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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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 instructions is at <u>www.irs.gov/form990pf</u>.

For	cale	ndar year 2014, or tax year	r beginning 05-	01-2014	, ar	nd ending 0	4-30-2015				
		ındatıon				A Employer identification number 38-2532527					
WC	OLFE FA	MILY FOUNDATION									
Num	her and	street (or P O box number if mail is not de	livered to street address	s) Room/suite		B Telephone number (see instructions)					
		MANDY WAY	invered to street dudies.	, Room, saice		(317) 870-8148					
						, ,					
		, state or province, country, and ZIP or fore IS, IN 462781561	ign postal code			C If exemption	application is pending	g, check here 🕨 🦵			
.		U 40-4		former public charit				_			
G Cr	іеск а	Il that apply Initial return Final return	A mended return	former public charit	^y		rganizations, check he	·			
		Address change					rganizations meeting :k here and attach coi				
H Ch	eck ty	pe of organization Section 50:		ate foundation			undation status was t n 507(b)(1)(A), chec				
S	ection	4947(a)(1) nonexempt charitable t				411451 555115					
				▼ Cash	rual		ation is in a 60-month n 507(b)(1)(B), chec				
line	9 ear (7 = 16)		Other (specify) rt I, column (d) musi	t be on cash basis.)		under sectio	11 307(b)(1)(b), clicc	K Hele I I			
Pa	rt I	Analysis of Revenue and total of amounts in columns (b), (c), an	Expenses (The	(a) Revenue and	(b) N	et investment	(c) Adjusted net	(d) Disbursements			
		necessarily equal the amounts in column instructions)		expenses per books	(6) 10	income	income	purposes (cash basis only)			
	1	Contributions, gifts, grants, etc , re	ceived (attach								
		schedule)									
	2	Check ► ☐ If the foundation is not Sch B	required to attach								
	3	Interest on savings and temporary	cash investments	23		23	23				
	4	Dividends and interest from securit		6,959		6,959	6,959				
	_ т 5а	Gross rents				-,	-,				
	b	Net rental income or (loss)									
Revenue	6a	Net gain or (loss) from sale of asse		1,097							
	ь	Gross sales price for all assets on	_								
	7	46,968 Capital gain net income (from Part			1,097						
	8	Net short-term capital gain									
	9	Income modifications									
	10a	Gross sales less returns and									
		allowances									
	b	Less Cost of goods sold	•								
	C	Gross profit or (loss) (attach sched Other income (attach schedule)									
	11 12	Total. Add lines 1 through 11 .		8,079		8,079	6,982				
	13	Compensation of officers, directors		0,013		0,0.5	3,352				
	14	Other employee salaries and wages									
å	15	Pension plans, employee benefits									
Š	16a	Legal fees (attach schedule)						_			
Expenses	ь	Accounting fees (attach schedule)		750		750	750				
	С	Other professional fees (attach sch	nedule)								
Administrative	17	Interest									
<u>s</u>	18	Taxes (attach schedule) (see instr	•	105			105				
≣	19	Depreciation (attach schedule) and									
늘	20	Occupancy									
를 다	21	Travel, conferences, and meetings									
and	22	Printing and publications Other expenses (attach schedule)		% 58			58				
<u> </u>	23	Total operating and administrative		30			36				
Operating		Add lines 13 through 23	_	913		750	913	0			
<u> </u>	25	Contributions, gifts, grants paid.		152,500				152,500			
_	26	Total expenses and disbursements.									
		25		153,413		750	913	152,500			
	27	Subtract line 26 from line 12									
	a	Excess of revenue over expenses a		-145,334		7 220					
	b c	Net investment income (if negative Adjusted net income (if negative, e				7,329	6,069				
	۱ ۲	, account modific (il negative, e		<u> </u>			0,000				

