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Form 990-PF

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.

OMB No. 1545-0052

PATE DEC 3 0 2015

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Department of the Treasury ation about Form 990-PF and its separate instructions is at www.irs.gov/form990pf Open to Public Inspection

_		revenue Service Information about 1 offi		/		<u> </u>		00/20 0015
		endar year 2014 or tax year beginning	10/	01_, 2014 ,	, and ending			09/30,2015
	Name	of foundation				A	Employer identific	
		OUST ANTON-HERMANN 480005016				_ _		<u>6385187</u>
	Numb	er and street (or P O. box number if mail is not delivered	I to street address)		Room/suite	В	Telephone numbe	r (see instructions)
	P.O	. BOX 1602					57	<u>4-235-2790</u>
	City or	town, state or province, country, and ZIP or foreign pos	stal code					
						C	If exemption applicat pending, check here	ion is
	SOU'	TH BEND, IN 46634					, 0	
G	Che	ck all that apply: Initial return	Initial return	of a former p	ublic charity	′ _Б	1. Foreign organizati	ons, check here
		Final return	Amended ret	turn			2 Foreign organizati	ons meeting the
		Address change	Name change	e			85% test, check he computation	
Н	Che	ck type of organization: X Section 501(c)(3) exempt private for	oundation		٦.	·	
Γ	_	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri		ion		under section 507(b)	status was terminated
Ť			unting method: X Ca			F		a 60-month termination
•		1 —	ther (specify)					(1)(B), check here
			column (d) must be on ca			-		
P	art	Analysis of Revenue and Expenses (The	(a) Revenue and					(d) Disbursements
		total of amounts in columns (b), (c), and (d)	expenses per	(b) Net inve	I	(c)	Adjusted net income	for charitable purposes
		may not necessarily equal the amounts in column (a) (see instructions).)	books	incom	· -		mcome	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)						· · ·
	2	Charle I if the foundation is not required to	·					
	3	attach Sch. B						
	4	Dividends and interest from securities	10,211.	1	0,211.		10,211.	STMT 1
	• 5а	Gross rents	10,211.	_	-		10,211.	
_	i	Net rental income or (loss)	39,210.					- In
ĕ		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 85, 962.	33,210.				REC	=IVED-OI
evenue	_	assets off fifte oa		3	9,210.			
ě	7	Capital gain net income (from Part IV, line 2)			7,210.		lail	0 5 2016
	8	Net short-term capital gain					MAL S	10 co
	9 10a	Income modifications	· ·				14	TIN UT
		and allowances • • • • •					1 0G	DEN, UT
		Less Cost of goods sold .					<u> </u>	
		Gross profit or (loss) (attach schedule)					•	
j	11 12	Other income (attach schedule)	49,421.	1	9,421.	-	10,211.	
-		•					10,211.	
တ	13	Compensation of officers, directors, trustees, etc	6,131.		6,131.			
ıse	14	Other employee salaries and wages						
e	15	Pension plans, employee benefits						
ž	16a	Legal fees (attach schedule)	2 100		2 100		NONTO	NT∩NT
é		Accounting fees (attach schedule) STMT 2	2,100.		2,100.		NONE	NONE
ij	C	Other professional fees (attach schedule)						
itre	17	Interest	450					
E	18	Taxes (attach schedule) (see instructions . 3 .	477.					
Ē	19	Depreciation (attach schedule) and depletion.						
Ad	20	Occupancy						
٦	21 22	Travel, conferences, and meetings						
ā	22	Printing and publications						
⋍	23	Other expenses (attach schedule)	·					
ä	24	Total operating and administrative expenses.					_	
per		Add lines 13 through 23	8,708.		8,231.		NONE	NONE
	25	Contributions, gifts, grants paid	28,093.					<u>28,093</u> .
	26	Total expenses and disbursements Add lines 24 and 25	36,801.		8,231.		NONE	<u>28,093</u> .
	27	Subtract line 26 from line 12:						
	а	Excess of revenue over expenses and disbursements	12,620.					
	b	Net investment income (if negative, enter -0-)		4	1,190.			
	С	Adjusted net income (if negative, enter -0-).					10,211.	

