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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

Department of the Treasury Internal Revenue Service

SCANNED DEC 1.4 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

Fo	r caler	ndar year 2014 or tax year beginning Novemb	er 5 , 201	4, and	ending	December 31	, 20 14
Na	ame of fo	pundation			A Employe	er identification number	er
Ka	tharine	B Sutphin Foundation, Inc.				47-2544074	
Νι	ımber an	nd street (or P O box number if mail is not delivered to street address)	Room	v/suite	B Telephor	ne number (see instructi	ons)
15	05 N De	elaware Street				317-514-6787	
Cit	ty or tow	n, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ıng, check here ▶
Inc	dianapo	olis, IN 46202					<i>y</i>
			of a former public	charity	D 1. Foreia	n organizations, check	here ▶ □
		☐ Final return ☐ Amended r	•	•			_
		☐ Address change ☐ Name char	nge			n organizations meeting here and attach compu	
Н	Check	k type of organization: Section 501(c)(3) exempt p	rivate foundation		E If private	foundation status was	terminated under
		on 4947(a)(1) nonexempt charitable trust Other tax		dation	section 5	607(b)(1)(A), check here	▶∐
ī		narket value of all assets at J Accounting method			E létha fau	adotion is in a 60 month	h taumination
	end o	f year (from Part II, col. (c), Other (specify)			under se	ndation is in a 60-mont ction 507(b)(1)(B), check	chere
		5) ► \$ 15,000 (Part I, column (d) must be	on cash basis.)				_
P	art I	Analysis of Revenue and Expenses (The total of					(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment icome	(c) Adjusted net	for charitable purposes
		the amounts in column (a) (see instructions))	books	· "	icome	i icome	(cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	15,000				
	2	Check ► ☐ If the foundation is not required to attach Sch. B	13,000		 		
	3	Interest on savings and temporary cash investments	0		0	0	
	4	Dividends and interest from securities	0	f	0	-	
	5a	Gross rents			0		
	b	Net rental income or (loss) 0					
٥	6a	Net gain or (loss) from sale of assets not on line 10	0				· · · · · · · · · · · · · · · · · · ·
Revenue	b	Gross sales price for all assets on line 6a					
Š	7	Capital gain net income (from Part IV, line 2)			0		
æ	8	Net short-term capital gain	······································			0	
	9	Income modifications				0	
	10a	Gross sales less returns and allowances 0					······
	b	Less: Cost of goods sold 0					
	C	Gross profit or (loss) (attach schedule)	0			0	
	11	Other income (attach schedule)	0		0		
	12	Total. Add lines 1 through 11	15,000	·	0		
_	13	Compensation of officers, directors, trustees, etc.	13,000				
es	14	Other employee salaries and wages	0				
S.	15	Pension plans, employee benefits	0				
ğ	16a	Legal fees (attach schedule), COLIVID					
tive Expenses	1	Accounting fees (attach schedule)	0				
ĕ.	C	Other professional for (attach schodule)	0				
ati	17	Interest DEC 08 2015	0				
st	18	Taxes (attach schedule) (see instructions)	0				
<u>=</u>	19	Depreciation (attach schedule) and depleton.	0				
Operating and Administra	20	Occupancy	0				
Ă	21	Travel, conferences, and meetings	0				
nd	22	Printing and publications	0				
g B	23	Other expenses (attach schedule)					
Ē	24	Total operating and administrative expenses.					
ā		Add lines 13 through 23	0				
þe	25	Contributions, gifts, grants paid	0				
0	26	Total expenses and disbursements. Add lines 24 and 25	0				
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	15,000				
	b	Net investment income (if negative, enter -0-) .	13,000		0		
	ļ	Adjusted net income (if negative, enter -0-)				0	

Form **990-PF** (2014)