Part I		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	of year	
اعما			(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments	103,486	3,388	3,388	
	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 (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) 🕨				
		Less allowance for doubtful accounts ▶				
22	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
АS	10a	Investments—U S and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)	126,713	127,526	128,762	
	С	Investments—corporate bonds (attach schedule)	66,049	20,000	19,256	
		Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
		Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis				
	1-7	Less accumulated depreciation (attach schedule)				
	15	Other assets (describe				
	16	Total assets (to be completed by all filers—see the				
	10	instructions Also, see page 1, item I)	296,248	150,914	151,406	
	17	Accounts payable and accrued expenses	290,240	130,914	131,400	
	17	· · · · · · · · · · · · · · · · · · ·				
y.	18	Grants payable				
abilities	19	Deferred revenue				
ē	20	Loans from officers, directors, trustees, and other disqualified persons				
ij	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe				
	23	Total liabilities (add lines 17 through 22)		0		
v		Foundations that follow SFAS 117, check here 🕨 🦵				
Fund Balances		and complete lines 24 through 26 and lines 30 and 31.				
19	24	Unrestricted				
8	25	Temporarily restricted				
Ξ	26	Permanently restricted				
골		Foundations that do not follow SFAS 117, check here 🕨 🔽				
ŏ		and complete lines 27 through 31.				
£	27	Capital stock, trust principal, or current funds	894,872	894,872		
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
4	29	Retained earnings, accumulated income, endowment, or other funds	-598,624	-743,958		
Net	30	Total net assets or fund balances (see instructions)	296,248	150,914		
	31	Total liabilities and net assets/fund balances (see instructions)	296,248	150,914		
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances				
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	jree		
		with end-of-year figure reported on prior year's return)		1	296,248	
2		Enter amount from Part I, line 27a		2	-145,334	
3		Other increases not included in line 2 (itemize)		3		
4		Add lines 1, 2, and 3		4	150,914	
5		Decreases not included in line 2 (itemize) 🟲		5		
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	Part II, column (b), lı	ne 30 . 6	150,914	

the Part VI instructions

Part :	V Capital Gains and	Losses for Tax on Inve	stmen	t Income				
(a) List and describe the kind(s) of property sold (e g , real e 2-story brick warehouse, or common stock, 200 shs MLC				(b) How acquired P—Purchase D—Donation	(c)	ate acquired o , day, yr)	(d) Date sold (mo , day, yr)	
	GE CAPITAL CORP NOT	ES			P	20	12-06-25	2015-03-11
b	ROYAL BANK OF SCOTL				P	+	11-05-23	2015-03-11
	GNMA POOL 203193, D				P	+	92-06-01	2015-03-11
d	GNMA POOL 3068M, DT				P	-	01-04-30	2015-03-11
e	GNMA FOOL SOUGH, DT	D 04701701			r	1 20	01-04-30	2013-03-11
		(6) Depresention allows	d	(m) Coot	or other basis	+	(h) Carn	or (loss)
(€	e) Gross sales price	(f) Depreciation allowed (or allowable)	u		pense of sale			or (loss)) mınus (g)
a	24,9	` '			25,00	0		-78
	20,54	40			20,00	0		540
	20	0.5			21	3		-8
d	48	38			65	8		-170
						+		
	mplete only for assets show		d by the	e foundation	on 12/31/69	+ ,	D Cauna (Cal	(h) gain minus
	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69	la by the	(k) Exc	ess of col (I) ol (J), If any		(k), but not	(11) gain fillings less than -0-) or om col (h))
a								-78
b								540
С С								-8
d								-170
е								
			If gain,	, also enter i	n Part I , line 7	ĺ		
2	Capital gain net income oi	(net capital loss)	If (loss	s), enter -0-	in Part I, line 7	2		1,097
3	Net short-term capital gai	n or (loss) as defined in sections 1222(5) and (6)			•			·
	_	I, line 8, column (c) (see instru			,	. 3		
Part	V Qualification Unde	er Section 4940(e) for R	educe	d Tax on	Net Investme	nt In	come	
		e foundations subject to the se						
	·	-		3 10 (a) tax .	on nec mvesement	· IIICOIII	c ,	
Ifsecti	on 4940(d)(2) applies, leave	this part blank						
		tion 4942 tax on the distributa				eriod?		┌ Yes 🗸 No
If "Yes	" the foundation does not qu	alıfy under section 4940(e) Do	not co	mplete this	part			
1 E n	ter the appropriate amount ir	n each column for each year, se	ee instri	uctions befo	re making any en	ries		
Base	(a) e penod years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	Net va	(c) lue of nonchar	ıtable-use assets		(d) Distribution (col (b) divided	
	2013	9,000			289,404		(cor (b) divided	000 031098
	2012	15,285			303,683			000 050332
	2011	7,500			306,152			000 024498
	2010	19,629			309,985			000 063322
	2009	31,381			336,534			000 093248
2	Total of line 1, column (d)					2		000 262498
3		for the 5-year base period—div undation has been in existence				3		000 052500
4	Enter the net value of non	charitable-use assets for 2014	from P	art X, line 5	[4		289,052
5	Multiply line 4 by line 3.				[5		15,175
6	Enter 1% of net investme	nt income (1% of Part I, line 27	ne (1% of Part I, line 27b)			6		73
7	Add lines 5 and 6				[7		15,248
8	Enter qualifying distribution	ons from Part XII, line 4			[8		152,500

