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

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

OMB No 1545-0052

For	calen	dar year 2015 or tax year beginning		, and ending	<u> </u>	
		foundation			A Employer identification	on number
	HE NC	JOHN & ANN BARNEY FAMI	LY FOUNDATION	N,	20-890721	2
		defined for P O box number if mail is not delivered to street.	address)	Room/suite	B Telephone number	<u> </u>
		2 MUSCATATUCK DRIVE			219-663-7	770
	_	own, state or province, country, and ZIP or foreign pe	ostal code		C If exemption application is	
		PARAISO, IN 46385				
		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizatio	ns, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations r check here and attach	computation
H_	Check	type of organization: Section 501(c)(3) ex			E If private foundation s	tatus was terminated
\perp			Other taxable private founda		under section 507(b)(1)(A), check here
		ırket value of all assets at end of year 🛭 J 🛮 Accountii	-	Accrual	F If the foundation is in	
		Part II, col. (c), line 16)	her (specify)		under section 507(b)(1)(B), check here
	<u> </u>	1,177,036. (Part I, colu				(d) Disbursements
P	art I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	100,000.		N/A	
	2	Check if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	9.	9.		STATEMENT 1
	4	Dividends and interest from securities	31,152.	<u>31,152.</u>		STATEMENT 2
	5a	Gross rents				
Revenue	b	Net rental income or (loss)	2 7 2 2			
	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-2,503.			
	_b	assets on line 6a		0.		
Be.	7 8	Capital gain net income (from Part IV, line 2)				
	9	Net short-term capital gain Income modifications				
	10a	Gross sales less returns and allowances				
	1 .	Less Cost of goods sold		-		
		Gross profit or (loss)				
	11	Other income	40.	40.		STATEMENT 3
	12	Total Add lines 1 through 11	128,698.	31,201.		
	13	Compensation of officers, directors, trustees, etc	5,000.	0.		5,000.
	14	Other employee salaries and wages / 2	\$0-SW			
Ų.	15	rension plans, employee belieffts	1820			
nse.	16a	Legal fees Accounting fees STMT 4	\$ \ \ 800.	400.		400.
X	D	Other professional face CITIMID	1 1 5 772	5,772.		0.
E E	17	Interest STIPTIS		5,114.		
aţi	18		6,249.	565.		0.
ist	19	Taxes STMT 6000 Depreciation and depletion	121			
Ë	20	Occupancy // C	131			
Ā	21	Travel, conferences, and meetings				
and	22	Printing and publications		· · · · ·		
מ	23	Other expenses STMT 7	97,476.	0.		69.
Operating and Administrative Expenses	24	Total operating and administrative	44- 44-			F 460
O		expenses. Add lines 13 through 23	115,297.	6,737.	<u> </u>	5,469.
	25	Contributions, gifts, grants paid	54,000.		' 	54,000.
	26	Total expenses and disbursements.	160 007	6,737.		59,469.
_	27	Add lines 24 and 25 Subtract line 26 from line 12:	169,297.	6,/3/.	 	37,407.
	ł	Excess of revenue over expenses and disbursements	-40,599.			
	L	Net investment income (if negative, enter -0-)	=0,000	24,464.		
_	1	Adjusted net income (if negative, enter -0-)			N/A	
_						

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

20-8907213

Page 2

Form **990-PF** (2015)

Beginning of year End of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Part II (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 15,022. 15,022. 56,383. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts ▶ Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable 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 711,234. 650,<u>290.</u> STMT 8 694,215. b Investments - corporate stock 496,679. 482,526. STMT 9 c Investments - corporate bonds 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans 76,308. 72,089. 78,412. STMT 10 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 1,285,090. 1,177,036. 1,325,689. instructions. Also, see page 1, item 1) 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 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Net Assets or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted $\triangleright \mathbf{X}$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 1,325,689. 1,285,090 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund Ο. 29 Retained earnings, accumulated income, endowment, or other funds 1,285,090 1,325,689. 30 Total net assets or fund balances 1,325,689. 285,090 31 Total liabilities and net assets/fund balances 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 1,325,689. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) 090. 4 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) 285,090.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2015)

INC.