D.	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		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	0	15,000	15,000
	2	Savings and temporary cash investments	0	0	0
	3	Accounts receivable ▶0			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ► 0			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable	0	. 0	
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0	o	0
	7	Other notes and loans receivable (attach schedule) ▶0			
		Less: allowance for doubtful accounts ▶			
ম	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
As	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
•	b	Investments—corporate stock (attach schedule)	0	0	0
	C	Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment basis ▶ 0			-
	• •	Less: accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans	0	0	
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis ► 0		- U	· · · · · · · · · · · · · · · · · · ·
	1-7	Less. accumulated depreciation (attach schedule)			
	15		0	0	0
	16	Other assets (describe >) Total assets (to be completed by all filers—see the	U	U	<u>_</u>
	10	instructions. Also, see page 1, item l)		45.000	45.000
_	17	Accounts payable and accrued expenses	0	15,000	15,000
	18	Grants payable	0	0	
Liabilities			-	0	
Ξ	19	Deferred revenue	0	0	
ide	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
Ë	21	Mortgages and other notes payable (attach schedule)	0	0	
	22 23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0	0	
	23		0	0	
ŝ		Foundations that follow SFAS 117, check here > and complete lines 24 through 26 and lines 30 and 31.			
32	0.4	·			
lar	24	Unrestricted	15,000	15,000	
Ва	25	Temporarily restricted	0	0	
Þ	26	Permanently restricted	0	0	
Fund Balances		Foundations that do not follow SFAS 117, check here ▶ □			
or F		and complete lines 27 through 31.			
SC	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
1SE	29	Retained earnings, accumulated income, endowment, or other funds			
it /	30	Total net assets or fund balances (see instructions)	15,000	15,000	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	15,000	15,000	
	rt III	Analysis of Changes in Net Assets or Fund Balances	/-\ "		
1		I net assets or fund balances at beginning of year—Part II, colur			
		of-year figure reported on prior year's return)		—	0
2		r amount from Part I, line 27a		15,000	
3		r increases not included in line 2 (ıtemıze) ►		3	0
4		lines 1, 2, and 3		4	15,000
5	Decr	reases not included in line 2 (itemize)		5	0
6	Total	l net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lir	ne 30 6	15,000
					Form QQ0-DF (2014)

Part	IV Capital Gains and	Losses for Tax on Investr	nent Income	_		
		kınd(s) of property sold (e.g., real estat e, or common stock, 200 shs MLC Co		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b						
c						1
d						
<u> </u>				<u> </u>		<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g)
a						
<u> </u>						
<u>c</u>						
<u>d</u>				 1."		
<u> </u>	Complete only for assets show	ving gain in column (h) and owned	by the foundation	on 12/31/69		
	Complete only for assets show					I (h) gain minus it less than -0-) or
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		from col (h))
a						
b						
<u>c</u>						
<u>d</u>						
e	L	(If moun	also enter in Pa	et Lino 7		
2	Capital gain net income or	(not conital local)	aiso enter in Pa , enter -0- in Pa		2	
3	If gain, also enter in Part I,	or (loss) as defined in sections, line 8, column (c) (see instructions or column to the sections)	ctions). If (loss)	, enter -0- in)	3	
Part		er Section 4940(e) for Redu				
		ate foundations subject to the				
(1 01 0	phonai use by domestic privi	are roundations subject to the	section 4340(a)	tax on het mvesi	interit income j	
If sec	tion 4940(d)(2) applies, leave	this part blank.				
		ection 4942 tax on the distribu qualify under section 4940(e). [pase period?	☐ Yes 🛂 No