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See

	990-PF (2014)			age 4			
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ► ☐ and enter "N/A"						
	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			73			
_	here Fand enter 1% of Part I, line 27b						
С	Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
3							
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others						
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 5			73			
6	C redits/Payments						
а	2014 estimated tax payments and 2013 overpayment credited to 2014 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						
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			73			
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						
1261i 1a	t VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No			
10	It participate or intervene in any political campaign?	1a	163	No			
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions						
_	for definition)?	1b		No			
	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	Did the foundation file Form 1120-POL for this year?	1 c		No			
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation 🕨 \$ (2) On foundation managers 🕨 \$						
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		No			
3	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles						
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No			
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		No			
	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	Yes				
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	Yes				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) MI						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney						
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation 🎜	8b		No			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)						
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?						
10	If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	9		No			
10	and addresses.	10		No			

			<u>'</u>	age c
	t 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			l
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
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	Yes	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ▶JAMES M MUELLER CPA Telephone no ▶(317)870-	8148	
	Located at 7305 Normandy Way Indianapolis IN ZIP+4 4627815			
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 over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
1 41	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)			
Lu	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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) Yes Vo			
h	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
b	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
		10		
_	Organizations relying on a current notice regarding disaster assistance check here			
C		,		No.
_	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
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? Yes ▼ No			
	If "Yes," list the years > 20, 20, 20			
Ь	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		├──
С	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			
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		No
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		No