JSA For Paperwork Reduction Act Notice, see instructions.
4E1410 1 000 GP1805 A491 10/27/2015 13:49:33

1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶ 4 Pledges receivable ▶ Less. allowance for doubtful accounts ▶ 5 Grants receivable ▶ Less. allowance for doubtful accounts ▶ 7 Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations (attach schedule) b Investments - corporate stock (attach schedule) 11 Investments - land, buildings, and equipment. basis Less accumulated depreciation ▶ (attach schedule) 12 Investments - ordinate of the fattach schedule) 13 Investments - ordinate of the fattach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation ▶ (attach schedule) 15 STMT 4 16 Total assets (to be completed by all filers - see the			Attached schedules and amounts in the	Beginnin	ig of year		Ena o	r year	
2 Savings and temporary cash investments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ 4 Piedges receivable ▶ Less allowance for doubtful accounts ▶ 5 Grants receivable cash of the property of the propert	ant II B	salance Sheets	amounts only. (See instructions.)	(a) Boo	k Value	(b) Book Value		(c) Fair Market Value	ue
2 Savings and temporary cash Investments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ 4 Pledges receivable ▶ Less allowance for doubtful accounts ▶ 5 Grants receivable → Less allowance for doubtful accounts ▶ 7 Other notes and loans receivable (site instructions) 8 Inventiories for sale or use 9 Prepaid expenses and deferred charges 10 Investments - U.S. and state government obligations (state his schedule) 10 Investments - U.S. and state government obligations (state his schedule) 11 Investments - U.S. and state government obligations (state his schedule) 12 Investments - U.S. and state government obligations (state his schedule) 13 Investments - Corporate bonds (state his schedule) 14 Investments - Corporate bonds (state his schedule) 15 Corporate state obligations (state his schedule) 16 Investments - other (attach schedule) 17 Investments - other (attach schedule) 18 Investments - other (attach schedule) 19 Investments - other (attach schedule) 19 Investments - other (attach schedule) 10 Investments - other (attach schedule) 11 Investments - other (attach schedule) 12 Investments - other (attach schedule) 13 Investments - other (attach schedule) 14 Investments - other (attach schedule) 15 Other assets (state be completed by all filers - see the instructions. Also, see page 1, item i) 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item i) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Losans from fifters, directors, trustess, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Total liabilities (describe ▶ 23 Total liabilities (describe ▶ 24 Total liabilities (describe ▶ 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Permanently restricted 29 Permanently restricted 30 Total access for the dailances (see instructions) . 31 Total kalifities and net assets/fund balances (see instructions) . 32 Total Restrictions of the foliage in Net Assets or Fun	1 Cach	- non-interest-hearin	ng			<u></u>			
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Investments - other (attach schedule) STMT 4 441,963. 454,943. 55 Land buildings, and Particular Part	(attac	ch schedule)		- 					
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equipment bisiss Less accumulated depreciation [attach schedule] 10 Other assets (describe		stments - other (attac . buildings.and		•	141,000.		J . J.	3317	124
15 Other assets (describe ►		ment basis	tion N	-					
Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	(attac	ch schedule)	CITATION E	-	2		2		
instructions. Also, see page 1, item i)	15 Othe	er assets (describe l	SIMI 5	' ———	2.				
17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (add lines 17 through 22) 23 Total liabilities (add lines 17 through 22) NONE Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, ▶ X 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) 31 Total liabilities and net assets/fund balances (see instructions) 441, 965. 454, 945. Part III Analysis of Changes in Net Assets or Fund Balances	1				141 065	151	015	554,	124
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Total liabilities (add lines 17 through 22)	19 Defer	rred revenue		•					
Total liabilities (add lines 17 through 22)	20 Loans	s from officers, director	s, trustees, and other disqualified persons						
Total liabilities (add lines 17 through 22)	21 Mort	tgages and other not	tes payable (attach schedule)						
Foundations that follow SFAS 117, check here . Dand and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted	22 Othe	r liabilities (describe	· -))					
Foundations that follow SFAS 117, check here . Dand and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted					1				
and complete lines 24 through 26 and lines 30 and 31. Unrestricted	23 Total	I liabilities (add line:	s 17 through 22)	•			NONE		
and complete lines 24 through 26 and lines 30 and 31. Unrestricted	Four	ndations that follo	ow SFAS 117, check here . ▶						
Instructions)	and			ī.					
Instructions)	24 Unre	estricted		_					
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Instructions)	25 Porm								
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Instructions)	chas	nuations that do i	Not lines 27 through 31	-				II	
Instructions)	27 Capit				41 965	454	945	II	
Instructions)	27 Capit			-	111,303.		,		
Instructions)	26 Paid-II								
Instructions)	29 Retair	=			141 065	151	015		
Instructions)	30 Total				141,303.	4241	74 7.		
Part III Analysis of Changes in Net Assets or Fund Balances				1	141 065	151	ا ۵۸۶		
					141,303.	7,77,) 1],		
i Total het assets of lund balances at beginning of year - Part II, column (a), line 30 (must agree with					a) line 20 /	ust sarss			
and of the street finiting personal on union trends participal.								441 0	6 E
								441,9	
	Enter am	nount from Part I, I	ine 2/a					12,6	
3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6	Other ind	creases not includ	ed in line 2 (itemize) ► SEE STA	VIEWENI 6	!		-	2,5	
***************************************	Add lines	s 1, 2, and 3		<u> </u>			4	457,0	
5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7	Decrease	es not included in	line 2 (itemize) ►SEE_ST2	ATEMENT 7				2,1	
	Total net	assets or fund ba	lances at end of year (line 4 minus	s line 5) - Part	II, column (b)	, line 30	6	454, 9	