1	Enter the appropriate amou	unt in each column for each ye	ar; see the instru	uctions before m	akıng any entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net value o	(c) f noncharitable-use a		(d) stribution ratio divided by col (c))
	2013			n-	(55: (5)	
	2012					
	2011					
	2010					
	2009					
		•	•			
2	Total of line 1, column (d)					
3		or the 5-year base period—div				
	number of years the founda	ation has been in existence if le	ess than 5 years		. 3	
4	Enter the net value of nonc	harıtable-use assets for 2014 f	rom Part X. line	5	. 4	
_						
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investment	t income (1% of Part I, line 27b)		. 6	
7	Add lines 5 and 6				. 7	
8		ns from Part XII, line 4				
	If line 8 is equal to or great Part VI instructions.	er than line 7, check the box in	n Part VI, line 1b	, and complete	that part using a	1% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstru	ctio	ns)						
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	· · · · · · · · · · · · · · · · · · ·									
	here ► and enter 1% of Part I, line 27b									
С	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Deart I, line 12, col. (b).									
2										
3	Add lines 1 and 2		<u>0</u>							
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0							
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0							
6	Credits/Payments:									
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 0									
b	Exempt foreign organizations—tax withheld at source 6b 0									
С	Tax paid with application for extension of time to file (Form 8868) . 6c 0									
d	Backup withholding erroneously withheld 6d 0									
7	Total credits and payments. Add lines 6a through 6d		0							
8	Enter any penalty for underpayment of estimated tax. Check here		0							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		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		0							
	VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No						
1a	participate or intervene in any political campaign?	1a	163	140						
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	Id		<u>.</u>						
U	Instructions for the definition)?	1b		1						
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	10		- ·						
	published or distributed by the foundation in connection with the activities.									
С	Did the foundation file Form 1120-POL for this year?	1c		1						
d										
	(1) On the foundation. ► \$ n/a (2) On foundation managers. ► \$ n/a									
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed									
	on foundation managers. ► \$									
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓						
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		1						
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1						
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b								
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1						
	If "Yes," attach the statement required by General Instruction T.									
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:									
	By language in the governing instrument, or									
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	_								
_	conflict with the state law remain in the governing instrument?	6	√							
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	✓							
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)									
b	Indiana If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General									
U	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1							
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		•							
3	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"									
	complete Part XIV	9		1						
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their									
	names and addresses	10	1							

