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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

▶ 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

For c	alend	ar year 2014 or tax year beginning $07/01/14$, an	d ending 06/30	0/15			
Nan	e of four	ndation				A Emplo	yer identification number	
•••							1050050	
		ER FAMILY FOUNDATION					-1873953	
		street (or PO box number if mail is not delivered to street address) E 86TH STREET		5	om/suite		none number (see instructions $7-815-9553$	5)
		state or province, country, and ZIP or foreign postal code						. 🗆
I	DIA	ANAPOLIS IN 46240				C If exer	nption application is pending,	check here
G C	heck a	all that apply Initial return Initial re	eturn	of a former public ch	arıty	D 1. Fo	reign organizations, check he	re 🕨
		Final return Amende	ed re	eturn	-	2. Fo	reign organizations meeting t	he
		Address change Name c	chan	ge		1	% test, check here and attach	
H C	heck t	ype of organization: X Section 501(c)(3) exempt priva	ate f	oundation	_	E If or iva	ate foundation status was tern	ninated under
_				private foundation			n 507(b)(1)(A), check here	>
		ket value of all assets at J Accounting method		X Cash Accr	ual	F If the f	foundation is in a 60-month te	rmination
en	d of ye	ear (from Part II, col. (c), Other (specify)				under	section 507(b)(1)(B), check h	nere 🕨 📘
	e 16) 🎚	· · · · · · · · · · · · · · · · · · ·		e on cash basis.)				
	rt I	Analysis of Revenue and Expenses (The total of		(a) Revenue and	(b) No.	unun alemant	(a) Advistad ast	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	-	expenses per books		investment icome	(c) Adjusted net income	purposes
	4		+			-,	, , ,	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule) Check ► X if the foundation is not required to attach Sch	.h					
	2	Interest on savings and temporary cash investments	P۲	260		260		
	4	Dividends and interest from securities	┝	343,196		343,196		
	5a	Gross rents	ŀ	343,130		343,190		
4.	b	Net rental income or (loss)						
ĭe	6a	Net gain or (loss) from sale of assets not on line 10	-†"	356,475				
Revenue	b Gross sales pnce for all assets on line 6a 2,976,904 7 Capital gain net income (from Part IV, line 2)							
Š						356,475		
	8	Net short-term capital gain	_	***************************************		·	0	
	9	Income modifications	ľ					
	10a	Gross sales less returns and allowances				***************************************		
	b	Less: Cost of goods sold						
	С	Gross profit or (loss) (attach schedule)		RECEIVEL	0			
	11	Other income (attach schedule) STMT 1		21	S	21		
	12	Total. Add lines 1 through 11	ဖျ	CED 699,952		699,952	0	
Ø	13	Compensation of officers, directors, trustees, etc	5	JL 162,295	181	4,988		244,426
Spenses	14	Other employee salaries and wages	<u> </u>		7=1			
လူခ်	15	Pension plans, employee benefits	ا ا	OG1ds/408	<u> </u>	2,168		106,232
CX	16a	Legal fees (attach schedule)						
	þ	Accounting fees (attach schedule) STMT 2	-	6,307	ļ	30		6,277
Z ≩	С	Other professional fees (attach schedule) STMT 3	-	39,671		39,671		
	17	Interest	Ļ		}		ļ	ļ
Ais.	18	Taxes (attach schedule) (see instructions) STMT 4		20,294				29
ΪĒ	19	Depreciation (attach schedule) and depletion STMT 5	 	2,436			-	12 222
Δ,	20	Occupancy	-	13,320	<u> </u>			13,320
Ş	21	Travel, conferences, and meetings	ŀ		ļ	·· ·· ·· -	 	
<u></u>	22	Printing and publications	ŀ	10 007	 -		 	12 097
ξĒ	23	Other expenses (att sch) STMT 6	}	12,067	 -			12,087
Operating and Administrative Exp	24	Total operating and administrative expenses.	- 1	264 700		16 OF	,	382,371
Je.	25	Add lines 13 through 23	}	364,790 748,486		46,857	<u> </u>	382,371 748,486
Ö	25	Contributions, gifts, grants paid Total expenses and dishursements. Add lines 24 and 25	}	1,113,276		46,857	7	1,130,857
	26	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12		1,113,210	 	40,63	'	1,130,837
	27	Excess of revenue over expenses and disbursements	ļ	-413,324				
	l a	Net investment income (if negative, enter -0-)	ŀ	410,024	-	653,095	 	
	b	Adjusted net income (if negative, enter -0-)	ŀ		 	333,090		0

Part II Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) 1 Cash – non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable Less allowance for doubtful accounts Less allowance for doubtful accounts Pledges receivable	980k Value 219,859 946,851	(c) Fair Market Value 219,859 946,850
2 Savings and temporary cash investments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶		
3 Accounts receivable ► Less allowance for doubtful accounts ►	946,851	946,850
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)	L	
7 Other notes and loans receivable (att. schedule)		
Less allowance for doubtful accounts ▶ 0		
9 8 Inventories for sale or use		
9 Prepaid expenses and deferred charges 10a Investments – U.S. and state government obligations (attach schedule)		
10a Investments – U.S. and state government obligations (attach schedule)		
b Investments – corporate stock (attach schedule) SEE STMT 7 10,432,152 1	0,362,434	12,723,148
c Investments – corporate bonds (attach schedule) SEE STMT 8 717,541	508,567	501,098
11 Investments – land, buildings, and equipment basis		
Less accumulated depreciation (attach sch.)		
12 Investments – mortgage loans		
13 Investments – other (attach schedule)		
14 Land, buildings, and equipment basis ▶ 21,213		
Less accumulated depreciation (attach sch.) STMT 9 19,995 3,654	1,218	
15 Other assets (describe ▶)		
16 Total assets (to be completed by all filers – see the		
instructions Also, see page 1, item I) 12,445,962 1	2,038,929	14,390,955
17 Accounts payable and accrued expenses		
18 Grants payable		
19 Deferred revenue		
20 Loans from officers, directors, trustees, and other disqualified persons		
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule)		
22 Other liabilities (describe ▶)		
23 Total liabilities (add lines 17 through 22)	0	
Foundations that follow SFAS 117, check here	Į	
and complete lines 24 through 26 and lines 30 and 31.		
24 Unrestricted		
25 Temporarily restricted		
26 Permanently restricted		
Temporarily restricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 12,445,962 1 Total liabilities and net assets/fund balances (see		
and complete lines 27 through 31.		
27 Capital stock, trust principal, or current funds 12,445,962 1	L2,038 <u>,</u> 929	
28 Paid-in or capital surplus, or land, bldg , and equipment fund		
29 Retained earnings, accumulated income, endowment, or other funds		
30 Total net assets or fund balances (see instructions) 12,445,962 1	L2,038,929	
31 Total liabilities and net assets/fund balances (see		
	12,038,929	
Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with		
end-of-year figure reported on prior year's return)	_ 1_	12,445,962
2 Enter amount from Part I, line 27a	2	-413,324
3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 10	3	6,291
4 Add lines 1, 2, and 3	4	12,038,929
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) - Part II, column (b), line 30	6	12,038,929