_	Comital Coine	and Lagge for Tay on Inve	estment Income		<u>-</u>	1080 0
Ľ		and Losses for Tax on Inve		(b) How	(c) Date	T
	(a) List and	acquired P - Purchase	acquired	(d) Date sold (mo., day, yr.)		
	2-story b	D - Donation	(mo., day, yr.)			
<u>1a</u>				ļ		
_b	OTHER GAINS AND					
d						
е						
	(e) Gross sales price		(h) Gain or (lo	oss)		
	(e) Gross sales price	(e) plus (f) minus (g)				
a	86,687.		46,752.			39,935.
b	T0-				-	-725.
C						
_ <u>-</u>						
_ <u>~</u>			:			
		howing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col. (h) ga	un minus
_		(j) Adjusted basis	(k) Excess of col. (i)		(k), but not less t	
	(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from co	
_						39,935.
_ <u>a</u> b				 		-725.
						123.
				-		
<u>d</u>						
<u>e</u>				 		·
2	Capital gain net income of		gain, also enter in Part I, line 7			20.010
		(II	(loss), enter -0- in Part I, line 7	2		39,210.
3		in or (loss) as defined in sections 1				
	~	art I, line 8, column (c) (see inst	· · · · · · · · · · · · · · · · · · ·			
				3		
			uced Tax on Net Investment In		· · · · · · · · · · · · · · · · · · ·	
(Fc	or optional use by domestic	private foundations subject to the	section 4940(a) tax on net investm	nent incor	ne.)	
If s	ection 4940(d)(2) applies,	leave this part blank.				
Wa	s the foundation liable for t	the section 4942 tax on the distrib	utable amount of any year in the ba	ase period	i?	Yes X No
If "	Yes," the foundation does n	ot qualify under section 4940(e). I	Do not complete this part.			
1	Enter the appropriate am	ount in each column for each year;	; see the instructions before making	g any entr	ies.	
	(a)	(b)	(c)		(d)	
Ca	Base period years ilendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col. (b) divided by	tio col. (c))
_	2013	26,115.	567,679.			0.046003
	2012	23,713.	530,080.			0.044735
_	2011	23,471.	480,721.			0.048825
_	2010	24,263.	474,981.			0.051082
_		24,054.	487,810.			0.031002
	2009	24,054.	487,810.	1		0.049310
_		,				0 020055
2)		2		0.239955
3	Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
	number of years the foun	dation has been in existence if less	s than 5 years	3		0.047991
4	Enter the net value of nor	ncharitable-use assets for 2014 fro	m Part X, line 5	4		<u>563,232.</u>
5	Multiply line 4 by line 3.			5		27,030.
	······································					
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		412.
9	Euror 1/0 or not mixestille:					
7	Add lines 5 and 6			7		27,442.
,	Aud lines 5 and 6		• • • • • • • • • • • • • • • • • • • •		 	41,774.
	Enter accelled = 11 cm -	and forms Dark VIII is				20 222
8	If line 8 is equal to or or	ons from Part XII, line 4	n Part VI, line 1b, and complete t	8		28,093.
	Part VI instructions.	eater than line 7, check the DOX I	n ran vi, line 10, and complete t	nat part ι	ising a 1% tax	rate. See the
	. ort vi matructions.					

