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Form 990-PF

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

OMB No 1545-0052 2014

Department of the Treasury Internal Revenue Service

SCANNED WAY 2 8 2019.

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

Open to Public Inspection

	_	dar year 2014, or tax year beginning	, 201	4, and ending		
	of four				A Employer identification of	nwper
		ASSOCIATES FOUNDATION street (or PO box number if mail is not delivered to street	t address)	Room/sulte	35-6073630 B Telephone number (see ins	tructions)
		COTTAGE AVENUE	•		(812) 372-37	
City or	town,	state or province, country, and ZIP or foreign postal code			C If exampling application is	a populing about horo
	UMB			47201	C If exemption application is	s pentany, theta nere.
G	heck	all that apply: Initial return	Initial return of a form	ner public charity	D 1 Foreign organizations, ch	eck here ▶
		Final return	Amended return		2 Foreign organizations me	ating the REGK test check
	N1	Address change	Name change		here and attach computat	
н с		type of organization: X Section 50 Section 4947(a)(1) nonexempt charitable tri	1(c)(3) exempt private for	private foundation	E If private foundation status	c use terminated
- -				Cash X Accrual	under section 507(b)(1)(A), check here · · · · ▷
		art II, column (c), line 16)	Other (specify)	Casii Accidai	F With a favor delicant to be a 40	
>	\$	37,433. (Part I	column (d) must be on	cash basis.	F If the foundation is in a 60 under section 507(b)(1)(B)	
Par	ĖT	Analysis of Revenue and		1		T
		Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable
		columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)	,			purposes
		(see instructions))				(cash basis only)
	Τ,	1 Contributions, gills, grants, etc, received (attach schedule)				
	2	2 Ck X If the foundn is not required to attach Sch B				
	1.	3 Interest on savings and temporary cash investments	22.	2	2. 22.	
	2		22.	 	22.	
		5 a Gross rents				
		b Net rental income or (loss)		,		
R	6	6 a Net gain or (loss) from sale of assets not on line 10				
E		b Gross sales price for all assets on line 6a				
Ė	7	, 3				
N U	8	Net short-term capital gain				
Ĕ	1 10) a Gross sales less				
	"	returns and allowances				
	1	b Less Cost of goods sold				
	1	c Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	-	<u> </u>		
	1					
	12	·	22.	22	22.	` .
	13	, , , , ,		· · · · · · · · · · · · · · · · · · ·		
	14	1				
_	1	a Legal fees (attach schedule)				
A D	1	b Accounting fees (attach sch)L-16b Stmt.	600.		~{	
M	1	C Other prof fees (attach sch)	000.		 	
0 1	17	-				
O I S T R A T	18	Taxes (attach schedule)(see instrs)				
RRAA	19	•		LO MAY		- 10 M
<u>i</u> i	20	sch) and depletion			199 2015	£ 100 2 3
N V	21	Travel, conferences, and meetings		W WAT	T = 1013	
A E	22	Printing and publications		OG		
A E N X D P	23	Other expenses (attach schedule)			1-14, 6	
E		ADVERTISING	27.			
N S E S	24	Total operating and administrative				
S	25	expenses. Add tines 13 through 23	627.			6 745
	26	Total expenses and disbursements.	6,745.	3		6,745.
	- 20	Add lines 24 and 25 · · · · · · · · · · · · · · · · · ·	7,372.			6,745.
	27	Subtract line 26 from line 12.	P P		1-	
	а	Excess of revenue over expenses	7.250			
		and disbursements	-7,350.		 	-1
		O Net Investment Income (if negative, enter -0-)		22.	22.	
		repeated not income (ii negative, enter -0-)			1 22.	<u> </u>

Page 2

Da.	+ 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
<u> </u>	· ·	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	44,783.	37,433.	37,433.
	3	Accounts receivable			
		Less: allowance for doubtful accounts		- <u></u>	
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
ŝ	1	Less: allowance for doubtful accounts	0.		
A S S E T	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
S	1	a Investments — U.S and state government obligations (attach schedule)			·
	1	b Investments — corporate stock (attach schedule)			
	1	c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment: basis · · · · · · · · · · · · · ·			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			·
	13			···	
	14				
		Less accumulated depreciation (attach schedule)			
		Other assets (describe) Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	44,783.	37,433.	37,433.
Ļ	17				
A	18	Grants payable			
AB	19	Deferred revenue			
L	20	Loans from officers, directors, trustees, & other disqualified persons			
l T	21	Mortgages and other notes payable (attach schedule)			
ı	22	Other liabilities (describe			-
E S	23				1
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			ı
N F	24	Unrestricted			ì
Ŭ	25	Temporarily restricted			
D	26	Permanently restricted			1
A B B A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
L	27	Capital stock, trust principal, or current funds			
A S N	28	Paid-in or capital surplus, or land, bldg, and equipment fund			1
C	29	Retained earnings, accumulated income, endowment, or other funds	44,783.	37,433.	
RS	30	Total net assets or fund balances (see instructions)	44,783.	37,433.	
	31	Total liabilities and net assets/fund balances (see instructions)	44,783.	37,433.	•
Parl	: (11)	Analysis of Changes in Net Assets or Fund Balance			
1	Total	net assets or fund balances at beginning of year - Part II, column (a)), line 30 (must agree with		44.700
		f-year figure reported on pnor year's return)			44,783.
		· · · · · · · · · · · · · · · · · · ·			-7,350.
		ncreases not included in line 2 (itemize) •		·	27 422
		ises not included in line 2 (itemize)		5	37,433.
		net assets or fund balances at end of year (line 4 minus line 5) — Par	t II. column (b) line 30	· — —	37,433.
			(-), "	1 - 1	311733.