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address n/a	13	✓	
14	The books are in care of ▶ Joanna Taft Telephone no. ▶ 317	-514-	6787	
	Located at ► 1505 N Delaware Street, Indianapolis, IN ZIP+4 ►	4620		
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		•	> [
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	-	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If	•		
	"Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? \square Yes \square No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? \square Yes \square No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c		1
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?			
	If "Yes," list the years ▶ 20 , 20 , 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.)	2b		
	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,			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		✓
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		1

Pa	26	f
Га	45	•

Part	VII-B	Statements Regarding Activities	s for W	/hich Form	4720	May Be R	equire	ed (contir	nued)			
5a	During	the year did the foundation pay or incur a	ny amo	ount to.								
	(1) Car	ry on propaganda, or otherwise attempt tuence the outcome of any specific public	o influe	nce legislatio				Yes	✓ No			
		ectly or indirectly, any voter registration dr					-	☐ Yes	 ✓ No			
	(3) Pro	vide a grant to an individual for travel, stu	dy, or o	other similar	ourpos	es?		Yes	✓ No			
		vide a grant to an organization other than tion 4945(d)(4)(A)? (see instructions)							 ✓ No			
		vide for any purpose other than religious, poses, or for the prevention of cruelty to d							✓ No			
b		answer is "Yes" to 5a(1)–(5), did any of the							ibed in			
		tions section 53.4945 or in a current notice								5b	İ	
	Organi	zations relying on a current notice regardi	ng disa	ster assistan	ce che	ck here .			ightharpoons			
С		inswer is "Yes" to question 5a(4), does to the set it maintained expenditure responsibility							□No			
	If "Yes,	" attach the statement required by Regula	itions s	ection 53.49	45–5(d).							
6a		foundation, during the year, receive any					emiums	· _	_			
		ersonal benefit contract?						☐ Yes	✓ No	1 1	ļ	
b		foundation, during the year, pay premiun " to 6b, file Form 8870.	ns, dire	ctly or indire	ctly, on	a personal	benefi	t contract	? .	6b		√
		ime during the tax year, was the foundation						☐ Yes	✓ No		ļ	
		" did the foundation receive any proceeds								7b		
Part		Information About Officers, Direc and Contractors		, , , , , , , , , , , , , , , , , , ,						mploy	ees,	
1	List all	officers, directors, trustees, foundation										
		(a) Name and address	hou	e, and average rs per week ed to position	`´(lf r	mpensation not paid, iter -0-)	emplo	Contributions byee benefit erred compe	plans	(e) Expe	nse acc allowan	
Joanna	a Taft		Chair a	ind Director;								
<u>1505 N</u>	. Delawa	re Street, Indianapolis, IN 46202	<10			0			0			0
David			Secret	aryTreasurer								
		eet, Suite 575, Indianapolis, IN 46240	and Di	rector; <10		0			0			0
	Roberts											
		/Ivania, Indianapolis, IN 46202	Directo	or; <10		0			0			0
	Wellwert											_
701 Ke 2	Ssler Bo	ulevard, Indianapolis IN 46228 ensation of five highest-paid employee	Directo		o incl	udod on li	no 1 –	caa inetr	Uction	a) If n	200 (0
	"NONE	-	25 (UIII	er man mo:	se ilici			, ,	uction:	<i>5).</i> 11 110	Jiie, 6	
((a) Name a	and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek -	(c) Comper	nsation	(d) Contribution employee plans and compens	benefit Jeferred	(e) Expe other a	nse acc allowan	ount, ces
NONE												
				1								
											· · · · · · · ·	
											-	
Total	number	of other employees paid over \$50,000 .]		l						—
- Otal	idinber	or other employees paid over \$50,000 .		· · · · ·		· · · ·	• •			orm QQ	0 N-PF	(2014)

3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total r	number of others receiving over \$50,000 for professional services	0
Part		,
Fair	X-A Summary of Direct Charitable Activities	
List t orgar	he foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of inzations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N	ONE	
2		
з —		· · · · · · · · · · · · · · · · · · ·
٠	······································	
4		
		ļ
Part	· · · · · · · · · · · · · · · · · · ·	Amount
	ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 10	ONE	
2 -		
All ot	her program-related investments. See instructions	
3		
	Add lines 1 through 3	

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Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn found	dations,
	see instructions.)	,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	625
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	625
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	- 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	625
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	9
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	616
6	Minimum investment return. Enter 5% of line 5	6	31
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► and do not complete this part.)	oundatio	ons
1	Minimum investment return from Part X, line 6	1	31
2a	Tax on investment income for 2014 from Part VI, line 5 2a0		
b	Income tax for 2014. (This does not include the tax from Part VI) 2b 0		
c	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	31
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	31
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	31
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	C
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whethe	r the foundation
	qualified for the section 4040(c) reduction of tax in those years.		000 DE

⊃art	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
_	line 7				31
2	Undistributed income, if any, as of the end of 2014:		1		
a	Enter amount for 2013 only			0	L
b	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2014:		:		
а	From 2009				
b	From 2010				
C	From 2011				
d	From 2012				
е	From 2013	,			
f	Total of lines 3a through e	, 0			
4	Qualifying distributions for 2014 from Part XII,				
	line 4: ▶ \$				
	Applied to 2013, but not more than line 2a.			0	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	0			
d	Applied to 2014 distributable amount				0
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2014	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed	,	0	****	
d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions		0		
е	Undistributed income for 2013. Subtract line		,		
	4a from line 2a. Taxable amount—see				
_	instructions			0	
f	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2015				
_					31
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2009 not	0			
O	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2015.	0			
9	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:	-			
io a	Excess from 2010				
a b	Excess from 2011	1			
C	Excess from 2012	1			
d	Evenes from 2012	1			
e	Excess from 2014	1			
ㅂ	ENGOGG HOTH EGT TO A TO A TO	I	<u> </u>		