Form 990-PF (2014)

10

X

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Form 9	90 ' PF (20	35-6385187			F	age 5
Part	VII-A	Statements Regarding Activities (continued)				
11	At any	time during the year, did the foundation, directly or indirectly, own a controlled entity	within the		l	
		of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
		foundation make a distribution to a donor advised fund over which the foundation or a				
		ad 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 book	s are in care of \blacktriangleright 1ST SOURCE BANK Telephone no. \blacktriangleright	<u>(574) 235-</u>	<u> 279</u>	0	- -
		at ▶ 100 N. MICHIGAN STREET, SOUTH BEND, IN ZIP+4 ▶				
15	Section	4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			▶	
	and ente	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 ot	her authority		Yes	No
		nk, securities, or other financial account in a foreign country?		16	L	X
		instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F	90-22.1). If			•
		ter the name of the foreign country				
	VII-B				V	Al-
		n 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
		e year did the foundation (either directly or indirectly).	X No			
		ge in the sale or exchange, or leasing of property with a disqualified person? Yes	X No			
		www.money from, lend money to, or otherwise extend credit to (or accept it from) a	X No			
		aminos porosini, i i i i i i i i i i i i i i i i i i	77			
		sh goods, services, or facilities to (or accept them from) a disqualified person? Yes ompensation to, or pay or reimburse the expenses of, a disqualified person? Yes	X No			
		ompensation to, or pay or reinfluise the expenses of, a disqualified person (or make any of either available for	kt 140			
		enefit or use of a disqualified person)?Yes	X No			
		e to pay money or property to a government official? (Exception. Check "No" if the				
		dation agreed to make a grant to or to employ the official for a period after				
		nation of government service, if terminating within 90 days.)	X No			
ь		nswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	Regulations			
		3.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b		
		ions relying on a current notice regarding disaster assistance check here				
		foundation engage in a prior year in any of the acts described in 1a, other than excepted	acts, that			
	were not	corrected before the first day of the tax year beginning in 2014?		1c		X
		n failure to distribute income (section 4942) (does not apply for years the foundation was				
	operating	foundation defined in section 4942(j)(3) or 4942(j)(5)).				
а	At the e	nd of tax year 2014, did the foundation have any undistributed income (lines 6d and				
	6e, Part)	(III) for tax year(s) beginning before 2014? Yes	X No		ĺ	
	If "Yes," I	st the years ,,,,,,,,				
		e any years listed in 2a for which the foundation is not applying the provisions of section				
	(relating	to incorrect valuation of assets) to the year's undistributed income? (If applying section 49	42(a)(2) to			••
	•	isted, answer "No" and attach statement - see instructions.)		2b		<u>X</u>
C	If the pro	visions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
					ĺ	
		foundation hold more than a 2% direct or indirect interest in any business enterprise	₩			
		ne during the year?	X No			
		did it have excess business holdings in 2014 as a result of (1) any purchase by the for				
		ed persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approximately and 1969; (2) the disease of heldings are resourced by alice on horsest and (2) the				
		ioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the	•			
		15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determ		a.		
	roundatic	n 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?