59,469.

8

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

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

	THE JOHN & ANN BARNEY FAMILY FOUNDATION,				
	m 990-PF (2015) INC.	20-890			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	1948 - see	instru	ctio	ns)
18	a 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)				
ŧ	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🛣 and enter 1%	1		2	<u>45.</u>
	of Part I, line 27b				
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				•
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			<u> </u>
_	Add lines 1 and 2	3			45.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0. 45.
5		5			<u>45.</u>
6	1 1	1 1			
	a 2015 estimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations - tax withheld at source 6b	4			
	c Tax paid with application for extension of time to file (Form 8868)	1			
	d Backup withholding erroneously withheld 6d	┥			
	Total credits and payments. Add lines 6a through 6d	1 ,		3.3	20.
8		8		<u> </u>	201
9		9			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		3.0	75.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11			25.
	art VII-A Statements Regarding Activities				
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in		Yes	No
	any political campaign?		1a		X
t	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definitio	n)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish				
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		1c		X_
C	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.	<u> </u>			
€	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		İ		
	managers. ► \$0 .				1
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		X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	37 / 3	4a		X
	b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		37
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					
	By language in the governing instrument, or Product the language of the governing instrument, or	to love	1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the statement of the coverning instrument?	le law	6	Х	
7	remain in the governing instrument? Did the foundation have at least \$5,000 in secrets at any time during the year? If "Yea " complete Part II, and (a), and Part II.	1/	7	X	
1	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X	V			
g.	a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶				
va	IN				
Ь	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)	<u>.</u>			
•	of each state as required by General Instruction G? If "No," attach explanation		8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar	"		
-	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		Х

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Part VII-A | Statements Regarding Activities (continued) No Yes 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of X section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 12 Х If "Yes," attach statement (see instructions) 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 N/A Website address Telephone no. $\triangleright 219-663-7770$ 14 The books are in care of \blacktriangleright KATHLEEN SMITH ZIP+4 ▶46385 Located at ▶ 1362 MUSCATATUCK DRIVE, VALPARAISO, 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A **▶** 15 and enter the amount of tax-exempt interest received or accrued during the year Yes No 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, 16 securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations X 1b section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X 1c before the first day of the tax year beginning in 2015? 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)): a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A 2b statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, N/A Form 4720, to determine if the foundation had excess business holdings in 2015.) 3b Х 4a 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 2015?

20-8907213

Page 5

Form 990-PF (2015)

THE JOHN & ANN BARNEY FAMILY FOUNDATION, 20-8907213 Form 990-PF (2015) INC Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained Yes expenditure responsibility for the grant? N/AIf "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b. If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deterred compensation (e) Expense account, other allowances **(b)** Title, and average hours per week devoted to position (If not paid, enter -0-) (a) Name and address JOHN R BARNEY PRESIDENT PO BOX 447 0. 0 0 VALPARAISO, IN 46384-0447 1.00 ANN B BARNEY VICE PRESIDENT PO BOX 447 0 0 0. 1.00 <u>VALPARAISO, IN 46384-0447</u> SECRETARY/TREASURER KATHLEEN B SMITH PO BOX 447 0. 0 2.00 0. <u> VALPARAISO, IN 46384-0447</u> JULIE BIESZCZAT DIRECTOR PO BOX 447 VALPARAISO. IN 46384-0447 1.00 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation NONE

Total number of other employees paid over \$50,000

THE JOHN & ANN BARNEY FAMILY FOUNDATION, 20-8907213_ Form 990-PF (2015) INC. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Part VIII 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service NONE 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. Expenses Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A

Form **990-PF** (2015)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

INC.