Part IV Capital Gains at	nd Losses for Tax on Investi	ment Incon	_ ne	20.000			1 age o
(a) List and descr	tipe the kind(s) of property sold (e.g., real estate, rehouse, or common stock, 200 shs. MLC Co.)			(b) How acquired P – Purchase D – Donation		ate acquired , day, yr)	(d) Date sold (mo , day, yr)
ta PUBLICLY TRADED	SECURITITES			P	VAF	RIOUS	VARIOUS
b PUBLICLY TRADED	SECURITIES			P	VAF	RIOUS	VARIOUS
c CAPITAL GAIN DI	STRIBUTIONS			P	VAF	RIOUS	VARIOUS
						, 	
_e	· · · · · · · · · · · · · · · · · · ·						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or of plus expens				ain or (loss) (f) minus (g)
a 599,463				609,354			-9,891 59,360
ь 2,070,435				2,011,075			59,360
c 307,006							307,006
_d							
Complete only for assets showing	g gain in column (h) and owned by th	e foundation o	on 12/31/69) 		(I) Gains (C	ol (h) gain minus
(ı) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over col (j	• • • • • • • • • • • • • • • • • • • •			ot less than -0-) or (from col (h))
a							-9,891
b							-9,891 59,360
с							307,006
d							
e						···	
2 Capital gain net income or (net c	apıtal loss) If gain, also enter		•		2		356,475
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and	d (6).	_				
If gain, also enter in Part I, line 8	, column (c) (see instructions). If (los	s), enter -0- in	7		}		
Part I, line 8					3		
Part V Qualification U	nder Section 4940(e) for Red	uced Tax	on Net Ir	vestment Inco	ome		
(For optional use by domestic private	foundations subject to the section 4	940(a) tax on	net investn	nent income)		_	
If section 4940(d)(2) applies, leave the	nis part blank						
iii decitori 4040(d)(2) applied, leave ti	no part blank						
	tion 4942 tax on the distributable ame			ase period?			Yes X No
If "Yes," the foundation does not qua	lify under section 4940(e) Do not cor	nplete this pa	rt				
1 Enter the appropriate amount in	each column for each year, see the i	structions be	fore makın	g any entries			
(a) Base period years	(b)			(c)			(d) Distribution ratio
Calendar year (or tax year beginning in	Adjusted qualifying distribut	ions	Net value	of nonchantable-use asse	ets		b) divided by col (c))
2013	82	22,788		12,291,			0.066939
2012	1,15	57,978		12,610,	347		0.091828
2011	9(50,008		12,982,	734		0.073945
2010	1,1:	18,501		14,249,	087		0.078496
2009	1,0	54,105		13,785,	497		0.076465
						T	
2 Total of line 1, column (d)						2	0.387673
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5	, or by the		Ī		
number of years the foundation	has been in existence if less than 5 y	ears				3	0.077535
-	•				Γ		
4 Enter the net value of noncharita	able-use assets for 2014 from Part X,	line 5			ŀ	4	12,056,409
					Ī		<u> </u>
5 Multiply line 4 by line 3		•			Ì	5	_934,794
					1		
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)				<u> </u>	6	6,531
	(Ī		
7 Add lines 5 and 6						7	941,325
					Ì	- -	
8 Enter qualifying distributions fro	m Part XII. line 4					8	1,130,857
· · -	an line 7, check the box in Part VI, lin	e 1b, and com	nplete that	part using a 1% tax	rate. S		
Part VI instructions	.,	,		,			
							5 - 990 PF (004

orm	990-PF (2014) HOOVER FAMILY FOUNDATION 35-1873953			Pa	ige 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				-
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)				
ъ	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		6 1	531
U	here \blacktriangleright $\boxed{\mathbf{X}}$ and enter 1% of Part I, line 27b	· ` -			
_					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b).				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0
3	Add lines 1 and 2	3		6,	31
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		6,!	531
6	Credits/Payments				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 15, 600				
b	Exempt foreign organizations – tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868) 6c	1			
C	· · · · · · · · · · · · · · · · · · ·				
d _	Backup withholding erroneously withheld 6d	_		4 E .	c 0 0
7	Total credits and payments Add lines 6a through 6d	7		15,	<u>600</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		9,0	<u> 269</u>
11 _	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 9,069 Refunded ▶	11			
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		1		
Ь	Instructions for the definition)?		1b		X
	•		110		-22
	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			1 '	77
С	Did the foundation file Form 1120-POL for this year?		1c		X
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		x
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	1	x
4-			<u> </u>	┼─	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	NT /	4a	+	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	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	x	
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 Pa	ırt XV	7	X	
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)			 	
Ja	IN			1	
ı.					1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
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)? If "Yes,"			1	
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses	_	10	1.	X
_			Form	90-P	F (2014)

orm	990-PF (2014) HOOVER FAMILY FOUNDATION 35-1873953			Pa	<u>ige 5</u>
Pa	rt Vil-A Statements Regarding Activities (continued)				
1	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified				
	person had advisory privileges? If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of ▶ DAVID C. HOOVER Telephone no	> 317-8	15-	955	3
	860 E 86TH STREET SUITE 5				
	Located at ▶ INDIANAPOLIS IN ZIP+4	▶ 46240)		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			1	▶ 🗌
	and enter the amount of tax-exempt interest received or accrued during the year	15			
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		<u> </u>
	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 ▶		<u> </u>		
P	rt 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?	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_			
	disqualified person? Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes	∐ 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)?	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				
	foundation agreed to make a grant to or to employ the official for a period after	<u></u>			
	termination of government service, if terminating within 90 days.)	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	·	1b		X
	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	37 / B			
	were not corrected before the first day of the tax year beginning in 2014?	A\N	1c	ļ	<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and	€7		1	
	6e, Part XIII) for tax year(s) beginning before 2014?	X No		1	
_	If "Yes," list the years ▶ 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)			1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	N7 / 70	 		1
	all years listed, answer "No" and attach statement – see instructions.)	N/A	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 , 20				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	चि			
	at any time during the year?	X No		1	
ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or		1		
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			1	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	37 / T	1	1	
	foundation had excess business holdings in 2014.)	N/A	3b	+	10
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	+	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1	1	•
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b	90 P	X F (2014)
			Form S	JU-P	r- (2014)

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Form	990-PF (2014) HOOVER FAMILY F	OUNDATION	35-1	873953			Page 6
	rt VII-B Statements Regarding A				nued)		· ugo o
5a	During the year did the foundation pay or incur			- 100			
	(1) Carry on propaganda, or otherwise attempt	<u> </u>		Y	es 🗓 No	ł	
	(2) Influence the outcome of any specific public	• • • • • • • • • • • • • • • • • • • •	o carry on,			Ì	
	directly or indirectly, any voter registration of			Ŭ Y₁	es 🗓 No		
	(3) Provide a grant to an individual for travel, si	tudy, or other similar purposes?		∐ Y	es 🗓 No		
	(4) Provide a grant to an organization other that	an a charitable, etc , organization	described in		_		
	section 4945(d)(4)(A)? (see instructions)			Y₁	es 🗓 No		
	(5) Provide for any purpose other than religious	s, charitable, scientific, literary, oi	educational	_	_ 1		
	purposes, or for the prevention of cruelty to	children or animals?		Y	es X No	1	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	he transactions fail to qualify unde	er the exceptions d	escribed in	_		
	Regulations section 53 4945 or in a current not	ice regarding disaster assistance	(see instructions)?		N/A	5b	
	Organizations relying on a current notice regard	ding disaster assistance check he	ere		▶ 🔲 Ì	1	
C	If the answer is "Yes" to question 5a(4), does the	ne foundation claim exemption fro	m the tax				
	because it maintained expenditure responsibilit	y for the grant?		N/A 🗌 Y	es 🗌 No		
	If "Yes," attach the statement required by Regu	lations section 53.4945-5(d)			_	- 1	
6a	Did the foundation, during the year, receive any	y funds, directly or indirectly, to pa	ay premiums		Ì		
	on a personal benefit contract?				es X No	1	
b	Did the foundation, during the year, pay premiu	ims, directly or indirectly, on a pe	rsonal benefit contr	act?	_ (6b	x
	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the founda	ation a party to a prohibited tax sh	elter transaction?	Пү	es X No	- 1	
b	If "Yes," did the foundation receive any proceed			L	A\N	7b	ļ
P	art VIII Information About Officers						
^ -	and Contractors	-,		g,g,		,	
1	ist all officers, directors, trustees, foundatio	n managers and their compens	ation (see instruc	tions).	· · · · · · · · · · · · · · · · · · ·		
			T		(d) Contributions to		
	(a) Name and address		(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benefit plans and deferred compensation		ense account, allowances
	AVID C. HOOVER	INDIANAPOLIS	PRESIDENT		compensation		
	50 E 86TH STREET SUITE 5	IN 46240	40.00	85,406	33,903		0
	NTHIA K. HOOVER	INDIANAPOLIS	SECRETARY	00/100	33,340		
	50 E 86TH STREET SUITE 5	IN 46240	2.00	3,000	0		0
	LEN H. FRIEDMAN	WEST LINN	EXECUTIVE DI	3,000		-	<u> </u>
	2250 NIXON AVE	OR 97068	40.00	70,889	62,216		0
	NE HOOVER	SILVER SPRING	DIRECTOR	70,003	02,210		
	3129 COLLINGSWOOD TERRACE	MD 20904	4.00	3 000	0		^
	Compensation of five highest-paid employe			3,000		·	0
2	"NONE."	ees (other than those included (on line 1 – see ins	tructions). If non-	e, enter		
				T	(d) Contributions to		
	(a) Name and address of each employee paid mor	re than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,
	(a) Hame and dedicas of cach employed paid man	ic than \$65,555	devoted to position	(c) compensation	plans and deferred compensation	other	allowances
	ONE		 	 	Compensation		
N	JNE						
				 			