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?

orm :	99Ó-PF (2014)		35-63	85187		Page 6
Par	t VII-B Statements Regarding Activities	for Which Form	1720 May Be Rec	uired (continued)		
5a	During the year did the foundation pay or incur any amount	ount to.				
	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(e))?	. Yes X No	.	
	(2) Influence the outcome of any specific public el					1
	directly or indirectly, any voter registration drive?				.	
	(3) Provide a grant to an individual for travel, study, or				.	
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)			Yes X No	•	
	(5) Provide for any purpose other than religious, of					
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	D	1
ь	If any answer is "Yes" to 5a(1)-(5), did any of the				1 1	ļ
	Regulations section 53.4945 or in a current notice rega	rding disaster assistar	ice (see instructions)?		· <u>_5b</u> _	
	Organizations relying on a current notice regarding disa	ster assistance check	here			1
C	If the answer is "Yes" to question 5a(4), does the	foundation claim	exemption from the t	ax — —	 	}
	because it maintained expenditure responsibility for the	grant?		Yes No)	
	If "Yes," attach the statement required by Regulations se	ction 53.4945-5(d).			}	
6a	Did the foundation, during the year, receive any fu	nds, directly or indi-	ectly, to pay premiu	ms		İ
	on a personal benefit contract?			. Yes X No	,	
b	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contra	act?	. 6b	X
	If "Yes" to 6b, file Form 8870.					
7a	At any time during the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?.	. Yes X No	, [
	If "Yes," did the foundation receive any proceeds or have	•			. 76	
	Information About Officers, Directo					<u></u>
	- and Camerachara					
1	and Contractors	anagers and their	compensation Ison			
1	List all officers, directors, trustees, foundation m				(a) Evenes	
1		(b) Title, and average hours per week	(c) Compensation (If not paid,	instructions). (d) Contributions to employee benefit plans	(e) Expense other allo	
_	List all officers, directors, trustees, foundation m (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation	instructions). (d) Contributions to		
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation		wances
LST S	List all officers, directors, trustees, foundation m (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	instructions). (d) Contributions to employee benefit plans		
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation		wances
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation		wances
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation		wances
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation		wances
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation		wances
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634	(b) Title, and average hours per week devoted to position TRUSTEE 1	(c) Compensation (lf not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation -0-	other allo	-0-
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position TRUSTEE 1	(c) Compensation (lf not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation -0-	other allo	-0-
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those	(c) Compensation (lf not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation -0-	other allo	-0-
LST S 100 N	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation - 0-	other allo	-0-
LST S 100 N	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those)	(c) Compensation (lf not paid, enter -0-) 6,131.	instructions). (d) Contributions to employee benefit plans and deferred compensation -0-	other allo	-0-
LST S 100 N	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-) 6,131.	(d) Contributions to employee benefit plans and deferred compensation - 0 -	other allo	-0-
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-) 6,131.	(d) Contributions to employee benefit plans and deferred compensation - 0 -	ons). If no (e) Expense other allo	-0-
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-) 6,131. (c) Compensation	instructions). (d) Contributions to employee benefit plans and deferred compensation - 0 - (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expense other allo	ne, enter
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-) 6,131. (c) Compensation	instructions). (d) Contributions to employee benefit plans and deferred compensation - 0 - (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expense other allo	ne, enter
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-) 6,131. (c) Compensation	instructions). (d) Contributions to employee benefit plans and deferred compensation - 0 - (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expense other allo	ne, enter
LST S 100 N	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-) 6,131. (c) Compensation	instructions). (d) Contributions to employee benefit plans and deferred compensation - 0 - (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expense other allo	ne, enter
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-) 6,131. (c) Compensation	instructions). (d) Contributions to employee benefit plans and deferred compensation - 0 - (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expense other allo	ne, enter
LST S	List all officers, directors, trustees, foundation m (a) Name and address OURCE BANK MICHIGAN ST, SOUTH BEND, IN 46634 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 (other than those hours per week hours p	(c) Compensation (lf not paid, enter -0-) 6,131. (c) Compensation	instructions). (d) Contributions to employee benefit plans and deferred compensation - 0 - (d) Contributions to employee benefit plans and deferred compensation	ons). If no (e) Expense other allo	ne, enter