Part	XIV Private Operating Foundar	t ions (see instru	ictions and Par	t VII-A, question 9)	
1a	If the foundation has received a ruling				-	-
	foundation, and the ruling is effective for		_			
b	Check box to indicate whether the four		operating found		ction	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		(e) Total
	investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
- е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
a b c	"Assets" alternative test—enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) "Endowment" alternative test—enter ²/₃ of minimum investment return shown in Part X, line 6 for each year listed "Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section				- J. 1. ~	
	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 Informatio any time during the year—	•		the foundation h	ad \$5,000 or mo	ore in assets a
1 a <u>N/A</u>	Information Regarding Foundation I List any managers of the foundation v before the close of any tax year (but o	vho have contribu				by the foundation
b	List any managers of the foundation ownership of a partnership or other en					rge portion of the
N/A						
2	Information Regarding Contribution Check here ▶ ✓ if the foundation of unsolicited requests for funds. If the foundations, complete items 2a, b	only makes controundation makes	ributions to pres	elected charitable of	_	· ·
а	The name, address, and telephone nu	mber or e-mail ac	Idress of the pers	son to whom applica	ations should be a	ddressed:

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

c Any submission deadlines:

factors:

Part	XV Supplementary Information (con	tinued)			
3	Grants and Contributions Paid During		ed for Fu	ture Payment	 .
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
а	Paid during the year				
NONE					
		B			
	Total			<u>.</u> > 3a	a
b	Approved for future payment				
NONE					
NONE					
			ļ		
			'		
			<u>'</u>		
+-					
	Total			▶ 21	-1 -

		VI-A Analysis of Income-Producing Ac			T=		
Ente	r gro	ess amounts unless otherwise indicated.	(a)	siness income (b)	(c)	on 512, 513, or 514 (d)	(e) Related or exempt function income
1	Pro	gram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	а						
	b						
	С						
	d						
	е						
	f						
	g	Fees and contracts from government agencies					
2		mbership dues and assessments					
3		rest on savings and temporary cash investments					
4		dends and interest from securities					
5		rental income or (loss) from real estate:			<u> </u>		
		Debt-financed property			ļ		
		Not debt-financed property					
6		rental income or (loss) from personal property			ļ. ————		
7		er investment income					
8		or (loss) from sales of assets other than inventory				··· -	
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					
11		er revenue: a					
	þ						
	C.						
	d				-		
	е						
40	_	4.4.1 4 11 1 (1.) (1.)					
12	_	ototal. Add columns (b), (d), and (e)					
12 13	Sub Tot	ototal. Add columns (b), (d), and (e)				13	
(See	Sub Tot wor	ksheet in line 13 instructions to verify calculation	ıs.)			13	C
See Pa	Sub Tot wor	ksheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
See Pal Lin	Sub Tot wor	ksheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
See Pal Lin	Sub Tot wor t X	ksheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
See Pal Lin	Sub Tot wor t X	/I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	t Purposes		
See Pal Lin	Sub Tot wor t X	/I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	t Purposes		
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See Pal Lin	Sub Tot wor t X	/I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	t Purposes		
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See Pal Lin	Sub Tot wor t X	/I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	t Purposes		