				<u> </u>			
			 	 		 -	
)		
			 	 	 -	<u> </u>	
			1	1		}	
			 	 	 		
				1			
-	al number of other annihing and are		_ _	.l	l	<u> </u>	
iot	al number of other employees paid over \$50,000)					0
					F	orm 99	0-PF (2014)

and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of serv NONE Fotal number of others receiving over \$50,000 for professional services Part iX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A 2	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	
Fotal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	vice (c) Compensation
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A 2	
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	
organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 N/A 2	
2	Expenses
3	
3 4	
4	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount

Form 990-PF (2014)

2

All other program-related investments. See instructions

Total. Add lines 1 through 3

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Amounts set aside for specific charitable projects that satisfy the

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b (see instructions)

Cash distribution test (attach the required schedule)

Form 990-PF (2014)

1,130,857

1,124,326

6,531

3a

3b

4

2

b

P:	art XIII Undistributed Income (see instructions)	<u></u>		
1	. Distributable amount for 2014 from Part XI,		(a) Corpus	(b) Years prior to 2013	(c)	(d)
	line 7		Обіраз	Tears prior to 2013	2013	2014
2	Undistributed income, if any, as of the end	of 2014				602,580
		01 2014	İ			
b		20				
3	Excess distributions carryover, if any, to 20					
	From 2009					
	From 2010	375,702				
	From 2011	441,165				
	From 2012	326,669				
	<u> </u>	539,163	1			
	From 2013	223,807	1			
	Total of lines 3a through e		1,906,506			
4	Qualifying distributions for 2014 from Part	(II,				
	line 4: > \$ 1,130,857					
	Applied to 2013, but not more than line 2a					
D	Applied to undistributed income of prior year	rs				
	(Election required – see instructions)		···			
С	Treated as distributions out of corpus (Elec	tion				
	required – see instructions)					
	Applied to 2014 distributable amount					602,580
е	Remaining amount distributed out of corpus		528,277			
5	Excess distributions carryover applied to 20					····
	(If an amount appears in column (d), the sa	me				
	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 I	ne 5	2,434,783			
b	Prior years' undistributed income. Subtract					····
	line 4b from line 2b		, ,		,	
С	Enter the amount of prior years' undistribute	ed			· · · · · · · · · · · · · · · · · · ·	
	income for which a notice of deficiency has		1			
	been issued, or on which the section 4942(a	a)				
	tax has been previously assessed	,				
d	Subtract line 6c from line 6b Taxable					
	amount - see instructions					
е	Undistributed income for 2013 Subtract line	<u>,</u>				
	4a from line 2a. Taxable amount – see					
	instructions		İ	1		
f	Undistributed income for 2014 Subtract line	ac .				<u></u>
	4d and 5 from line 1 This amount must be				,	
	distributed in 2015					_
7	Amounts treated as distributions out of corp	ue		***************************************		0
	to satisfy requirements imposed by section	us .				
	170(b)(1)(F) or 4942(g)(3) (Election may be					
	required—see instructions)					
8	Excess distributions carryover from 2009 no					
U)t				
9	applied on line 5 or line 7 (see instructions)		375,702			·····
3	Excess distributions carryover to 2015.					
ΙΛ.	Subtract lines 7 and 8 from line 6a	ļ	2,059,081			
10	Analysis of line 9			1		
	Excess from 2010	441,165				
b	Excess from 2011	326,669	C. C. C. C. C. C. C. C. C. C. C. C. C. C			
С	Excess from 2012	539,163				
d	Excess from 2013	223,807				. •••
е	Excess from 2014	<u>528,</u> 277				

Pa	rt XIV Private Operating Fou	indations (see ins	structions and Part	VII-A, question 9)		
1a	If the foundation has received a ruling or					
	foundation, and the ruling is effective for	2014, enter the date of	the ruling	>		
b	Check box to indicate whether the foundation	ition is a private opera	tıng foundation describ	ped in section 49	42(J)(3) or 4942	(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Total
	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					
	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	Ì				
3	Complete 3a, b, or c for the					
•	alternative test relied upon				ļ	
а	"Assets" alternative test – enter					
	(1) Value of all assets	}			\	
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)				1	
b	"Endowment" alternative test – enter 2/3					
~	of minimum investment return shown in	\ 			1	
	Part X, line 6 for each year listed					
С	"Support" alternative test – enter					
٠	(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					
Ps	art XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5 000 or more	e in assets at
į v	any time during the y		•	the foundation in	ad \$5,000 or more	o iii assets at
1	Information Regarding Foundation Ma					
' a	List any managers of the foundation who	-	e than 2% of the total	contributions received	by the foundation	
-	before the close of any tax year (but only				=	
	N/A	,y wommout	40,000)	,	• •	
b	List any managers of the foundation who	o own 10% or more of	the stock of a corporat	tion (or an equally large	e portion of the	
-	ownership of a partnership or other entit		•			
	N/A	,,	10,000 give			
2	Information Regarding Contribution,	Grant, Gift, Loan. Sci	nolarship, etc., Progr	ams:		
_	Check here ► ☐ If the foundation onl		• • • •		does not accept	
	unsolicited requests for funds. If the four	-	=	-	· ·	
	other conditions, complete items 2a, b,		, 2.0 (000 111011100	to marriadalo of		
	The name, address, and telephone num		of the person to whom	applications should he	e addressed	
-	HOOVER FAMILY FOUND		•	. approactions should be		
	860 E 86TH STREET,			N 46240-180)6	
	The form in which applications should b				-	
Ŋ	SEE STATEMENT 11	o outmined and infolls	and materials (icy silvaid illoidde		
	Any submission deadlines					
·	SEE STATEMENT 12					
	Any restrictions or limitations on awards	such as by geograph	nical areas, charitable t	fields, kinds of institution	ons, or other	
u	factors	, seen as of goograph	s. s. cas, onarrable l	mido oi mondic		
	SEE STATEMENT 13					
						_

Part XV Supplementary Information (c Grants and Contributions Paid During the	continued) he Year or Approved for F	Future Payment		
Recipient	If recipient is an individual,	Foundation	Durance of great or	
	show any relationship to any foundation manager	status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	Tospon		
a Paid during the year SEE STATEMENT 14				
DEED CITEDINE 14				
				748,486
		1		
		in the second se		
		1	}	
		ļ		
		1		
Total			▶ 3a	748,48
b Approved for future payment				
N/A				
Total			▶ 3b	
Total			F 3D 1	000 DE

Enter gross amo		ctivities				_
3.,0	unts unless otherwise indicated		d business income	Excluded	by section 512, 513, or 514	1-5
		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program ser	vice revenue.	Business code	Anoun	code	Allouix	(See instructions)
•				1		
b				1		
				1		
						,
f						
g Fees and	d contracts from government agencies				_	
2 Membership	dues and assessments		·			
3 Interest on s	avings and temporary cash investments			14	260	
4 Dividends ar	nd interest from securities			14	343,196	
	come or (loss) from real estate					
	anced property					
	-financed property					
	come or (loss) from personal property			 _		
7 Other investi				18	21	
•	s) from sales of assets other than inventory			18	356,475	
	or (loss) from special events			 		
	or (loss) from sales of inventory					
	ue a	-		 		
						