_	٠
Page	

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NOI	NE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
MONE	NONE
NONE	NONE
	<u> </u>
Total number of others receiving over \$50,000 for professional services ▶	NONE
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.	Expenses
1 NONE	
2	
*	
3	
4	······································
Part IX-B Summary of Program-Related Investments (see instructions)	Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 NONE	Amount
INONE	
2	
All other program-related investments. See instructions	
3 NONE	
Total. Add lines 1 through 3	

<u>35-6385187</u>

Part	Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	Foreign foundation	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, e	etc.,	
	purposes:		
а	Average monthly fair market value of securities	1a	571,809.
	Average of monthly cash balances		NONE
c	Fair market value of all other assets (see instructions)		NONE
ď			571,809.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d		571,809.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see	
•	instructions)	1 1	8,577.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, lin		563,232.
6	Minimum investment return. Enter 5% of line 5	• • • • • • • • • • • • • • • • • • • •	28,162.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	28,162.
2 a		112.	
b			
c		2c	412.
3	Distributable amount before adjustments. Subtract line 2c from line 1		27,750.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4		27,750.
6	Deduction from distributable amount (see instructions)	L I	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part		
•	line 1		27,750.
			2111301
Part	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	28,093.
b	Program-related investments - total from Part IX-B	. 1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, e		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a		3a	NONE
b		3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, lin		28,093.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inco		20,055.
•	Enter 1% of Part I, line 27b (see instructions)	1 1	412.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		27,681.
J	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years who		
	and life for the continue of will be used in rait v, column (b), in subsequent years will	on calculating w	action the regularies

Page 9

	IT XIII Undistributed Income (see instru	(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7				27,750.
2	Undistributed income, if any, as of the end of 2014			22 222	
a			NONE	28,093.	
b			NONE		
3	Excess distributions carryover, if any, to 2014 From 2009 NONE				
a b	NOND				
c	NONE				
d	MONTH	1			
е	From 2013 NONE				
f	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2014 from Part XII,				
	line 4. ▶ \$ 28,093.				
а	Applied to 2013, but not more than line 2a			28,093.	
b	Applied to undistributed income of prior years (Election required - see instructions)				
C	Treated as distributions out of corpus (Election		,		
	required - see instructions)	NONE			
d	Applied to 2014 distributable amount				NONE
e		NONE			NONE
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same	NONE			NONE
6	amount must be shown in column (a).) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
Ь	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE	<u></u> _	
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		NONE		
d	Subtract line 6c from line 6b. Taxable				
_	amount - see instructions	_	NONE		
е	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				27,750.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section			}	
	170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	NONE			
	Excess distributions carryover from 2009 not	110111			
8	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9:				
а	Excess from 2010 NONE				
b	Excess from 2011 NONE				
C	Excess from 2012 NONE				
	Excess from 2013 NONE				
<u>e</u>	Excess from 2014 NONE				Form 990-PF (2014)

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Supplementary information (continueu)			
3 Grants and Contributions Paid Durin	g the Year or Appro	oved for F	uture Payment	
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year			ļ	
			j	
HARVARD UNIVERSITY				
124 MOUNT AUBURN ST CAMBRIDGE MA 02138	NONE	N/A	CHARITABLE CONTRIBUTION	3,000.
YALE LAW SCHOOL		1		
P O BOX 208215 NEW HAVEN CT 06520-8215	NONE	N/A	CHARITABLE CONTRIBUTION	3,000.
- 0 2011 100213 11211 1211 1211 121	1.02	,]
NOTRE DAME UNIVERSITY				
	NONE	N / 2	CHARLES COMMITTEN	22 002
1100 GRACE HALL NOTRE DAME IN 46556	NONE	N/A	CHARITABLE CONTRIBUTION	22,093.
		1		
				•
				