Sa During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	Par	t VII-B	Statements Rega	rdir	ng Activities for	Wŀ	nich Form 4720	May	Be Required (cont	inue	<u>d)</u>		age o
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)* (see instructions). (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Provide or any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? (7) Organizations relying on a current notice regarding disaster assistance check here. (8) Cryanizations relying on a current notice regarding disaster assistance check here. (9) Tiff wes, "tatch the statement required by Regulations section 53,4945-5(d). (9) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (9) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (1) A at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? (1) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1) List all officers, directors, trustees, foundation managers and their compensation (1) Any provided the foundation receive any proceeds or have any net income attributable to the transaction? (1) Contributions to employee benefit plans and Contractors 1) List all officers, directors, trustees, foundation managers and their compensation (1) Compensation (1) Compensation			_								ľ		
on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes?		(1) Carry	on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 494	45(e)) [?]	. No			
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a chantable, etc., organization described in section 4945(d)(4)(A) (a) Fose instructions). (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) If any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? (6) If the answer is "Yes" to question 52 (4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (7) If the answer is "Yes" to question 52 (4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (8) If the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (9) If the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (9) If Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? (1) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employees (other than those included on line 1—see instructions). If none, enter "NONE." (b) Title, and average hours per week devoted to position of the sillowences of the position		(2) Influer	nce the outcome of any	spec	ıfıc publıc election (see	section 4955), or to	car	ry				
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a chantable, etc., organization described in section 4945(d)(4)(A) (a) Fose instructions). (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) If any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? (6) If the answer is "Yes" to question 52 (4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (7) If the answer is "Yes" to question 52 (4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (8) If the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (9) If the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (9) If Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? (1) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employees (other than those included on line 1—see instructions). If none, enter "NONE." (b) Title, and average hours per week devoted to position of the sillowences of the position			•	-			* *			No			
(4) Provide a grant to an organization other than a chantable, etc., organization described in section 4945(d)4 (A)7 (see instructions). (5) Provide for any purpose other than a religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?. (5) If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? (6) Organizations relying on a current notice regarding disaster assistance (see instructions)? (7) Organizations relying on a current notice regarding disaster assistance (see instructions)? (8) Provide for any purpose other than totice regarding disaster assistance (see instructions)? (9) Organizations relying on a current notice regarding disaster assistance (see instructions)? (9) Organizations relying on a current notice regarding disaster assistance (see instructions)? (9) If the aniswer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (1) Pres, "attach the statement required by Regulations section 53.4455-5(d). (6) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (1) Fres, "to 6b, file Form 8870. (1) If "Yes" to 6b, file Form 8870. (2) At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? (1) Fres Form 8870. (2) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (1) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (1) List all officers, directors, trustees, foundation managers and their compensation (see instructions). (1) Contributions to employee benefit plans and deferred compensation of the Highly Paid Employees (souther than those includ					_								
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No b If any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?		(4) Provid	e a grant to an organiza	ation	other than a charita	ble,	etc , organization de			7 N.			
educational purposes, or for the prevention of cruelty to children or animals?								•	Yes	NO			
B If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?										-			
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?													
Organizations relying on a current notice regarding disaster assistance check here	D										<u></u>		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?											. <u>50</u>		
tax because it maintained expenditure responsibility for the grant?													
If "Yes," attach the statement required by Regulations section 53.4945–5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	С	•			**		· ·			_			
Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								•	Yes	′ No			
a personal benefit contract?													
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b No If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes Vo b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b PartVIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position PRES/TREAS/DIR 000 00 VCTORIAR MUELLER PRES/TREAS/DIR 000 00 VPRES/SEC/DIR 001 00 PRES/TREAS/DIR 001 00 ON 00 O	6a	Did the for	undation, during the yea	ir, re	ceive any funds, dire	ectly	or indirectly, to pay	prer		_			