				 -		
		-	 	-}	 	
42 Cubtatal Ad	d columns (b) (d) and (s)			ol	699,952	
	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e)	L	<u> </u>	<u> </u>		
	in line 13 instructions to verify calculations)		•		13	699,952
Part XVI-B	Relationship of Activities to the	Accomplishm	ent of Exempt F	Purnose		
Line No.	Explain below how each activity for which incom					
▼	accomplishment of the foundation's exempt put					
N/A						
						

orm 990-PF (201	4) HOOVER FA	MILY I	FOUNDATION		35-1873953		Pag	ge 13
	Information Regardate Exempt Organiza	_	ansfers To and Trans	sactio	ns and Relationships With Nonc	haritable		
1 Did the orga	inization directly or ind	rectly engag	ge in any of the following wi	th any c	ther organization described		Yes	No
			•	-	ction 527, relating to political			
organization	ıs?						'	
a Transfers fro	om the reporting found	ation to a no	oncharitable exempt organiz	ation of	ŗ.			l
(1) Cash						1a(1)		X
(2) Other as	ssets					1a(2)		X
b Other transa								
(1) Sales of	f assets to a noncharit	able exempt	organization			16(1)		x
	ses of assets from a no					1b(2)		X
	of facilities, equipment,		· -			1b(3)		X
, ,	rsement arrangements	-				1b(4)		X
	r loan guarantees	-				1b(5)		х
	=	embership o	r fundraising solicitations			1b(6)	_	X
		· ·	other assets, or paid employ	iees		1c		X
=	· ·	_			mn (b) should always show the fair market		L	1
					the foundation received less than fair mark	ot.		
			-		the goods, other assets, or services receive			
(a) Line no	(b) Amount involved	T	e of noncharitable exempt organization		(d) Description of transfers, transactions, ar		ents	
I/A	(D) Attourn involved	(0) (148)	le of Hondianianie exempt organiza	1011	(u) Description of transfers, transactions, an	io sharing arrangeme		
1/ A		 						
		 -						
	 	 						
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		<u> </u>						
			· · · · · · · · · · · · · · · · · · ·					
2a Is the found	lation directly or indire	ctly affiliated	with, or related to, one or i	nore tax	c-exempt organizations			
	•	-	than section 501(c)(3)) or				es 🛭	Ž No
	mplete the following so	•		000	021 .	٠ ب		J
	(a) Name of organization	oncadio.	(b) Type of organization		(c) Description of relation	onship		
N/A	147.04		(-) -) po	<u> </u>	(6) 5553 (1.01)			
11/12			 					
					 			
			 					
			 					
1 11232	applice of comment dealers of	hat I bassa see	and the sales and states		Adulas and statements and to the base for th	no and habef during		
correct, a	and complete Declaration of	preparer (othe	imeo mis return, including accomp. r than taxpayer) is based on all info	anying sch rmation of	nedules and statements, and to the best of my knowled f which preparer has any knowledge	ge and beiter, it is tru	ie,	
	^	•			Ma	y the IRS discuss this		
Sign	/\	. 1				h the preparer shown		П N

Here

Paid	DENNIS E.	KENLEY			DENNIS	E
Preparer	Firm's name ▶	RIDER	KENLEY	& ASSC	CIATES	3
Use Only	Firm's name	9755 F	RANDALL	DRIVE	SUITE	100

INDIANAPOLIS,

Print/Type preparer's name

NIS E. KENLEY TES

Preparer's signature

46280

08/24/15

Date

P00112405 PTIN 35-1752525 Firm's EIN 317-582-3000 Phone no

Form 990-PF (2014)

Check _____ if self-employed Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasure Internal Revenue Service

Attach to your tax return. Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Identifying number Name(s) shown on return HOOVER FAMILY FOUNDATION 35-1873953 Business or activity to which this form relates INDIRECT DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 1 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 4 500,000 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 7 7 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 9 5,832 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 10 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 5,832 13 Carryover of disallowed deduction to 2015 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) Property subject to section 168(f)(1) election 15 15 2,436 Other depreciation (including ACRS) 16 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions. 0 17 17 MACRS deductions for assets placed in service in tax years beginning before 2014 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction placed in period service only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property e 15-year property 20-year property S/L 25-year property 25 yrs Residential rental S/L 27 5 yrs MM property MM S/L 27 5 yrs MM Nonresidential real 39 vrs S/L property MM S/L Section C—Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year S/L 40-year 40 yrs MM С Summary (See instructions.) Part IV Listed property. Enter amount from line 28 21 21

For Paperwork Reduction Act Notice, see separate instructions.

portion of the basis attributable to section 263A costs

Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

here and on the appropriate lines of your return Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

Form 4562 (2014)

2.436

22

22

23

1804 HOOVER FAMILY FOUNDATION 35-1873953 FYE: 6/30/2015

Federal Statements

	Adjusted Net Income	\$ \$		Charitable Purpose	\$ 4,820 1,457 \$ 6,277
er Income	Net Investment Income	\$ 21	ounting Fees	Adjusted Net	v v
PF, Part I, Line 11 - Oth	Revenue per Books	\$ 21	, Part I, Line 16b - Acco	Net Investment	\$ 30
Statement 1 - Form 990-PF, Part I, Line 11 - Other Income	c		Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees	Total	\$ 4,820 1,487 \$ 6,307
	Description	LEGAL SETTLEMENT INCOME TOTAL	S	Description	ACCOUNTING FEES PAYROLL PROCESSING FEES TOTAL

<u> Stateme</u>	Statement 3 - For	n 990-Pr, Par	I, LIIIe	oc - Onlier Li	orm 990-Pr, Parti, Line 100 - Other riblessional rees	
Description		Total	<u>[</u>	Net Investment	Adjusted Net	Charitable Purpose
INVESTMENT MANAGEMENT FEES	 က	39,671	φ.	39,671	\ \	φ-
TOTAL	·γ.	39,671	৵	39,671	\$	\$
	Stateme	Statement 4 - Form 990-PF, Part I, Line 18 - Taxes	0-PF, Pai	rt I, Line 18 -	Taxes	

Charitable Purpose	\$ \$ \$
Adjusted Net	w w
Net Investment	w w
Total	\$ 20,265
Description	PERSONAL PROPERTY TAX EXCISE TAX TOTAL

1-4

1804 HOOVER FAMILY FOUNDATION

Federal Statements

35-1873953 FYE: 6/30/2015 Statement 5 - Form 990-PF, Part I, Line 19 - Depreciation

	Adjusted Net Income	જ									0
	Net Investment Income	ω									\$ 0 \$
	Current Year Depreciation	<i>s</i> ۍ			1,831	256	349				2,436
	Life	7	7	7	ស	ιΩ	Ω	ι	z	ß	·Λ·
	Method	Į.	Į.	ت.	د.	ت	ت.)B)B	OB	
	Prior Year Depreciation	451 S/L	1,775 S/L	972 S/L	6,411 S/L	895 S/L	1,223 S/L	2,276 200DB	1,720 200DB	1,836 200DB	17,559
Description	Cost Basis	451 \$	1,775	972	9,158	1,279	1,746	2,276	1,720	1,836	21,213 \$
	Date Acquired	2 DESK CHAIRS 8/31/98 \$	OFFICE FURNITURE 6/28/99	OFFICE FURNITURE 2/22/05	COMPUTER SOFTWARE 8/05/10	COMPUTER EQUIPMENT 8/19/10	COMPUTER EQUIPMENT 9/28/10	COMPUTER EQUIPMENT 9/06/11	COMPUTER EQUIPMENT 6/06/12	COMPUTER EQUIPMENT 12/19/11	TOTAL