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	28,093.
b Approved for future payment				
İ				
f				
		l		
			<u> </u>	
		Ì	ľ	
]	
Total			▶ 3b	

JSA 4E1491 1.000

		ated business income	Excluded by	section 512, 513, or 514	(e) Related or exemp
Program service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
a					
b					
					· .
<u> </u>					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments			14	10,211.	
ovidends and interest from securities		<u> </u>	14	10,211.	
let rental income or (loss) from real estate.			· · · · · · · · · · · · · · · · · · ·		<u> </u>
Debt-financed property		<u> </u>			
Not debt-financed property		-		·	
let rental income or (loss) from personal property .					
Other Investment Income			18	39,210.	
let income or (loss) from special events			10	33,210.	
			 		
Gross profit or (loss) from sales of inventory			<u> </u>		
Milei revenue. a					
ubtotal. Add columns (b), (d), and (e)				49,421.	
otal. Add line 12, columns (b), (d), and (e)				13	49,4
		complishment of Ex			
e No. Explain below how each activity	for which	income is reported i	n column (e	e) of Part XVI-A contribut	
e No. Explain below how each activity	for which	income is reported i	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	income is reported i	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	income is reported i	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	income is reported i	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	income is reported i	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	income is reported i	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
e No. Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
e No. Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
e No. Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
e No. Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
e No. Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	
e No. Explain below how each activity	for which	n income is reported it purposes (other than I	n column (e	e) of Part XVI-A contribut	

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

1	in sec	tion 501(c) of the Co		ngage in any of the followers ection 501(c)(3) organization						Yes	No
	•	izatıons?									
а		·		noncharitable exempt orga							17
									1		<u>X</u>
									1a(2)		<u>X</u>
b		transactions:							i [
				t organization					1b(1)		_ <u>X</u> _
				exempt organization					1b(2)		<u> X</u>
				ssets					1b(3)		<u>X</u>
									1ь(4)		<u> X</u>
											<u>X</u>
			· ·	or fundraising solicitations					1b(6)		<u>X</u>
				other assets, or paid emplo					1c_		<u>X</u>
				complete the following							
		-		s given by the reporting f							
	$\overline{}$			ment, show in column (d)							
(a) Li	ne no.	(b) Amount involved	(c) Name of non	charitable exempt organization	(d) Desc	ription of trans	fers, transact	ons, and shar	ng arrai	ngemer	nts
							·				
		<u> </u>									
	ı										
								•			
			1								
	descri		of the Code (other	ated with, or related to, o er than section 501(c)(3)) o			t organiza	ations	Ye	s X	No
		(a) Name of organization		(b) Type of organization			(c) Description	on of relations	 hip		
						·					
				····							
Sign Here	corre			this return, including accompanying ayer) is based on all information of which the second second second second second second second second second second second second second second second second second second second sec			to the best of	f my knowledge May the IRS with the pre (see instructions	discuss	this i	s true, return below No
 Paid		Print/Type preparer's nan	me	Preparer's signature		Date	Chec	~`	TIN		
ren	arer	F /		<u> </u>				employed			
	Only	Firm's name		<u></u>			Firm's EIN	<u> </u>			
J3E	Jilly	Firm's address									
		<u></u>	<u>_</u>				Phone no			חר	
								Forn	n 990	-rr ()	2014)

990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES
I - DIVIDENDS AND INTEREST FROM
I - DIVIDENDS AND INTEREST
I - DIVIDENDS AND
I - DIVIDENDS
- H
н
PART
M 990PF,
FORM