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1,195,352. a Average monthly fair market value of securities 1a 1b 35,703. b Average of monthly cash balances c Fair market value of all other assets 1c 1,231,055. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 1,231,055. Subtract line 2 from line 1d 18,466. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 212,589. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 60,629. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 60,629. Minimum investment return from Part X, line 6 245. 2a Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) 2b 2c 245. c Add lines 2a and 2b 60,384. Distributable amount before adjustments. Subtract line 2c from line 1 3 0. 4 Recoveries of amounts treated as qualifying distributions 60 384. 5 Add lines 3 and 4 6 0. Deduction from distributable amount (see instructions) 60 384. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 59,469. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b 0. Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 59,469. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 245. income. Enter 1% of Part I, line 27b

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

Form **990-PF** (2015)

59.

6

Form 990-PF (2015)

INC.

20-8907213 Page 9

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				60,384.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			58,962.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 59,469.				
a Applied to 2014, but not more than line 2a			58,962.	<u> </u>
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				507.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:			:	
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.1			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				59,877.
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)	0.			1
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				1
c Excess from 2013				
d Excess from 2014				
e Excess from 2015			1	
9 E.10000 II OIII EO IO	h		·	200 DE (2015)

THE JOHN & ANN BARNEY FAMILY FOUNDATION, Form 990-PF (2015) 20-8907213 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling 4942(j)(5) 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (c) 2013 (d) 2012 (e) Total (b) 2014 (a) 2015 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c 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 e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) **Information Regarding Foundation Managers:** a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here LX if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include:

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

c Any submission deadlines:

2015) INC.
Supplementary Information (continued) Form 990-PF (2015)

20-8907213 Page 11

3 Grants and Contributions Paid During the		ayment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid dunng the year				
BAPTIST HEALTH FOUNDATION				
8899 NORTH KENDALL DR				
MIAMI FL 33175				1,000
			1	
30YS & GIRLS CLUB OF NORTHWEST				
INDIANA				
338 BROADWAY				
BARY IN 46402				20,000
			į	
RAIN RESEARCH FOUNDATION	İ			
.11 W WASHINGTON ST, STE 1710				
CHICAGO, IL 60602				500
			ŀ	
CRISIS CENTER, INC				
101 N MONTGOMERY ST			ļ.	1 000
GARY, IN 46403				1,000
CROWN POINT COMMUNITY FOUNDATION				
PO BOX 522				
CROWN POINT IN 46308	<u> </u>			6_500
	NTINUATION SHEET	r(s)	► 3a	54,000
b Approved for future payment				
270277				
NONE				
	1			
			- :-	
<u>Total</u>				

20-8907213 Page 12

Part XVI-A **Analysis of Income-Producing Activities**

nter gross amounts unless otherwise indicated.	Unrelate	d business income		d by section 512, 513, or 514	(e)
•	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
Program service revenue:	code	Amount	code	Amount	function income
a					
b					
•	L I				
d	t l				
_	ľ				
f			 		
	- 				
Fees and contracts from government agencies	<u> </u>				
Membership dues and assessments	-				
nterest on savings and temporary cash				0	
nvestments			14	9.	
Dividends and interest from securities			14	31,152.	
Net rental income or (loss) from real estate:			_		
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income			01	40.	
Gain or (loss) from sales of assets other					
han inventory			18	-2,503.	
Net income or (loss) from special events			- - 		
Gross profit or (loss) from sales of inventory					
Other revenue:					
	-				
? 			+		<u> </u>
d	_				
·	_		. 	00.600	
Subtotal. Add columns (b), (d), and (e)),	28,698.	
Fotal. Add line 12, columns (b), (d), and (e)				13	28,69
worksheet in line 13 instructions to verify calculations.	.)				
art XVI-B Relationship of Activities	s to the Acc	omplishment of	Exempt	Purposes	
e No. Explain below how each activity for which in				ted importantly to the accomp	olishment of
▼ the foundation's exempt purposes (other the	an by providing fu	nds for such purposes).			
					<u> </u>
				<u> </u>	
					