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Pe	Capital Gains and	Losses for Tax on Investme	nt Income			
	(a) List and describe	e the kind(s) of property sold (e.g., rea se, or common stock, 200 shares MLC	l estate,	(b) How acquir P - Purchas		(d) Date sold (month, day, year)
	2-Story blick waterload		Company	D — Donation		
_1	<u>a</u>					ļ
	<u>b</u>					
	<u>c</u>					
	d					
	e	· · · · · · · · · · · · · · · · · · ·	<u> </u>			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale	is :	(h) Gain or (e) plus (f) m	
	а					
	b					
	С					
	d					
	e					
		ng gain in column (h) and owned by the	ne foundation on 12/31/69		(I) Gains (Co	lumn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if any		gain minus column (k than -0-) or Losses (fr), but not less om column (h))
	a					
	b					
	С					
	d					
	e					
2	Capital gain net income or (net	capital loss) If gain, also if (loss), enti-	enter in Part I, line 7 er -0- in Part I, line 7		2	
3	Net short-term capital gain or (lo	oss) as defined in sections 1222(5) an	d (6):	-		
	If gain, also enter in Part I, line 8	B, column (c) (see instructions) If (loss	s), enter -0-			
Do.		r Section 4940(e) for Reduce				
		foundations subject to the section 494				
(1 01	optional use by domestic private	Touridations subject to the section 434	o(a) tax on het investment in	come)		
If se	ction 4940(d)(2) applies, leave this	s part blank				
Was	the foundation liable for the sector	on 4942 tax on the distributable amou	nt of any year in the base no	rod?	Yes	X No
		y under section 4940(e) Do not comp		110u:	🖂 ies	
1		each column for each year, see the if		/ entres		
<u> </u>	(a)	(b)		r entities.	(d)	
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of nonchantable-use asse	ts (co	Distribution Diumn (b) divided b	
	2013	6,300.	47	,397.		0.132920
	2012	5,820.		,254.		0.103459
	2011	5,520.		,854.		0.135115
-	2010	5,884.		,003.		0.085272
	2009	5,875.		,763.		0.078582
2	Total of line 1, column (d)					0.535348
3	Average distribution ratio for the	5-year base period — divide the total	on line 2 by 5, or by the	<u> </u>		
J	number of years the foundation h	has been in existence if less than 5 ye	ars	3	 	0.107070
4	Enter the net value of noncharita	ble-use assets for 2014 from Part X, I	ine 5	· · · · <u>4</u>		42,518.
5	Multiply line 4 by line 3			5	<u> </u>	4,552.
6	Enter 1% of net investment incor	me (1% of Part I, line 27b)		· · · · <u>6</u>		0.
7	Add lines 5 and 6				-	4,552.
8	Enter qualifying distributions from	n Part XII, line 4		8		6,745.
	If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line	1b, and complete that part us	sing a 1% tax	rate. See the	

Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	e instr	ruction	15)		
	a 'Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1	£.	1, 3		37	
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)					
	b Domestic foundations that meet the section 4940(e) requirements in Part V,	. 1				0.
	check here . X and enter 1% of Part I, line 27b			1	ار دیزہ۔	-
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	12.37	1	- C. C. C.		-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					0.
3	Add lines 1 and 2	. 3_				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	. 4	<u> </u>			0.
5	Tax based on investment Income. Subtract line 4 from line 3. If zero or less, enter -0	. 5				0.
6	Credits/Payments:				7 3	
	a 2014 estimated tax pmts and 2013 overpayment credited to 2014					15
1	Exempt foreign organizations — tax withheld at source		1		17	
•	Tax paid with application for extension of time to file (Form 8868)					2 to
(d Backup withholding erroneously withheld			day.		
7	Total credits and payments Add lines 6a through 6d	7	ļ			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached					
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				0.
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded	11				
Pai	AT VILLA Statements Regarding Activities					
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
•	participate or intervene in any political campaign?			1 a		Х
ł	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.					
C	E Did the foundation file Form 1120-POL for this year?			1 c		X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		[2		Х
	If 'Yes,' attach a detailed description of the activities		ľ			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3	THE A	<u>₹</u> X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		• • •	4 a		_X_
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		• • •	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
	If 'Yes,' attach the statement required by General Instruction T			inc.	17.	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					Š.
	By language in the governing instrument, or		1		TX.	3 .)
	• 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	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		[7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)		[
	IN - Indiana		_	4		
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Altorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	X .	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part X	(5)		9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	<u></u> .	<u></u>	10	_	Χ_
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Form 990-PF (2014) REPP ASSOCIATES FOUNDATION	35-607363	0	Р	age 5
Part VII-A Statements Regarding Activities (continued)				Т
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 per advisory privileges? If 'Yes,' attach statement (see instructions)	erson had	12_		_ x_
Did the foundation comply with the public inspection requirements for its annual returns and exemption appl Website address	cation?	13	Х	
14 The books are in care of DANIEL J. PERRY Located at 1604 COTTAGE AVE COLUMBUS IN ZIP + 4	e no. ► <u>(812)</u>	37 <u>2</u> -		1
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	- 1	<u> </u>	
16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authorit bank, securities, or other financial account in a foreign country?	y over a	16	Yes	No X
See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If enter the name of the foreign country	Yes,'		j	
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
1 a During the year did the foundation (either directly or indirectly):			1	·
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			1
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		1	1
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	٠,٠	1	- 1
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes XNo	^		,
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the				4
foundation agreed to make a grant to or to employ the official for a period after termination	Yes X No	Ì		f 1
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)?		1 b		
Organizations relying on a current notice regarding disaster assistance check here	▶ ∏			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?		1 c		
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))				1
At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	Yes X No			
If 'Yes,' list the years ► 20 , 20 , 20				·
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.)		2 b		!
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
► 20 _ , 20 _ , 20 _ , 20 _				1
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			•
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? (1) se Schedule C. Farm 4720, to				:
determine if the foundation had excess business holdings in 2014)	• • • • • • • • • • • • • • • • • • • •	3 b	-+	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?		4 a		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?		4 b		, X
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<u> Pag VIHB Statements Regarding Activit</u>	ties for Which Forr	n 4720 May Be Red	uired (continued)	
5 a During the year did the foundation pay or incur a				
(1) Carry on propaganda, or otherwise attempt	to influence legislation (s	ection 4945(e))?	· · · · · · Yes X	No
Influence the outcome of any specific public on, directly or indirectly, any voter registration	on drive?			No
(3) Provide a grant to an individual for travel, str	udy, or other similar purp	oses?	···· Yes X	No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions)	n a charitable, etc, organ	ization described	Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	s, charitable, scientific, lite of cruelty to children or a	erary, or nimals?	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	transactions fail to quali current notice regarding	fy under the exceptions disaster assistance		5 b
Organizations relying on a current notice regard	ıng disaster assistance c	heck here		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsibility 'Yes,' attach the statement required by Regula	oility for the grant?		Yes	No
6 a Did the foundation, during the year, receive any on a personal benefit contract?				No E
b Did the foundation, during the year, pay premiun	ns, directly or indirectly, o	on a personal benefit con	tract?	6b X
If 'Yes' to 6b, file Form 8870.			m., r	
7 a At any time during the tax year, was the foundation	on a party to a prohibited	d tax shelter transaction?	·····Yes X	No The State of th
b If 'Yes,' did the foundation receive any proceeds				
Part VIII Information About Officers, D and Contractors				
1 List all officers, directors, trustees, foundation				(a) Evenes assembly
(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
FRITZ KIEL				
1604 COTTAGE AVE.	TRUSTEE-PT			
COLUMBUS IN 47201	0.10	0.	0.	0
DAVID MESENDIEK				
1604 COTTAGE AVE.	TRUSTEE-PT			
COLUMBUS IN 47201	0.10	0.	0.	0
DANIEL J. PERRY				
1604 COTTAGE AVE.	PRIN MANAGER	_		_
COLUMBUS IN 47201	0.10	0.	0.	0 .
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	structions), if none, er	ter 'NONE.'
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferred compensation	other allowances
NONE				
				·
				