If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes Vo b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position (If not paid, enter -0-) VICTORIA R MUELLER PRES/TREAS/DIR 0 7305 Normandy Way 1000 00 Indianapolis, IN 46278 AMES M MUELLER V-PRES/SEC/DIR 0 7114 Algner Court 1010 000 00 Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to noisition (c) Compensation paid more than \$50,000		•											
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes Vob b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Time	b	Did the for	undation, during the yea	ar, pa	y premiums, directly	orı/	ndirectly, on a perso	nal	benefit contract?		6b		No
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position of the voted to		If "Yes" to	6b, file Form 8870.										
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position VICTORIA R MUELLER PRES/TREAS/DIR 000 00 PRES/TREAS/DIR 000 00 V-PRES/SEC/DIR 001 00 PRES/SEC/DIR 001 00 V-PRES/SEC/DIR 002 00 V-PRES/SEC/DIR 003 00 V-PRES/SEC/DIR 004 005 V-PRES/SEC/DIR 005 005 V-PRES/SEC/DIR 006 007 V-PRES/SEC/DIR 007 007 V-PRES/SEC/DIR 008 007 V-PRES/SEC/DIR 009 009 V-PRES/SEC/DIR 000 000 V-PRES/SEC/DIR	7a	At any tim	ne during the tax year, w	vas tl	ne foundation a party	/ to a	a prohibited tax shel	ter t	ransaction? TYes F	No			
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position VICTORIA R MUELLER PRES/TREAS/DIR 7305 Normandy Way Indianapolis, IN 46278 JAMES M MUELLER V-PRES/SEC/DIR 7305 Normandy Way Indianapolis, IN 46278 JAMES M MUELLER V-PRES/SEC/DIR 000 00 DIRECTOR 000 00 DIRECTOR 114 A Igner Court Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week devoted to position (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred benefit plans and deferred other with an address of each employee hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred other with an address of each employee benefit plans and deferred other allowances	b	If yes, dıd	the foundation receive	any	proceeds or have an	y ne	t income attributable	e to t	he transaction?		7b		
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position VICTORIA R MUELLER PRES/TREAS/DIR 000 00 PRES/TREAS/DIR 000 00 Indianapolis, IN 46278 JAMES M MUELLER V-PRES/SEC/DIR 001 00 DIRECTOR 000 00 DIRECTOR 114 A Igner Court Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week devoted to position (b) Title, and average hours per week devoted to position (c) Compensation (see instructions). (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances	Par			t Off	ficers, Directors	5, Tı	rustees, Founda	tio	n Managers, Highly	Paid	l Emp	loyee	es,
(a) Name and address hours per week devoted to position (If not paid, enter -0-) employee benefit plans and deferred compensation other allowances VICTORIA R MUELLER PRES/TREAS/DIR 0000 00 00 00 00 00 00 00 00 00 00 00	1	List all offi	icers, directors, trustee	s, foı	ındation managers a	nd t	heir compensation (see i	nstructions).				
MICTORIAR MUELLER PRES/TREAS/DIR O00 00 7305 Normandy Way Indianapolis, IN 46278 JAMES M MUELLER V-PRES/SEC/DIR O01 00 NIMBERLY M BALDINI JIMBERLY M BALDINI JIMBERLY M BALDINI Tindianapolis, IN 46278 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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					•		•			(e)	Expens	e acco	ount
VICTORIA R MUELLER 7305 Normandy Way Indianapolis, IN 46278 JAMES M MUELLER 7305 Normandy Way Indianapolis, IN 46278 V-PRES/SEC/DIR 001 00 Indianapolis, IN 46278 KIMBERLY M BALDINI 7114 Aigner Court Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to position devoted to position of the plans and deferred of the plans and the plans and deferred of the plans and deferred of the plans		(a) Nan	ne and address	1	•	(
7305 Normandy Way Indianapolis, IN 46278 JAMES M MUELLER V-PRES/SEC/DIR 001 00 7305 Normandy Way Indianapolis, IN 46278 KIMBERLY M BALDINI DIRECTOR 000 00 7114 Aigner Court Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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 devoted to position other allowances	VICTO	RIA R MUELLI	 ER	1	·				a deletted compensation				
Indianapolis, IN 46278 JAMES M MUELLER 7305 Normandy Way Indianapolis, IN 46278 KIMBERLY M BALDINI DIRECTOR 00000 7114 Aigner Court Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to position devoted to position devoted to position devoted to position.				-	•		Ĭ						
7305 Normandy Way Indianapolis, IN 46278 KIMBERLY M BALDINI 7114 Aigner Court Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to position devoted to position and deferred devoted to position devoted to position devoted to position other allowances			•										
Indianapolis, IN 46278 KIMBERLY M BALDINI 7114 Aigner Court Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to position devoted to position and deferred plans and deferred other allowances	JAMES	M MUELLER		V-P	RES/SEC/DIR	0							
DIRECTOR O O O O O O O O O	7305	Normandy	/ Way	001	00								
7114 Aigner Court Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to position devoted to position.													
Indianapolis, IN 46278 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to position devoted to position.	KIMBE	RLY M BALDI	NI	-			0						
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." (a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to position devoted to position.		-		000	00								
(a) Name and address of each employee hours per week paid more than \$50,000 (b) Title, and average hours per week devoted to position devoted to position						Ļ				<u> </u>			
(a) Name and address of each employee hours per week paid more than \$50,000 (c) Compensation plans and deferred other allowances		Compensat	ion of five highest-paid	l emp	oloyees (other than t	thos	e included on line 1— T	see		nter "I	NONE."		
	(a)			yee	hours per week	_	(c) Compensatio	n	employee benefit plans and deferred				
Total number of other employees hald over \$50,000													