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Federal Statements

35-1873953 FYE: 6/30/2015

	Charitable Purpose	2,553 2,308 1,071 1,547 1,547 4,267	\$ 12,087
Expenses	Adjusted Net		\$
- Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment		\$
ent 6 - Form 990-PF,	Total	2,533 2,308 1,071 1,547 1,547 4,267	\$ 12,067
Statement 6	Description	EXPENSES DUES AND SUBSCRIPTIONS OFFICE SUPPLIES POSTAGE PROPERTY & LIABILITY INSURANC REPAIRS & MAINTENANCE SECURITY SERVICE TELEPHONE	FAKNING TOTAL

roitairooo	ш	Beginning of Year		End of Year	Basis of Valuation	Ţ.	Fair Market Value
TOTAL TENTE	"	778 171	\		COST	ω	171,394
MID CAF - 4120	}-	י ע ע י	÷	113,520	COST		145,792
υ ς 10 α		670,650)	COST		•
70000		35.6		64,72	COST		15,75
20202.17 0050 CHD) - 		ω	COST		270,516
ንቱ ኃ1 አካ ካያ		51,81		9,37	COST		97,80
DODGE & COA INIE TOROUSONO SILITES		01,13			COST		
001101F07		73,74		73.74	COST		91,06
ı		408.878		408,878	COST		387,277
GOLDMAN SACAS - 3007/3:00 SIGNAS COMMAN ADOLINE DEBIN - 33037 812 G				06,82	COST		10,00
- 2302/.012 - 14410 428		53.56		03,24	COST		57,53
- 7575 - 7979 - 7979		32,16		27,14	COST		99,64
KISK - 3418/.2/0 name - 19042 SHAB		91,81		64,09	COST		64,61
ر ۱ د		17.95		38,95	COST		62,27
LOHAKES KOSSELL MIDORE - 1040 SIMILES TO THE STATES		15.78		02,40	COST		37,68
CIODAL DES PHN - 66406 2		626,089		23,41	COST		51,09
GLOBAL NES EIIN COTOS: EST		30,54			COST		
-14736.684 S		2,54		372,543	COST		699, 550

1804 HOOVER F 35-1873953 FYE: 6/30/2015

Federal Statements

(pa)	Fair Market Value	\$ 741,173 689,626 709,901 248,766 299,307 713,863 2,040,591 411,912
tments (continu	Basis of Valuation	COST COST COST COST COST COST COST
orporate Stock Inves	End of Year	\$ 503,778 498,859 440,906 246,396 367,047 450,832 1,590,391 362,780 \$ 10,362,434
F, Part II, Line 10b - Co	Beginning of Year	\$ 559,990 520,929 490,570 654,125 407,448 508,245 870,211 358,974 259,048 \$ 10,432,152
Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)	Description	JPM TAX AWARE EQUITY - 24846.55 SHS MFS INTL VALUE - 18842.232 SHARES NEUBERGER BERMAN - 44479.991SHARES OAKMARK INTL FUND - 10120.653 SHS PIMCO COMMODITY - 39176.304 SHARES PRIMECAP ODYSSEY FUNDS - 29535.093 SPDR S&P 500 ETF - 9913 SHARES T ROWE PRICE NEW ASIA - 24258.668 SH VANGUARD FTSE EUROPE - 4969 SHS

	Fair Market Value	\$ 318,537	182,561		\$ 501,098
Investments	Basis of Valuation	COST	COST	COST	
c - Corporate Bond	End of Year	\$ 320,549	188,018		\$ 508,567
Statement 8 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments	Beginning of Year	\$ 129 825	145,635	206,558 235,523	\$ 717,541
Statement 8 - Form	Description	JPM CORE BOND FUND - 27342,21 SHARES	JPM HIGH YIELD - SEL FD - 10,700.49 JPM MULTI SECTOR - 14390.82 SHS	DOUBLELINE FUS TO 74:50 SHS DOUBLELINE TOTAL RET - 18,447.33 SHS	Jen Core Bond in 201200111 0110

	Net FMV
nd Equipment	End Accumulated Depreciation \$ 19,995
J-PF, Part II, Line 14 - Land, Building, and Equipmen	End Cost / Basis \$ 21,213
m 990-PF, Part II, Line	Beginning Net Book \$ 3,654
Statement 9 - Form 990-	Description FURNITURE & FIXTURES TOTAL

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35-1873953

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Statement 10 - Form 990-PF, Part III, Line 3 - Other Increases

		Amount			
GRANT AMOUNTS	RETURNED	FROM	RECIPIENT	\$_	6,291
TOTAL				\$	6,291

Statement 11 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

APPLICATION AND INFORMATION ARE AVAILABLE ON THE HOOVER FAMILY FOUNDATION WEBSITE HTTP://GOSW.ORG/HFF. A COPY OF THE GUIDELINES AND HOW TO APPLY INFORMATION ARE AVAILABLE ON THE WEBSITE.

Statement 12 - Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

PERIODIC APPLICATION DEADLINES ARE MARCH 1ST, JULY 1ST AND NOVEMBER 1ST.

Statement 13 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

SEE THE HOOVER FAMILY FOUNDATION WEBSITE FOR RESTRICTIONS AND LIMITATIONS ON AWARDS. HTTP://GOSW.ORG.HFF



The Hoover Family Foundation

Supporting nonprofit organizations that foster the development of individual

self-sufficiency.

Our Mission

Our Mission:

The Hoover Family Foundation helps non-profit tax-exempt organizations in social service and education areas to foster self-sufficiency and improve the quality of life for individuals whom they serve.

The mission of the Hoover Family Foundation is based on the community interests and volunteer involvement of the founders and major funders. The family believes that private sector groups can help the growth of individuals through values-infused education and human service support activities. Furthermore we believe that improving an individual's capabilities and circumstances is possible at any age.

The purpose of the funding is to provide direct services to individuals by supporting non-profit agencies' efforts. These agencies also may need support to aid them in providing these services, or to improve their own functioning.

The foundation board and staff have worked with grantmakers and grantseekers, both local and national, to improve the effectiveness of their own and other's philanthropic activities. All of the principles of the foundation are involved in building meaningful relationships with grantee organizations. Through our involvement we strive to increase community accomplishments and benefit.

The primary purposes of the charitable giving by the foundation are:

- · To increase the self-sufficiency and quality of life for individuals through human service and enriched education; and
- To increase the ability of organizations to provide excellence in their commitment to the community.

Typically, the grants are awarded for educational programs, social service programs and programs that provide assistance in both of these areas. Grants are based on individual program type, not any organizational type. Many types of organizations receive support. Human services, mental health, arts, youth and education were the most frequent recipients.

We are pleased to provide this Web site describing the foundation's contributions and financial information to our partner organizations, and in doing so we note with great pleasure the successes that they have achieved.

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The Hoover Family Foundation

Supporting nonprofit organizations that foster the development of individual

self-sufficiency.

Our History

For many years, members of the Hoover family in Indiana volunteered with and contributed to non-profit organizations dedicated to improving the quality of life of individuals. In recent years, these activities have been extended to the Portland, Oregon, metropolitan area. In order to more effectively continue these philanthropic endeavors the Hoover Family Foundation was established in 1992.

The Hoover Family Foundation was created in 1992 by James and Katherine Hoover. Significant additional funding was provided in 1995 through the estate of James' mother Mildred Mickel Hoover, whose husband, Truman Hoover, had been an executive in the pharmaceutical industry.

The main objective of the foundation is to support non-profit organizations that foster the development of individual self-sufficiency. This intent is based on the community interest and volunteer involvement of the founders and major funders. They believed that private sector groups could help the growth of individuals through values-infused education and human service support activities. They felt that improving an individual's capabilities and circumstances is possible at any age.

The purpose of the funding is to provide direct services to individuals by supporting non-profit agencies efforts. These agencies also may need support to aid them in providing these services, or to improve their own functioning. The foundation funds programs in the Hoover family locations of Indianapolis, Indiana, and Portland, Oregon.

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The Hoover Family Foundation

Supporting nonprofit organizations that foster the development of individual

self-sufficiency.