	ļ	j		
				
		ļ	į	
				· -
otal number of other employees paid over \$50,000 .			 	None

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly P and Contractors (continued)	aid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	
	ł
	1
	j
Total number of others receiving over \$50,000 for professional services	··▶ None
Part X-A Summary of Direct Charitable Activities	
List the foundation's four targest direct chantable 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	}
2	-
3	
4	
	-
Partix-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	Amount
2	
All other program-related investments. See instructions	
3	
	. – –
Total. Add lines 1 through 3	
BAA	Form 990-PF (2014)
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For	m 990-PF (2014) REPP ASSOCIATES FOUNDATION	35-6073630	Page
Pa	Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign foundation	S,
1	a Average monthly fair market value of securities		
	b Average of monthly cash balances		43,165
	C Fair market value of all other assets (see instructions)		
	d Total (add lines 1a, b, and c)	1 d	43,165
	e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2		2	
3	Subtract line 2 from line 1d	3	43,165
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	647
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		42,518
6	Minimum investment return. Enter 5% of line 5	6	2,126
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ☐ and do not complete this part.		
1		1	2,126
2	a Tax on investment income for 2014 from Part VI, line 5	0.	
	b Income tax for 2014. (This does not include the tax from Part VI.) 2 b		
	C Add lines 2a and 2b	2 c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,126.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,126.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,126.
	Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	6,745.
	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
3	Amounts set aside for specific charitable projects that satisfy the	3 a	
	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		6,745.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)		
e	Adjusted qualifying distributions. Subtract line 5 from line 4	1 1 -	<u>0.</u> 6,745.
J			0,145.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years.	ne foundation	

BAA

Form 990-PF (2014)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI, line 7				2,126.
2 Undistributed income, if any, as of the end of 2014	<u> </u>			
a Enter amount for 2013 only			0.]
b Total for prior years· 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2014				
a From 2009 2, 167.				
b From 2010	!			
c From 2011 3, 477.]
d From 2012 3, 007.				
e From 2013 3, 930 .		п		
f Total of lines 3a through e	15,017.		7	
4 Qualifying distributions for 2014 from Part				
XII, line 4: \$ 6,745.				
a Applied to 2013, but not more than line 2a · · ·				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2014 distributable amount				2,126.
e Remaining amount distributed out of corpus	4,619.		· 	
5 Excess distributions carryover applied to 2014				
(If an amount appears in column (d), the same amount must be shown in column (a))				
	ļ			
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	19,636.		- 	
b Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		
© Enter the amount of prior years' undistributed income for which a notice of deficiency has				
been issued, or on which the section 4942(a)		}		
tax has been previously assessed `				
d Subtract line 6c from line 6b Taxable				
amount – see instructions		0.		
e Undistributed income for 2013 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2014 Subtract lines	}	1	,	
4d and 5 from line 1. This amount must be distributed in 2015	}			0.
7 Amounts treated as distributions out of			·	
corpus to satisfy requirements imposed by		ł	ł	
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	ì			
· · · · · · · · · · · · · · · · · · ·				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	2,167.			
· · · · · · · · · · · · · · · · · · ·	2,107.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	17,469.	}		
10 Analysis of line 9:	11,303.			
a Excess from 2010 2, 436.	ļ			!
b Excess from 2011 3, 477.				;
© Excess from 2012 3,007.	}		ļ	;
d Excess from 2013 3, 930 .		ł		•
e Excess from 2014 4, 619.			1	,
				

Form 990-PF (2014) REPP ASSOCIATES F	OUNDATION			35-6073630) Page 10
PartXIVX Private Operating Foundati					N/A
1 a'If the foundation has received a ruling or dete is effective for 2014, enter the date of the rulin	ng				
b Check box to indicate whether the foundation		ting foundation descr		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
b 85% of line 2a			Ţ		<u> </u>
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		<u> </u>			
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	·				
Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test - enter					
(1) Value of all assets		<u> </u>	ļ	L	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV: Supplementary Information (assets at any time during the Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have cor NONE	year — see in ers: contributed more	than 2% of the total of	contributions receive		
b List any managers of the foundation who own a partnership or other entity) of which the foun NONE	10% or more of the dation has a 10%	e stock of a corporati or greater interest	on (or an equally lar	ge portion of the owner	ership of
2 Information Regarding Contribution, Grant, Check here	es contributions to ts, grants, etc (see	preselected charitab instructions) to indivi	le organizations and duals or organizatio	ns under other conditi	
a The name, address, and telephone number or	e-mail address of	the person to whom a	applications should l	oe addressed [,]	
b The form in which applications should be subm	nitted and informati	on and materials the	y should include		
c Any submission deadlines:					
d Any restrictions or limitations on awards, such	as by geographica	l areas, chantable fie	lds, kinds of institution	ons, or other factors	
AA	TEE	EA0310 06/17/14		Fo	rm 990-PF (2014)

Pant XV Supplementary Information (continued)