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Part VIII Information About Officers, Directors, To and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional serv	vices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	_	
	-	
	-	
	1	
Total number of others receiving over \$50,000 for professional serv	ıces	
<u> </u>	10001	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Incluorganizations and other beneficiaries served, conferences convened, research paper		Expenses
1 N/A		0
2		
3		
4		
Part IX-B Summary of Program-Related Investme		
Describe the two largest program-related investments made by the foundation of	during the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 187.921 105.533 1h 1c 1d 293.454 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 293.454 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 4.402 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 5 289.052 14,453 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 14.453 1 Tax on investment income for 2014 from Part VI, line 5. 73 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 2c 7.3 Distributable amount before adjustments Subtract line 2c from line 1. 3 14.380 3 4 4 5 5 14.380 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 14.380 Part XIII Oualifying Distributions (see instructions) A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 🐯 1a 152.500 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 152,500 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 73 152,427 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

the section 4940(e) reduction of tax in those years

	olidistributed fricollie (see liistri	actions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7	Сограз	rears prior to 2015	2013	14,380
	· • • • • • • • • • • • • • • • • • • •				1.,555
	Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only				
	·				
	Total for prior years 20, 20, 20				
3	, , , , , , , , , , , , , , , , , , , ,				
	From 2009				
	From 2011				
	From 2012				
	Total of lines 3a through e	6,618			
		0,010			
4	Qualifying distributions for 2014 from Part				
_	XII, line 4 \$ 152,500 Applied to 2013, but not more than line 2a				
	-				
	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
_	required—see instructions)				14,380
	Applied to 2014 distributable amount	138,120			14,300
	Remaining amount distributed out of corpus	130,120			
5	Excess distributions carryover applied to 2014				
	(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	144,738			
b	Prior years' undistributed income Subtract line 4b from line 2b				
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 Subtract line 6c from line 6b Taxable amount				
a	—see instructions				
6	Undistributed income for 2013 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must				
_	be distributed in 2015				
,	A mounts 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	1,968			
	applied on line 5 or line 7 (see instructions)	1,900			
9	Excess distributions carryover to 2015.	142,770			
4^	Subtract lines 7 and 8 from line 6a	112,770			
	Analysis of line 9 Excess from 2010 4,372				
	Excess from 2010				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
_					

	Part XIV Private Operating Foun	idations (see in	nstructions and Pa	art VII-A, questic	on 9)		
La	If the foundation has received a ruling or defoundation, and the ruling is effective for 20						
ь	Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)						
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal	
	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,						
d	line 4 for each year listed						
u	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						
а	"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						
С	"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						
Pa	rt XV Supplementary Information assets at any time during			the organization	on had \$5,000 o	or more in	
L	Information Regarding Foundation Manage		ilisti uctions.)				
а	List any managers of the foundation who ha before the close of any tax year (but only if	ve contributed mo they have contrib	re than 2% of the to uted more than \$5,0	otal contributions r 000) (See section	eceived by the found 507(d)(2))	dation	
	NONE						
b	List any managers of the foundation who ov				ly large portion of th	ne	
	ownership of a partnership or other entity)	of which the founda	ation has a 10% or	greater interest			
	NONE						
2	Information Regarding Contribution, Grant	, Gift, Loan, Schola	arship, etc., Progran	ns:			
	Check here F if the foundation only make	es contributions t	o preselected chari	table organizations	and does not accer	ot	
	unsolicited requests for funds If the found	atıon makes gıfts,					
	other conditions, complete items 2a, b, c, a	and d					
_			-6+b	! -			
а	The name, address, and telephone number Victoria R Mueller	or e-man address	of the person to wil	om applications sn	ould be addressed		
	7305 Normandy Way						
	Indianapolis,IN 462781561						
b	The form in which applications should be s Letter Form, All Pertinent Information Do I		mation and material	ls they should inclu	ıde		
_	Any submission deadlines	10t Call					
	None						
d	Any restrictions or limitations on awards, s	such as by geogra	phical areas, charita	able fields, kinds of	institutions, or othe	er	
	None						