Guidelines

The Hoover Family Foundation was founded in 1992 to assist non-profit tax-exempt organizations in the social service and education areas to foster self-sufficiency and improve quality of life. The foundation focuses on funding organizations located in and providing services to the residents of the metropolitan areas where the foundation is located—Portland, Oregon and Indianapolis, Indiana.

Guidelines for Grant Applications

Our guidelines are specific:

INDIANA

Our Indiana location only funds organizations that provide services in and around Indianapolis.

OREGON

Our Oregon location only funds organizations that provide services within the Urban Growth Boundary of the Portland metropolitan area. The Hoover Family Foundation in Oregon will consider grant requests from organizations based in and serving the Portland metropolitan area. as defined by Metro's Urban Growth Boundary, which is generally within the red line in the map below, and includes all the cities



Our knowledge of organizations in these areas and the issues facing them is important to us, so we must stand by these geographic restrictions.

Priorities of Interest

- · Programs that foster self-sufficiency
- · Effective providing of social services
- · Improvement of educational opportunities at all levels
- · Programs that aid low-income individuals

We do not make grants:

- To individuals
- · For sectarian or religious purposes
- · For capital campaigns
- · For event funding
- · For multi-year funding
- · For college scholarships
- · For lobbying or political purposes

- · For medical research
- To private foundations or endowment funds
- In support of regular operating budgets
- To provide long-term funding or post-event funding

Evaluation of proposals is based on:

- · Ability to fulfill a community need for an under-served population in Portland or Indianapolis
- Feasibility and soundness of your implementation plan
- A well-thought-out evaluation plan that shows us measurable results and outcomes
- Viability of subsequent long-term funding

With limited resources and a large number of applications, the foundation is able to fund only a small portion of the many worthwhile requests submitted. Those constraints also limit the size of particular grants and the ability to fund on an annual basis.

Application Deadlines

Grant applications are reviewed three times each year. Completed proposals must be received by or postmarked by the following dates: July 1, November 1 or March 1.

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The Hoover Family Foundation

Supporting nonprofit organizations that foster the development of individual

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How To Apply Portland

Grant Application Steps

Step 1

Prepare a cover sheet. For a PDF cover sheet click here. For a cover sheet in Word, click here The cover sheet includes the following:

- Organization name
- · Date of application
- · Complete mailing address
- · Phone and fax numbers
- · E-mail and web site address
- Contact person in your organization
- Brief description of the proposed grant (2-3 sentences)
- · Amount requested
- · Signature of responsible officer of organization

Step 2

Answer the following questions in a response of three to seven pages. Please note that we receive many applications that are too short and lack the detail sufficient for serious consideration.

- 1. Describe how the proposed program/project will operate.
- 2 What are the basic needs and objectives to be met by this program/project? Include estimates of the number of people to be served.
- 3. How does this project foster self-sufficiency for your participants?
- 4. How does this proposed grant meet the foundation's funding priorities?
- 5. What measurable results/outcomes do you expect to report to the Hoover Family Foundation, and how will these results be measured? Be specific.
- 6. Why is your organization the appropriate group to meet these needs and deliver these services? Include discussion of the organization's mission, history, staff strengths, etc.
- 7. How will this effort be sustained when the Hoover Family Foundation funding ceases?
- 8. What other funders are involved in the support of this effort?

Step 3

Attach all of the following items to the grant application:

- Proposed budget for the grant project, including both the overall project budget (both income and expense) and the foundation's
 portion of that budget
- · Current fiscal year's operating budget
- Most recent audited financial statement or IRS 990
- · List of organization's board of directors with affiliations
- Current 501(c)(3) letter of determination

Step 4

Evaluation of proposals is based on:

- Ability to fulfill a community need for an under-served population
- · Feasibility and soundness of your implementation plan

- · A well thought out evaluation plan to report results of your proposed grant
- · Viability of subsequent long term funding

With limited resources and a large number of appeals, the foundation is only able to fund a small portion of the many worthwhile requests received. Those constraints also limit the size of grants and the ability to fund on an annual basis.

Step 5

Mail three (3) collated copies of the entire completed application (including all attachments) to the following address:

Hoover Family Foundation P.O. Box 551 West Linn, OR 97068

Faxes and emails will not be accepted. Please do not send videos or binders. Also do not drop off applications at the Oregon office. We cannot guarantee that the application will be received. Incomplete applications will not be considered.

For a copy of the Post-Award Evaluation Form in Word, click here.

For a PDF copy of the Post-Award Evaluation Form, click here.

(Adobe Acrobat Reader is required to view and print this PDF.)

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The Hoover Family Foundation

Supporting nonprofit organizations that foster the development of individual

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How To Apply Indianapolis

Grant Application Steps Indianapolis

Effective January 1, 2013 applications for the Indianapolis area will be accepted by invitation only. Applications for the Syracuse/North Webster area will also be considered by invitation only.

Submit a letter of inquiry of not more than two or three (2-3) pages describing the program/project to be funded to the Indianapolis office for review and response regarding our interest in receiving a full application. Telephone inquiries are also encouraged.

Step 1

Prepare a cover sheet For a PDF cover sheet click here. For a cover sheet in Word, click here. The cover sheet includes the following:

- · Organization name
- · Date of application
- · Complete mailing address
- · Phone and fax numbers
- · E-mail and web site address
- · Contact person in your organization
- Brief description of the proposed grant (2-3 sentences)
- · Amount requested
- · Signature of responsible officer of organization

Step 2

Answer the following questions in a response of three to seven pages. Please note that we receive many applications that are too short and lack the detail sufficient for serious consideration.

- 1. Describe how the proposed program/project will operate.
- 2. What are the basic needs and objectives to be met by this program/project? Include estimates of the number of people to be served
- 3. How does this project foster self-sufficiency for your participants?
- 4. How does this proposed grant meet the foundation's funding priorities?
- 5. What measurable results/outcomes do you expect to report to the Hoover Family Foundation, and how will these results be measured? Be specific.
- 6. Why is your organization the appropriate group to meet these needs and deliver these services? Include discussion of the organization's mission, history, staff strengths, etc.
- 7. How will this effort be sustained when the Hoover Family Foundation funding ceases?
- 8. What other funders are involved in the support of this effort?

Step 3

Attach all of the following items to the grant application:

- Proposed budget for the grant project, including both the overall project budget (both income and expense) and the foundation's
 portion of that budget
- · Current fiscal year's operating budget
- · Most recent audited financial statement or IRS 990
- · List of organization's board of directors with affiliations
- Current 501(c)(3) letter of determination

Step 4

- Evaluation of proposals is based on:
 - · Ability to fulfill a community need for an under-served population
 - · Feasibility and soundness of your implementation plan
 - A well thought out evaluation plan to report results of your proposed grant
 - Viability of subsequent long-term funding

With limited resources and a large number of appeals, the foundation is only able to fund a small portion of the many worthwhile requests received. Those constraints also limit the size of grants and the ability to fund on an annual basis.

Step 5

Mail or bring into the office three (3) collated copies of the entire completed application (including all attachments) to the following address:

Hoover Family Foundation 860 East 86th Street, Suite 5 Indianapolis, IN 46240-1806

Faxes and emails will not be accepted. Please do not send videos or binders Incomplete applications will not be considered.

For a copy of the Post-Award Evaluation Form in Word, click here.

For a PDF copy of the Post-Award Evaluation Form, click here.

(Adobe Acrobat Reader is required to view and print this PDF.)