3 Grants and Contributions	Paid During the		ure Paymen	it	
Recipient		If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home of	or business)	substantial contributor			
a Paid during the year BOY SCOUTS OF AMERIC.	ת		}]	
5625 E ST RD 46	A				
BLOOMINGTON	IN 4740	NONE	PC	GENERAL OPERATIONS	150.
FOUNDATION FOR YOUTH					
405 HOPE AVE				ļ	
COLUMBUS	IN 4720	NONE	PC	GENERAL OPERATIONS	75.
COLUMBUS PARKS & REC	YOUTH FUND)		ļ	
739 22ND ST	4546			CONTRACT OPERATIONS	200
COLUMBUS		NONE	GOV	GENERAL OPERATIONS	200.
DEVELOPMENTAL SERVICE 2920 10TH ST	ES			1	
COLUMBUS	IN 4740	LNONE	PC	GENERAL OPERATIONS	75.
LOVE CHAPEL	211 1710				
311 CENTER ST				}	
COLUMBUS	IN 4740	NONE	PC	GENERAL OPERATIONS	100.
JOSH & KATIE BURNETT	MINISTRY		1		
COLUMBUS	IN 4740	NONE	PC	GENERAL OPERATIONS	150.
JUST FRIENDS					
LINDSEY ST	TN 4740	NONE	PC	GENERAL OPERATIONS	100.
COLUMBUS BARTHOLOMEW CONSOLIDATED	IN 4740	1	PC	GENERAL OPERATIONS	100.
1200 CENTRAL AVE	SCH FOUNDATIO	N			
COLUMBUS	IN 4740		PF	GENERAL OPERATIONS	100.
HANOVER COLLEGE					
484 BALL DR					
HANOVER	IN 47243	3	PC	GENERAL OPERATIONS	750.
See Line 3a statement					
					5,045.
		ľ			
Total				3a	6,745.
b Approved for future payment					
				1	
		1			
			1	1	
			}	1	
			1	1	
			1		
Total		<u> </u>			

Park Analysis of Income-Producing Activities

Enter gro	ss amounts unless otherwise indicated	Unrelated	d business income	Excluded by	y section 512, 513, 01 514	(e)
1 Pro	gram service revenue.	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a						
b						
c						
d						
e		 				
f		 				
	s and contracts from government agencies	 				
	nbership dues and assessments est on savings and temporary cash investments			14	22.	
	dends and interest from securities	}+		1 14		·
	rental income or (loss) from real estate.			-		
	ot-financed property	Direction of the control of the cont	<u> ئەلىكى ئالىكى ھىدىكىلىكى ئادۇلۇقى</u>		الى 1941مىلىكىلىكىلىكىلىكىلىكىلىكىلىكىلىكىلىكىلى	
	debt-financed property	 		 		
	rental income or (loss) from personal property	 		 		
	er investment income	1				 _
	or (loss) from sales of assets other than inventory			 		
	income or (loss) from special events					
	ss profit or (loss) from sales of inventory			T		
11 Othe	er revenue.					医自己
a						
b						
C						
d						
е	-					
12 Subi	total Add columns (b), (d), and (e)	THE STATE OF		43.5	22.	
13 Tota	al. Add line 12, columns (b), (d), and (e)				13	22,
Line No.	Explain below how each activity for which inco accomplishment of the foundation's exempt pr	ome is reported urposes (other	d in column (e) of Par than by providing fun	t XVI-A controlled	buted importantly to thurposes). (See instruc	ne ctions.)
						
	1					
BAA			02 06/17/14			Form 990-PF (2014)

Form 990-PF (2014) REPP ASSOCIATES FOUNDATION 35-6073630

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

						, , , , , , , , , , , , , , , , , , , 	1	
Ċ		01(c) of the Code (ot	ngage in any of the following with a her than section 501(c)(3) organiza				Yes	No
а٦	Fransfers from the rep	orting foundation to a	n of.		1.			
		-			1 a (1)		X	
						1 a (2)		X
_ •	Other transactions					\$ -13 kg	15.	
		a noncharitable exer	mpt organization			1 b (1)		X
	•		ble exempt organization			1 b (2)		X
			assets			1 b (3)		$\frac{x}{x}$
•	•	• •				1 b (4)		X
						1 b (5)		<u>X</u>
			p or fundraising solicitations			1 b (6)		X
c s	sharing of facilities, ed	juipment, mailing lists	s, other assets, or paid employees.			1 c		X
ti	he goods, other asset my transaction or sha	s, or services given b ring arrangement, sh	omplete the following schedule. Co by the reporting foundation. If the fo ow in column (d) the value of the g	undation received less than oods, other assets, or servi	n fair market value i ces received.	n 		
(a) Line	e no (b) Amount inv	olved (c) Name	e of noncharitable exempt organization	(d) Description of transfe	ers, transactions, and sl	haring arrang	gements	
				<u> </u>				
				<u> </u>				
				 				