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Part XV Supplementary Information (continued)	

3 Grants and Contributions Paid	l During the Year or Ap _l	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year Gazelle Foundation - 501(c)(3) PO Box 1487 Austin, TX 78767		PC	General Operations	500
Ann Arbor Area Community Foundation - 501(c)(3) 301 N Main Street Suite 300 Ann Arbor, MI 48104		PC	Establish Donor Advised Fund	152,000
Takal			<u> </u>	152500
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	152,500
			<u> </u>	

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	I-A Analysis of Income-Produci		s usiness income	Excluded by section	n 512, 513, or 514	(e)
1 Progra	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
	and contracts from government agencies					
3 Intere	ership dues and assessments est on savings and temporary cash tments			14	23	
	nds and interest from securities			14	6,959	
	ntal income or (loss) from real estate -financed property.					
	debt-financed property					
	ntal income or (loss) from personal					
	Investment income					
8 Gain d	or (loss) from sales of assets other than					
	tory				1,097	
	come or (loss) from special events profit or (loss) from sales of inventory					
11 Other	revenue a Sec 1276a1 Discount			14		
b	Ord Income			14		
e	tal Add columns (b), (d), and (e).				8,079	
13 Total.	Add line 12, columns (b), (d), and (e).			1	13	8,079
	worksheet in line 13 instructions to verify controls. I-B Relationship of Activities to		olishment of E	Exempt Purpos	es	
Line No.	Explain below how each activity for which	h income is rej	oorted in column ((e) of Part XVI-A c	ontributed importa	
N/A	N/A					

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Part XVII	Information Ro Noncharitable				actio	ns and Relations	ships With			
	ganızatıon dırectly or ı 01(c) of the Code (othe								Yes	No
organızatı	ons?									
	from the reporting four									
								1a(1)		No
(2) Othe	rassets							1a(2)		No
b Other tra										
(1) Sales	of assets to a noncha	ırıtable exemp	ot organizatio	n				1b(1)		No
(2) Purc	hases of assets from a	noncharitable	e exempt orga	anızatıon				. 1b(2)		No
(3) Renta	al of facilities, equipme	ent, or other a	ssets					1b(3)		No
(4) Reim	bursement arrangemer	nts						1b(4)		No
(5) Loan	s or loan guarantees.							1b(5)		No
(6) Perfor	mance of services or n	nembershıp o	r fundraısıng	solicitations.				1b(6)		No
c Sharing o	f facilities, equipment,	maılıng lısts,	other assets,	, or paid employ	ees			1c		No
of the goo	wer to any of the above ds, other assets, or se nsaction or sharing arr	ervices given angement, sh	by the reporti now in column	ng foundation I (d) the value o	f the fo	undation received le ods, other assets, oi	ss than fair mark services receive	et value ed	•	
(a) Line No	(b) Amount involved	(c) Name of r	noncharitable exe	empt organization	(d)	Description of transfers,	transactions, and sha	arıng arra	ngemer	nts
										
