, check this box emption Number (GEN) I such a list with the names and EINs of BER 15, 2015, and ending on Initial return	f this is fo f all memb g Final r	ers the exter	ision is for.	
b	If this application is for Forms 990-BL, 990-PF, 990-T, 4720 nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6060 tax payments made. Include any prior year overpayment a previously with Form 8868.	9, enter an Illowed as a	y refundable credits and estimated a credit and any amount paid	8a 8b	\$	0.	
С	Balance due. Subtract line 8b from line 8a. Include your p		in this form, it required, by using	8c	s	0.	
	EFTPS (Electronic Federal Tax Payment System). See insti		st be completed for Part II o		3		
ıt ıs tr	penalties of perjury, I declare that I have examined this form, include, correct, and complete, and that I am authorized to prepare this f	ding accomp form		o the best c	6/1	ge and belief,	
<u>signa</u>	ture 19 mm () KOLLA, CSA TITLE	CFA		Date		868 (Rev. 1-2014)	