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ORGANIZATION		DATE	
MAILING ADDRESS			
CITY	STATE	ZIP	
CONTACT PERSON	TITLE		
PHONE	FAX		
EMAIL	WEB ADDRESS		
BRIEF DESCRIPTION OF THE PROPOSED GRANT			
DRIEF DESCRIFTION OF THE FROM OSED GRANT			
AMOUNT REQUESTED			
AMOUNT REQUESTED			
SIGNATURE			
ATTACHMENTS			
☐ Proposal narrative (3–7 pages) ☐ Recent audited financial statement or IRS 990			
☐ Proposed grant budget			
☐ Current year operational budget ☐ List of board of directors w/affiliation			
TO DOGIO OF GIFCOLOTS WATHINGTON			

Please enclose THREE COPIES of the entire completed application including attachments. Hoover Family Foundation (this address solely for grants requested in Oregon)
P.O. Box 551
Lake Oswego, OR 97068

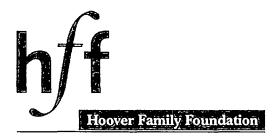
☐ Current 501(c)(3) letter



<u>Grant Application Cover Sheet — Oregon</u>

Organization	pping. The gray will not show when printed.)
-	
Contact person	
Title	
Street address (or PO Box number)	
City	
State	
Zip	
Phone number(s)	
Fax number	
Email of contact person	
Date	
Brief description of the proposed grant	
Amount requested	
Signature	
Date	
Attachments	
Proposal narrative (3-7 pages)	
Recent audited financial statem	nent or IRS 990
☐ Proposed grant budget	

Current year operational budget
☐ List of board of directors with affiliation
Current 501(c)(3) letter
Please enclose THREE COPIES of the entire completed application including attachments.
This address only for grants requested in Oregon: Hoover Family Foundation P.O. Box 551 West Linn, OR 97068



Post-Award Evaluation Report Cover Sheet

Three (3) copies of this evaluation report are required. The report must be a minimum of three (3) pages, **not including** this cover sheet. See below for additional instructions.

	ng. The gray will not show when printed.)
Organization	
Contact person	
Title	
Street address (or PO Box	
number)	
City	
State	
Zip	
Phone number(s)	
Purpose of grant	
Amount of grant	
Date received	
Signature of person	
completing report	
D-1-	
Date	

Complete the report by addressing items 1–5 below on additional pages. In responding to the questions, refer to your original grant request, particularly the sections on goals and the measurement of the grant's effectiveness.

Three (3) copies of this evaluation report are required. Your report must be a minimum of three (3) pages, not including this cover sheet. In other words, your evaluation needs to be detailed and thorough.

- 1. Briefly describe the specific purpose and goals of the HFF grant.
- 2. To what degree were these goals and objectives achieved and how where they measured? If not fully met, what factors affected the success of the project? What plans do you have for meeting and/or revising these objectives in the future?
- 3. What has been the measurable impact on the population you serve?
- 4. To date, what have been the measurable results of this grant on the functioning or effectiveness of your organization (e.g., increased capacity, enhanced operations, stimulated increased private funding, etc.)?
- 5. Attach a copy of your actual budget and the Hoover Family Foundation grant expenditures for this project, identifying both income and expenses. If any revisions have been made in this budget from that originally proposed, please explain those in detail.

Three (3) copies of your report are due on or before:

The report must be a minimum of three (3) pages, not including this cover sheet.

No other requests for funding will be considered until the written evaluation report for this grant has been received.



The Hoover Family Foundation

Supporting nonprofit organizations that foster the development of individual

self-sufficiency.

Contact

For more information about the Hoover Family Foundation, contact the office appropriate for your location. Do not contact the Indiana office if you are inquiring about grants in Oregon, or vice versa

Please note that the Oregon office only accepts applications from the Portland metropolitan area and the Indiana office only accepts applications for their area.

OREGON

Please refer to the map on this page to clarify the Portland service area. Applications from outside this area are not accepted.

Hoover Family Foundation P.O. Box 551 West Linn, OR 97068

Attn: Glen Friedman, Executive Director, Oregon 503-699-1363

INDIANA

Hoover Family Foundation 860 East 86th Street, Suite 5 Indianapolis, IN 46240-1806

Attn: David Hoover, President, Indiana 317-815-9553

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1804 HOOVER FAMILY FOUNDATION

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orm	
State	

5,000 4,500 5,000 5,000 8,000 8,000 9,500 8,000 5,500 8,000 6,000 10,000 7,500 13,612 5,000 15,000 5,000 Amount ON SITE MARTIAL ARTS FOR FOSTER KIDS Y FUTURE LEADERS PROGRAM JOB COACHIN PROGRAM MGR FOR SUSTAINABLE FAMILIES PREP & FINANCIAL ENG. MENTORSHIP EXPANSION OF PYSCHO-SOCIAL PROGRAM EDUCATION PROG FOR PARENTS & PROF. FUND STAFF & EXPENSES FOR PROGRAM PEER SUPPORT PORGRAM FOR CHILDREN COMMUNITY VOLUNTEER CORPS PROGRAM MPOWR PROGRAM FOR MATH & READING AMERICORPS EDUCATION DIRECTORS ACADEMIC SUPPORT & ENRICHMENT SCHOOL BASED CHESS PROGRAM PROVIDING DONATED FLOWERS YOUTH MENTORING PROGRAM JOB READINESS TRAINING Purpose - TAX ARCHITECTURE CONST. VITA PROGRAM CHARITY 70 SW CENTURY DR 100-256 100 200 7172 GRAHAM RD STE 100 2701 NW VAUGHN ST 101 Status 4755 KINGSWAY DR 300 220 SE 12TH AVE A100 16205 NW BETHANY CT 3530 S KEYSTONE AVE CHARITY 3711 NE MLK JR BLVD 224 NW 13TH AVE 304 17780 NE SAN RAFAEL 2740 SE POWELL BLVD CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CHARITY CANCER SUPPORT COMMUNITY CENTRAL IN 5150 W 71ST STREET 91ST ST 103 Address 3908 MEADOWS DR AVE 1120 NW COUCH 5658 N DENVER 232 NW 6TH Relationship 50 臣 NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE & GIRLS CLUB OF INDIANAPOLIS BROOKE'S PLACE FOR GRIEVING YOUNG ΝI AVONDALE MEADOWS CENTER OF YMCA BETHEL NEIGHBORHOOD YOUTH DROP AIM HIGH MARTIAL ARTS ACADEMY INC SPECIAL KIDS INDIANAPOLIS IN 46250 INDIANAPOLIS IN 46205 INDIANAPOLIS IN 46240 INDIANAPOLIS IN 46202 INDIANAPOLIS IN 46227 INDIANAPOLIS IN 46268 BIRCH COMMUNITY SERVICES BEAVERTON OR 97006 PORTLAND OR 97209 PORTLAND OR 97212 PORTLAND OR 97123 PORTLAND OR 97230 PORTLAND OR 97209 PORTLAND OR 97217 PORTLAND OR 97209 PORTLAND OR 97202 PORTLAND OR 97210 Address CENTRAL CITY CONCERN Name **BEND OR 97702** ACE MENTOR PROGRAM CATHOLIC CHARITIES BIENESTAR CDC INC THE BLOOM PROJECT FOR SUCCESS BETTER PEOPLE AYS INC CALDERA ABOUT CHESS BOYS

FYE: 6/30/2015

Statement 14 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

1804 HOOVER FAMILY FOUNDATION

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35-1873953 FYE: 6/30/2015 Statement 14 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Amount	10,000	1,000	12,000	15,000	15,000	15,000	5,000	10,000	15,000	15,000	7,500	10,435	8,000	20,000	15,000	8,500	7,400
Purpose	SCHOOL BASED PANTRY PROGRAM	INING PROGRAM	MORTGAGE SOFTWARE EQUIP TO SERVE FAM	LAB PROGRAM FOR ADULTS	IN HOME SUPPORT FOR OLDER ADULTS	OPPORTUNITY KNOCKS SERVICES	LEARN LINKS PROGRAM	SERVICES FOR VETERANS	AMERICORPS ALLY TO ASSIST JOB CENTER) AFTER SCHOOL TUTORS PROGRAM	TEACHER PROF. DEVELOPMENT	STAFF OF INFORMATION & REFERRAL SERV	FOOD WORKS YOUTH & FARM PROGRAM	ON SITE CULINARY PROGRAM & SUPPORT	TRANSPORTATION SUPPORT	EXPAND MENTAL HEALTH & SUPPORT SERV	LEVELED LITERACY INTERVENTION SYSTEM
Address Relationship Status	3737 WALDEMERE AVE	550 POLK ST	3135 N MERIDI	2450 N MERID	4550 N ILLINOIS ST CHARIT	E WASHINGTC CHAR	50 SE POWELL BLV CHARITY	964 N F	2450 N MERDIAN ST IE CHARITY	5 N ALABAMA ST ST CHARITY	32 E WASHINGTON ST	3901 N MERDIA ONE	COUCH ST	O N MICHIGAN CHAR:	N MEKIL	NE STH	1/40 E 30TH ST NONE CHARITY
Name	INDIANA 46241		FOR HUMA!	AGUE		0 '''	N SOLUTIONS PORTLAND OR 97236		INDIANAPOLIS PUBLIC LIBRARY FOUND. INDIANAPOLIS IN 46206 NON	JNDATION 46204	INDIANAPOLIS SYMPHONY ORCHESTRA INDIANAPOLIS IN 46204	RAL NETWOR 46204	s INC 232	SE INC : IN 46228	INC POLIS IN 46202	HIP HOUSE PORTLAND OR 97212	KIPP INDIANAPOLIS INC INDIANAPOLIS IN 46218