				 				
	- 			 				
	_			 				
	- 							
	·							
				<u></u>				
_								
				1			_	
d	the foundation direct escribed in section 50 'Yes,' complete the fo	1(c) of the Code (oth	ed with, or related to, one or more t er than section 501(c)(3)) or in sec	ax-exempt organizations tion 527?		. Yes	ΧM	10
	(a) Name of orga	nızatıon	(b) Type of organization	(c) [Description of relation	onship		
								
Sign Here	Under penalties of pertury, torrect, and complete Deci	declare that I have examin aration of preparer (other th	ad this return, including accompanying schedul an taxpayer) is based on all information of white	es and statements, and to the best on the preparer has any knowledge	n ·	May the IR this return preparer si	nown beli	s ow
ļ	Signature of officer or true	tee	Date	Title	rin Manager	(see instru	ctions)2_	- I
	Print/Type prepar			1	, 	Y X	es	No
_	,		Preparer's signature	Date S	Cueck []11			
Paid	Joseph D	aniel Holt	1 fact Nail Hot	+ CVA - 1/3/15		<u>200275</u>	<u> 366</u>	
Prepa	rer Firm's name	Yount and	Company, LLC	Fit	m's EIN ► 35-20	01633		
Use O	1	► 5665 North	n Pest Road, Suite 11	0				_
	,	Indianapol			none no _(317)	546-1	020	
BAA	 					Form 990.		1141

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient	If recipient is an individual,	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox Amount	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	of re- cipient			
a Paid during the year INDIANA CHILD SAFETY COUNCIL		<u> </u>		Person or	
11715 FOX RD INDIANAPOLIS IN 46236		PC	GENERAL OPERATIONS	Business X 50.	
INDIANA UNIVERSITY FOUNDATION		1.0	CEMBRUID OF BRUITTONS	Person or	
1500 ST RD 46				Business X	
BLOOMINGTON IN 47408		PF	GENERAL OPERATIONS	75.	
FELLOWSHIP OF CHRISTIAN ATHLETICS				Person or	
8701 LEEDS RD				Business	
KANSAS CITY MO 64129		PC	GENERAL OPERATIONS	75.	
PRO MUSICA				Person or	
315 FRANKLIN ST		[[Business X	
COLUMBUS IN 47201		PC	GENERAL OPERATIONS	75.	
HERITAGE FUND OF BARTHOLOMEW COUNTY				Person or	
538 FRANKLIN ST				Business X	
COLUMBUS IN 47201	 	PC	GENERAL OPERATIONS	100.	
CHILD ABUSE PREVENTION COUNCIL		(Person or Business X	
3832 N MERIDIAN, 101 INDIANAPOLIS IN 46208		PC	GENERAL OPERATIONS	Business X 75.	
HOPE ELEMENTARY PTO		FC.	GENERAL OFERATIONS	Person or	
9575 N ST RD 9				Business	
HOPE IN 47246		PC	GENERAL OPERATIONS	50.	
DARE PROGRAM				Person or	
123 WASHINGTON ST				Business X	
COLUMBUS IN 47201		GOV	GENERAL OPERATION	125.	
ALZHEIMERS FOUNDATION				Person or	
50 E 91ST ST				Business	
INDIANAPOLIS IN 46240		PF	GENERAL OPERATIONS	50.	
AMERICAN CANCER SOCIETY				Person or	
5635 W 96TH ST			CENEDAL OPERATIONS	Business	
INDIANAPOLIS IN 46278	 	PC	GENERAL OPERATIONS	50. Person or	
AMERICAN DIABETES ASSOC				Business	
8604 ALLISONVILLE RD INDIANAPOLIS IN 46250		PC	GENERAL OPERATIONS	50.	
AMERICAN HEART ASSN			CENTRAL OF DIGITIONS	Person or	
5455 N HIGH ST				Business	
COLUMBUS IN 47201		PC	GENERAL OPERATIONS	50.	
AMERICAN LUNG ASSOC				Person or	
115 W WASHINGTON ST				Business	
INDIANAPOLIS IN 46204		PC	GENERAL OPERATIONS	50.	
DOWNS SYNDROME BUDDY WALK				Person or	
708 E_MICHIGAN_ST	I			Business	
INDIANAPOLIS IN 46202		PC	GENERAL OPERATIONS	100.	
MS_SOCIETY				Person or	
3500 DEPAUW BLVD				Business	
INDIANAPOLIS IN 46268		PC	GENERAL OPERATIONS	300.	