+										
-										
described	ndation directly or indi I in section 501(c) of th complete the following	he Code (othe						. ⊢ _Y €	es F	√ _{No}
	(a) Name of organization	n	(t) Type of organiza	tion	(с	Description of relati	onship		
-										
Sign Here	er penalties of perjury, best of my knowledge a rmation of which prepar *****	and belief, it is rer has any ki	s true, correc	t, and complete		******	her than taxpaye May the return		sed on	all
"	Signature of officer or t	rustee		Date	,	Title		tr)? 🔽 🖰	Yes ┌ I	No
	Print/Type preparer's		Preparer's S	Signature		Date 2015-09-11	Check if self- employed ▶▼	PTIN	<u> </u>	
Paid Proparer	Firm's name ► JAMES M MUELLER	Firm's name Firm's EIN								
Preparer Use Only	Firm's address ► 7305 NORMANDY V 462781561	VAY INDIAN	NAPOLIS, IN				Phone no (317 8148	7)870-		

TY 2014 Accounting Fees Schedule

Name: WOLFE FAMILY FOUNDATION

EIN: 38-2532527

Software ID: 14000292

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
James M Mueller CPA	750	750	750	

TY 2014 Explanation of Non-Filing with Attorney General Statement

Name: WOLFE FAMILY FOUNDATION

EIN: 38-2532527

Software ID: 14000292

Software Version: 14.4.1.0

Statement: Per the Michigan Attorney Generals Office, Form 990-PF is not

required to be filed with that office because all assets are

maintained outside the State of Michigan.

DLN: 93491254007035

Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.

TY 2014 Gain/Loss from Sale of Other Assets Schedule

Name: WOLFE FAMILY FOUNDATION

EIN: 38-2532527

Software ID: 14000292

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Met hod	Sales Expenses	Total (net)	Accumulated Depreciation
GE CAPITAL CORP NOTES	2012-06	Р	2015-03		24,922	25,000			-78	
ROYAL BANK OF SCOTLAND NOTE	2011-05	Р	2015-03		20,540	20,000			540	
GNMA POOL 203193, DTD 08/01/87	1992-06	Р	2015-03		205	213			-8	
GNMA POOL 3068M, DTD 04/01/01	2001-04	Р	2015-03		488	658			-170	

TY 2014 General Explanation Attachment

Name: WOLFE FAMILY FOUNDATION

EIN: 38-2532527

Software ID: 14000292

Identifier	Return Reference	Explanation
	Election for Treatment of Unused Prior Year Corpus Distributions Pursuant to IRC Section 4942g3 and	Election for Treatment of Unused Prior Year Corpus Distributions Pursuant to IRC Section 4942g)3) and Reg 53 4942a)3c)2)iv) the Foundation elects to treat unused prior tax years distributions that were treated as corpus distributions as distributions from corpus in the current tax year ELECTION TO AMORTIZE BOND PREMIUM Under Treasury Regulation Section 1 1714a)1) Taxpayer herein makes the election to amortize bond premium on taxable bonds for this year and all future years For the tax Year Ended 04/30/2015 Bond Premium in the amount of 10 has been offset against interest income from Securities

TY 2014 Investments Corporate Bonds Schedule

Name: WOLFE FAMILY FOUNDATION

EIN: 38-2532527

Software ID: 14000292

Name of Bond	End of Year Book Value	End of Year Fair Market Value
Nextera Energy 5 Pref Sub Debenture	20,000	19,256

TY 2014 Investments Corporate Stock Schedule

Name: WOLFE FAMILY FOUNDATION

EIN: 38-2532527

Software ID: 14000292

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PIMCO Mutual Fund	107,131	104,946
US Bancorp Preferred Stock	20,395	23,816

DLN: 93491254007035

TY 2014 Other Expenses Schedule

Name: WOLFE FAMILY FOUNDATION

EIN: 38-2532527

Software ID: 14000292

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK OF ANN ARBOR - BANK FEES	13		13	
STATE OF MICHIGAN - ANNUAL REPORT FEE	20		20	
WELLS FARGO ADVISORS - WIRE TRANSFER FEE	25		25	

TY 2014 Taxes Schedule

Name: WOLFE FAMILY FOUNDATION

EIN: 38-2532527

Software ID: 14000292

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Federal Income Tax Paid	105		105	