ADJUSTED NET INCOME	6. 56. 7. 617. 6. 817. 8. 813. 2. 813. 2. 832. 2. 852. 2. 852. 2. 852. 3. 655.	- 11
NET INVESTMENT INCOME	8 4 1 1 2 3 1 2 3 1 2 3 2 3 3 1 2 3 3 1 2 3 3 1 3 1	~ II
REVENUE AND EXPENSES PER BOOKS	56. 617. 417. 576. 313. 232. 3,055. 252. 252. 278. 2,852.	~ II
DESCRIPTION	BLACKROCK STRAT INC OPP-INS DODGE & COX INTL STOCK FUND FIDELITY CONTRA FUND #022 OAKWARK INTERNATIONAL FD-I ISHARES TRUST-RUSSELL 2000I FEDERATED TREASURY OBLIGA-SS NEW WORLD FUND-F2 BOSTON PARTNERS INV ALL CAP VAL INST T. ROWE PRICE MID-CAP GROWTH FUND TEMPLETON GLOBAL BOND FUND-AD VANGUARD S/T INVEST GR-ADM UNITS IN INCOME FUND OF 1ST SOURCE BANK UNITS IN SHORT TERM INCOME FUND OF 1ST	

- ACCOUNTING FEES	
н	11
- .	ij
RT	H H
A	ii
Д	ii
Ē	ii
0 P	II
	11
99	II II
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Σ	Н
ᄶ	ii
F	
_	

CHARITABLE PURPOSES	NONE
ADJUSTED NET INCOME	======================================
NET INVESTMENT INCOME	2,100.
REVENUE AND EXPENSES PER BOOKS	2,100.
	TOTALS
DESCRIPTION	TAX PREPARATION FEES

STATEMENT

FORM 990PF, PART I - TAXES

REVENUE
AND
EXPENSES
PER BOOKS

DESCRIPTION

FOREIGN TAXES FEDERAL ESTIMATES - PRINCIPAL 77. 400.

TOTALS

477.

CHROUST ANTON-HERMANN 480005016

INVESTMENTS
OTHER
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ΙΙ
PART
990PF,
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	COST/ FMV	BEGINNING	ENDING	ENDING
DESCRIPTION 	C OR F	BOOK VALUE	BOOK VALUE	FMV
1ST SOURCE INCOME FUND	ט	5,4	5,3	_
1ST SOURCE SHORT TERM INCOME F	ט נ	Ó	24,373.	4,3
ROBECO BF A/CAF VALOES DODGE & COX INTERNATI STOCK	ט כ	4, 8C	C	0
FIDELITY CONTRA FUND #022) ບ	1,6		132,952.
NEW WORLD FUND F2	ט	15,43	0,43	0,94
OAKMARK INTERNATL	ט	2,03	4,03	8,09
VANGUARD S/T INVT	บ	5,00	5,00	4,
FEDERATED TREAS OBLIG MMF	บ	, 29	6,87	6,87
T ROWE PRICE MID CAO GROWTH	ט	3,3	ά,	7
WASATCH LONG/SHORT FUND	ט	96'		
TEMPLETON GLOBAL BOND FUND	บ	5,03	-	ω
ISHARES RUSSELL 2000 FTF	บ	3,6	5,77	4
BOSTON PARTNERSS INV ALL CAP	ט		•	123,430.
BLACKROCK STRAT INC OPP	ŭ			
I.	TOTALS	441,963	454,943.	554,122
	li .			

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STATEMENT

FORM 990PF, PART II - OTHER ASSETS

. CHROUST ANTON-HERMANN 480005016

ENDING FMV		2.
ENDING BOOK VALUE	H H	2.
BEGINNING BOOK VALUE		2.
		TOTALS
DESCRIPTION	15 MISC FOREIGN COINS 29 MISC FOREIGN COIMS	

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FORM 990PF, PART III				OR FUN	ID BALANCES	
DESCRIPTION			,		AMOUNT	
BOOK TO TAX TIMING VANGUARD S/T INCOME	TIMING				2,489 24	
		TOTA	$^{ m L}$		2,513	-

FORM 990PF, PAR	r III - other D	DECREASES IN	NET WORTH	OR FUND	BALANCES
DESCRIPTION					AMOUNT
BOOK TO TAX TIME					2,152. 1.
		TOTAL			2,153.

GAINS AND LOSSES FROM PASS-THRU ENTITIES

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

-76.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-76.00

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NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

-649.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

-649.00