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

					
Recipient Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox Amount	
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient			
a Paid during the year					
BARTHOLOMEW CO HOSPITAL FOUNDATION				Person or	
2400 E 17TH ST				Business	
COLUMBUS IN 47201		PF	GENERAL OPERATIONS	750.	
BARTHOLOMEW COUNTY CHAPLANCY				Person or	
				Business	
COLUMBUS IN 47201		PC	GENERAL OPERATIONS	100.	
BARTHOLOMEW_COUNTY_HOSPICE				Person or	
2626 17TH_ST				Business	
COLUMBUS IN 47201		PC	GENERAL OPERATIONS	300.	
UNITED WAY OF BLOOMINGTON				Person or	
441 S COLLEGE				Business	
BLOOMINGTON IN 47403		PC	GENERAL OPERATIONS	15.	
UNITED WAY OF CINCINNATI	~			Person or	
2400 READING RD			CONCONT OPERATIONS	Business	
CINCINNATI OH 45202		PC	GENERAL OPERATIONS	Person or	
UNITED WAY OF INDIANAPOLIS 3901 N MERIDIAN				Business	
INDIANAPOLIS IN 46208	~	PC	GENERAL OPERATIONS	45.	
UNITED WAY OF JEFFERSON COUNTY	·	10	GENERAL OF ENATIONS	Person or	
PO BOX 193				Business	
MADISON IN 47250		PC	GENERAL OPERATIONS	30.	
UNITED WAY OF JENNINGS COUNTY				Person or	
707 N STATE ST				Business	
NORTH VERNON IN 47265		PC	GENERAL OPERATIONS	15.	
SALVATION ARMY				Person or	
2525 ILLINOIS ST				Business	
COLUMBUS IN 47201		PC	GENERAL OPERATIONS	200.	
FOP SHOP WITH A COP			- 	Person or	
1427 E. WASHINGTON				Business	
INDIANAPOLIS IN 46201		PC	GENERAL OPERATIONS	200.	
HUMANE SOCIETY OF BARTHOLOMEW CO				Person or	
4110 E 200 S				Business	
COLUMBUS IN 47201		PC	GENERAL OPERATIONS	1,000.	
ORPHAN GRAIN TRAIN				Person or	
11670 S 340 E			Onumbar opposition	Business	
ELIZABETHTOWN IN 47232		PC	GENERAL OPERATIONS	500.	
SAN SOUCI				Person or	
1526 13TH ST			CENEDAL OPERATIONS	Business	
COLUMBUS IN 47201		PC_	GENERAL OPERATIONS	Person or	
INDIANA VETERANS RELIEF FUND				Person or	
157 BETHEL SUITE B	~	PC	GENERAL OPERATIONS	Business	
BEECH GROVE IN 46107 TURNING POINT DOMESTIC VIOLENCE SERVICES		FC.	GENERAL OFERATIONS	Person or	
ST ROAD 46				Business	
COLUMBUS IN 47201		PC	GENERAL OPERATIONS	200.	
11V 4/201			Chiming Or Digit TOHO	200.	

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year VFW 215 N NATIONAL RD COLUMBUS IN 47201 FAMILY SERVICES 1531 13TH ST COLUMBUS IN 47201		PC PC	GENERAL OPERATIONS GENERAL OPERATIONS	Person or Business 50. Person or Business 75.
CROTHERSVILLE CEMETARY S COUNTY RD 1000 E CROTHERSVILLE IN 47229 40 AND 8 NEWS COLUMBUS IN 47201		PC	GENERAL OPERATIONS GENERAL OPERATIONS	Person or Business 50. Person or Business 25.

Total

5,045.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
OSCAR MICHAEL GERTH, CPA	INDIRECT ACCOUNTING FEES	600.				

Total

600.