_		Exempt Or	rganizations										
1	in sec		directly or indirectly ne Code (other than									Yes	No
а		sfers from the repash	porting foundation t	o a noncharitat	ble exempt org	ganization 	of: 				1a(1)		✓
		ther assets .									1a(2)		1
b	٠,	r transactions:											
-			a noncharitable ex	empt organizat	ion						1b(1)		1
			ets from a nonchari								1b(2)	+ -	1
			, equipment, or oth								1b(3)	_	-
			rrangements								1b(4)	_	1
			rantees								1b(5)		1
		0	ervices or members								1b(6)	 	1
С			quipment, mailing l	•	-						1c		1
d			of the above is "Ye								now the	fair m	arket
	value	of the goods, o	ther assets, or serv	ices given by t	he reporting for	oundation.	If the found	dation	rece	ved le	ss than	fair m	arket
	value	in any transaction	on or sharing arrang	gement, show i	n column (d) ti	he value o	f the goods,	othe	r asse	ts, or	services	recer	ved.
(a) Lin	e no (b) Amount involved	(c) Name of none	haritable exempt o	rganization	(d) Descr	ption of transfe	ers, tran	saction	ns, and	sharing arr	angeme	nts
				-	-				_				_
_													
_													
_													
2a b	desci	nbed in section 5	ectly or indirectly a 501(c) of the Code (e following schedule	other than sect							☐ Yes	s 🗸 1	No
		(a) Name of organ			pe of organization	<u>- </u>		(c) Des	scriptio	n of rela	tionship		
				1	·								
		·									_		
		r penalties of perjuly, I	declare that I have examin	ed this return, includ	ing accompanying	schedules and	statements, and	to the	best of	my knov	vledge and	belief, it	is true,
Sign Here		ct, and complete Deck	laration of proparer (other t	nan taxpayer) is base INC	1211	of which prep	arer has any kno	wledge.	•	with th	e IRS disci	shown	below
	· ·	ature of of the or thu	stee //	Date	Title					(see ins	structions)?	✓ Yes	□No
	J	Print/Type preparer	's name	Preparer's signa	ature	·	Date		Chas	. 🗆 .	PTIN		
Paid	0rc=	Jacqueline Pime	ntel-Gannon						Checi self-e	([ıf mploye		180996	0
Prep Use			Faegre Baker Daniel	s LLP				Firm's	L——. sElN: ▶	•	41-024		
JOE '	Cilly		300 N. Meridian Stre		ndianapolis, IN	46204		Phone			317-569		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

Katharine B. Sutphin Foundation, Inc 47-2544074						
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation				
	☐ 527 political organization					
Form 990-PF	√ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private founda	ition				
	☐ 501(c)(3) taxable private foundation					
General Rule For an organization	7), (8), or (10) organization can check boxes for both the General Rule a filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions	tributions totaling \$5,000				
Special Rules	Ontributions.					
regulations under s 13, 16a, or 16b, and \$5,000 or (2) 2% of	For an organization described in section 501(c)(3) filling Form 990 or 990-EZ that met the 33½ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(v), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
contributor, during	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
	at is not covered by the General Rule and/or the Special Rules does no ust answer "No" on Part IV, line 2, of its Form 990; or check the box or					

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number Katharine B. Sutphin Foundation, Inc. 47-2544074

Nathanne	B. Sutplint Foundation, inc.		47.2344074
Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	National Bank of Indianapolis, as personal representative for the Estate of Katharine B. Sutphin; 107 N Pennsylvania St. #700; Indianapolis, IN 46204	\$15,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Employer identification number

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
	\$				
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
	\$				
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
	\$				
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
	\$				
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
	\$				
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
	 \$				
	Description of noncash property given (b) Description of noncash property given	(b) Description of noncash property given (c) FMV (or estimate) (see instructions) S			

Employer identification number

Part III	(10) that total more than \$1,000 fo	r the year from any itions completing Pa he year. (Enter this in	one contributor. rt III, enter the tota formation once. S	escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and I of exclusively religious, charitable, etc., ee instructions.) \$			
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held			
		(e) Transi	er of gift				
	Transferee's name, address, a	and ZIP + 4	Relation	nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	Transferee's name, address, a	(e) Transi		nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Trans					
	Transferee's name, address, a	nship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
-	(e) Transfer of gift						
	Transferee's name, address, a	and ZIP + 4	Relation	nship of transferor to transferee			

Katharine B. Sutphin Foundation, Inc. 1505 N. Delaware Street Indianapolis, IN 46202

EIN: 47-2544074

SCHEDULE 1

Part VII-A, Item 10

Substantial Contributor

The Estate of Katharine B. Sutphin became a substantial contributor in 2014. The personal representative of the estate is National Bank of Indianapolis, and its address is 107 N. Pennsylvania Street, #700, Indianapolis, IN 46204.

US 103473355 01

FORM 990-PF TAX YEAR: 2014