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	Amount	12,500	5	000	2,000	9		7,500	10,000		8,000	002 6		10,000	•	10,000	,	T,000	10,000	6	13,000	0	0000	5,000	•	7,521	7.500)
1	Purpose	HS GRADUATION COACHES FOR DROPOUT	HOTH MT COMMON ONICOMIN	MACS IUTORING CENIER IN HIGH SHOOD	SUPPORT MEALS & LITERACY PROGRAM	MKG20GG V2KGTHT1 11 C 3700G	1 OF THE POST	INDEPENDENT LIVING PROGRAM CASE MGMT	TRANSPORTATION SER-CANCER PATIENTS		EMERGENCY & RESTORATIVE DENTAL SERV	GRAND NOTHER HIGH THE	EDUCALION COACH	ASSISTANT DIRECTOR TO MHKC		TRANSITION PROGRAM SALARIES		YOUTH TENNIS PROGRAM	CRISIS MENTAL HEALTH SERV - HOMELESS		STAFF & CURRICULUM-CAREER DISCOVERY	י ואמתת דדדווס ת סמ תאינס	KIDNEI CAMP FOR CHILLDREN & LEENS	ARTS EDUCATION RESIDENCY PROGRAM		EDUCATIONAL OUTREACH STEM PROGRAM	200 ANIMAL DRESENTERS	ACO ANIMAL FRESENTENO
Address	Relationship Status	BOX 174 CHARITY	1 SUNNYSIDE RD	CHARIII PO BOX 135	CHARITY	SW 5TH AVE STE 1025	14600 NW CORNELL RD	CHAR	1801 N MERIDIAN ST CHARITY	SW MII	CHAR	1631 NW BRODWAY 453	CHAKLLI 10725 SW BADBIID BLIID 50	CHARITY	SE HOLG	CHARITY	E 86TH S		7780 SW CAPITOL HWY	7701 E 21ST ST		PO BOX 230075	CHARIII		SE WATE	CHA	I SW CANYON KU	רושטעדוו
	Relati	. PO	AITON 650	NON NON NON	NONE	620	NONE 146	NONE	180 NONE	14150	NONE		NONE.	NONE	6148	NONE	911	NONE	8// GNON		NONE		NONE	COT ENON	INDUSTRY 1945	NONE	4001	고 N O N
Name	Address	KOSCIUSKO COUNTY EDUCATION DEV WARSAW IN 46581	LAWRENCE TOWNSHIP SCHOOL FOUNDAITON 6501 SUNNYSIDE	INDIANAPOLIS IN 46236	LEBANON IN 46052	LIBRARY FOUNDATION	FORTLAND OR 97704	PORTLAND OR 97229	LITTLE RED DOOR CANCER AGENCY TNDTANAPOLIS IN 46202	MEDICAL TEAMS INTERNATIONAL	TIGARD OR 97224	MOMENTUM ALLIANCE		MI HOOD NIWANIS CAME PORTLAND OR 97219	MT SCOTT LEARNING CENTER	PORTLAND OR 97206	NATIONAL JUNIOR TENNIS LEAGUE	INDIANAPOLIS IN 46240	NEIGHBORHOOD HOUSE	NOBLE INC	INDIANAPOLIS IN 46219			OREGON CHILDREN'S THEAIRE	SCIENCE &	PORTLAND OR 97214		PORTLAND OR 9/221

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Statement 14 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Amount	8,000	6,000	7,000	8,000	6,000	15,000	5,000	2,000	10,000	8,000	8,500	8,000	8,320	8,000	7,500	15,000	7,800
Purpose	202 AFTERSCHOOL MEALS PRGRAMS	RISE PROGRAM TO HELP HIGH RISK YOUTH	EARLY LEARNING PRGRAM - READINESS	STAFF AT EMERGENCY SHELTERS	VAN PURCHASE PYB CONSTRUCTION PROG	PROACTIVE RISK PREVENTION PROGRAM	RECRUIT ADDL PRO BONO PROVIDERS	SPECIAL TRANSPORTATION & HARDSHIP	HANDSMADE PROGRAM-AUTISM	TUTORING & STEM SUMMER PROGRAM	COORDINATOR FOR TUTORS	WORKFORCE DEVELOPMENT PROGRAM	CULTURALLY COMPETENT CARE PROGRAM	VOLUNTEER MONITORING & ASSISTANCE	LIBRARY & READING PROGRAMS	TRANSLATION SERVICES - SPANISH	COLLEGE COACH PROGRAM FOR HS
Address Relationship Status	E HAWTHORNE BLVD CHARITY	7800 SW	C 7519 N BURLINGTON E CHARITY	1838 SW 王	4816 NE	75 N BELLEVIEW PL NE CHARITY	고 조	55 NE GLISAN ST CHARI	MERIDIAN ST 2 CHARIT	N WILLAMETT CHAR	62ND	133 NW 6 NE	7754 SW CAPITAL HWY CHARITY	6500 SW MACA	D NE WIH	DK MLK JK S CH	814 N DELAWAKE SI NONE CHARITY
Name Address	PARTNERS FOR HUNGER FREE OREGON PORTLAND OR 97214	OREGON OR 97219	100L TENNIS & 97203	SSS FAMILY SOLUTI OR 97201	FLDERS 97266	REY HIGH SCHO IN 46222	RNING VETERANS PROJECT PORTLAND OR 97214		1TION 6204	97203	NN WHEELS CORP DIANAPOLIS IN 46220		ry health cent 97219	SCIAL ADVOCATES FOR VULNERABL PORTLAND OR 97239	100 1	TER :N 46202	STARFISH INITIATIVE INDIANAPOLIS IN 46204

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Statement 14 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

		Amount		5,000		2,000		3,214	•	8,000	•	8,000	•	7,000	748,486
	1	Purpose		AT RISK YOUTH THEATRE ART CLASS		YOUNG VOICES THEATRE EDUCATION PROG		SWIM LESSONS-CHILDREN W/DISABILITIES		PADRES CON INICIATIVA PARENTING PROG		HOME FREE HOUSING FIRST SERVICES		AMERICORP VISTA - STAFF FOR STEM	!
	Address	Status	PO BOX 69631	CHARITY	CHARITY SANDY BLVD MB 2	CHARITY	15707 SW WAI	CHARITY	486	CHARITY	STARK STREET	CHARITY	N, PO BOX 4142	CHARITY	
		Relationship		NONE	1785 NE SA	NONE		NONE		NONE	3910 SE ST			NONE	
	Name	Address	STUMPTOWN STAGES	PORTLAND OR 97239	TRIANGLE PRODUCTIONS	PORTLAND OR 97232	TUALATIN HILLS PARK FOUNDATION	BEAVERTON OR 97006	VIRGINIA GARCIA MEMORIAL FOUNDATION PO BOX	PORTLAND OR 97113	VOLUNTEERS OF AMERICA - OREGON	PORTLAND OR 97214	WARREN LEE STRICKLAND FOUNDATION	PORTLAND OR 97208	TOTAL