333 2nd Street, Columbus IN 47201

FED I.D. #35-0917579

Prescribed by State Board of Accounts			General Form No 99P (Rev 2009A)				
Attn:	D PERRY						
Name:	REPP & ASSOCIATES						
	PO BOX 368						
	COLUMBUS IN 47201						
	rnment Unit)						
	Bartholomew						
=	C10003196						
	31780960						
Older III							
		PUBLISHER'S	CLAIM				
LINE COUN	JT						
	y Master (Must not exceed	two actual lines, neither	r of which shall				
Бюріа	total more than four solid l						
	advertisement is set) nu						
Head.							
	aumhar of lines						
		·					
	al number of lines in notice			19			
1018	ar number of lines in notice						
COMPLITA	TION OF CHARGES						
		columns wide equal	s 19 equivalent lines at	\$ 0.3048			
	lines, 1						
	cents per line			\$			
Additio	onal charges for notices co						
1 6 4 34	of above amount)			\$			
Charg	e for extra proofs of publication						
	TOTAL AMOUNT OF CLA	/IM		\$ 5.79			
DATA EOR	COMPUTING COST						
		cas: 7.217	Size of type 7 point				
•	Number of insertic	ons: 1	Size of type .7. point.				
	Number of insent	/// ·					
			4 11 11 11 11 11 11 11 11 11 11 11 11 11				
			 I hereby certify that the for allowing all just credits, and t 				
		fied is legally due, after	allowing all just credits, and t	nat no part of the same			
REPP ASSOCIATES	aid						
FOUNDATION The 2014 Annual Report	control that the printed ma	ttar attached barata is a	true copy, of the same colum	on width and type size			
of the Repp Associates	duly published in said par			eation houng as follows:			
Foundation is available at its principal office,	duly published in Said par	761	times. The dates of public	ation being as lollows.			
1604 Cottage Avenue,		2/4/15					
Columbus, Indiana 47201, for inspection	•	2/4/15	<u> </u>				
during regular business	nally, the statement check	red helow is true and cor	rrect:				
hours by any citizen who requests it within 180	iany, the statement chest						
days after the publication	Newspaper does not have	a Weh site					
of this notice. The principal manager of the			was posted on the same day	as it was published in			
foundation is Daniel J	the newspaper.	o and and passes in the					
Perry Daniel J. Perry 1/29/15	lewspaper has a Web site, but due to technical problem or error, public notice was posted on						
R-2/4/15 31780960	lewspaper has a Web site			- E 4 1111			
				•			
				1			
			That it	(/A/a)			
			VICKE TU	eu-			
Date:	February 4, 2015		TitleLegal Advertising	Clerk			

Form 8868

Department of the Treasury

(Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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

OMB No 1545-1709

Internal Revenue			istractions is at www.iis.gov/ioi/iioooc.				
	e filing for an Automatic 3-Month Extension, comp					· · · • 🛚	
-	e filing for an Additional (Not Automatic) 3-Month						
	plete Part II unless you have already been granted		·				
corporation r request an e Associated V	iling (e-file). You can electronically file Form 8868 if equired to file Form 990-T), or an additional (not aut xtension of time to file any of the forms listed in Part With Certain Personal Benefit Contracts, which must ng of this form, visit www irs gov/efile and click on e-	omatic) 3-m I or Part II v be sent to t	conth extension of time. You can electronical with the exception of Form 8870, Information he IRS in paper format (see instructions). F	ally file I on Retur	Form 8868 to n for Transfe	rs	
Parti	Automatic 3-Month Extension of Time	Only sul	omit original (no copies needed).				
	n required to file Form 990-T and requesting an auto			te Part	Lonly	▶ □	
•	porations (including 1120-C filers), partnerships, REI		·		-		
income tax n	eturns	viiCs, aiiu li					
	T		Enter filer's identif				
T	Name of exempt organization or other filer, see instructions			Employ	er identification nu	imper (EIN) or	
Type or print							
	REPP ASSOCIATES FOUNDATION	-1			<u> </u>	CNIX	
File by the due date for	Number, street, and room or suite number. If a P O box, see instru	ictions		Socials	ecunty number (S	,5N)	
filing your	1604 COTTAGE AVENUE						
return See instructions	City, town or post office, state, and ZIP code. For a foreign address	s, see instructio	ns				
	COLUMBUS			I	N 4720	1	
Enter the Re	sturn code for the return that this application is for (file	e a separate	e application for each return)			. 04	
Application Is For		Return Code	Application Is For			Return Code	
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990-Bl	-	02	Form 1041-A			08	
Form 4720 (individual)	03	Form 4720 (other than individual)	orm 4720 (other than individual)			
Form 990-Pf	F	04	Form 5227			10	
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T	(trust other than above)	06	Form 8870			12	
Telephor If the org If this is a check this the exter I requesion until The exter 2 If the ta	the No. ► (812) 372-3791 ganization does not have an office or place of busine for a Group Return, enter the organization's four digit is box ►	t Group Exe ck this box. In required to ization retur , and endin check reaso	emption Number (GEN)	this is f	or the whole (group,	
nonref	application is for Forms 990-BL, 990-PF, 990-T, 4720 and able credits. See instructions.	· · · · · ·	<u> </u>	3 a	\$	0.	
tax pay	application is for Forms 990-PF, 990-T, 4720, or 606 yments made. Include any prior year overpayment al	llowed as a	credit	3 b	\$	0.	
EFTPS	ce due. Subtract line 3b from line 3a. Include your pa 6 (Electronic Federal Tax Payment System). See ins	tructions	········	3 с	-	0.	
Caution. If y payment inst	ou are going to make an electronic funds withdrawa tructions	l (direct deb	it) with this Form 8868, see Form 8453-EO	and Fo	orm 8879-EO	for	