				· · · · · · · · · · · · · · · · · · ·	
					
					

Form 99		015) INC.						20-8	907213	Pa	ge 13
Part	XVII	Information Re Exempt Organ		sfers To a	nd Tran	sactions a	nd Relations	ships With Non	charitable		
1 D				of the follows		ther eventuate	n described in sec	ation EO1/o) of		Yes	No
		ganization directly or indi			-			(0) 100 (0)		163	140
		other than section 501(c)			-		izations				
		from the reporting found	ation to a nuncharitat	ole exempt org	yanızation o	l i			40/43		v
•	Cash	nonata							1a(1)		X
) Other								1a(2)		
		sactions:	hla						45/43	<u> </u>	-
•		of assets to a noncharital							1b(1)		X
•		ases of assets from a not	•	rganization					1b(2)		X
		l of facilities, equipment,	or other assets						1b(3)		X
		oursement arrangements							1b(4)		X
		or loan guarantees							1b(5)	<u> </u>	
		mance of services or me							1b(6)	_	X
		facilities, equipment, ma	-		-	45 1 . 14 -6.			1 <u>c</u>		
		ver to any of the above is								seis,	
		s given by the reporting fo			ed less than	tair market valu	e in any transactio	on or snaring arrangen	ent, snow in		
(a) Line i	$\overline{}$) the value of the goods, (b) Amount involved			avamat ara	annization.	(4) 5				
(a) Little i	10	(b) Amount involved	(c) Name of	noncharitable	exemptor	Janization	(u) Description	on of transfers, transaction	s, and sharing ar	rangeme	ะ
				N/A							
		 									
	+						- 				
											-
	+			<u> </u>							
	\dashv										
							<u> </u>	· · · · · · · · · · · · · · · · · · ·			
											
	+			 							
-									 		
									·		
	_						 				
	_										-
			L <u>-</u>								
		dation directly or indirect				exempt organi	zations described				
		501(c) of the Code (other		(3)) or in sect	ion 527?				Yes	LX	No
P II.	Yes, co	mplete the following scho					-	4.1 Dana at an at ant			
		(a) Name of org	anization		(b) Type (of organization		(c) Description of rela	ttionsnip		
		N/A					· · ·				
					ļ						
	T., .										
Cian	and be	penalties of perjury, I declare the light, it is true, correct, and con	tnat I have examined this oplete. Declaration of pre	s return, includin eparer (øther thai	ig accompany n taxpayer) is	ing schedules and based on all inform	statements, and to the nation of <u>which prepar</u>	er has any knowledge.	May the IRS return with the	discuss	this
Sign Here		W . 1/1/1 ///	Q / 1	16		1/9/11		TARY/TREAS		(see ins	<u>str</u>)?
		JOSEVITEEN (U James	71		11/14	URER		X Yes	: <u> </u>	_l No
	Sign	ature of officer or trustee		I Danie	Date		Title	Chock [OTIN		
	ł	Print/Type preparer's na		Preparer's s	ignature	1	Date	. — .	PTIN		
Paid	-	MATTHEW M.	BAPPLE,	ment		(51	a /. /.	self- employed	500515		
raid		CPA		CI LIVE	- 001	10m	3/18/16	l ,	P00742	<u>:511</u>	

Form **990-PF** (2015)

Firm's EIN ► 35-2018898

Phone no. 219-662-2727

Preparer

Use Only

Firm's name ► BAPPLE & BAPPLE, INC

CROWN POINT, IN 46307

Firm's address ► 101 N MAIN ST

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

Name of the organization

or 990-PF

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2015

THE JOHN & ANN BARNEY FAMILY FOUNDATION, <u>20-890721</u>3 Organization type (check one). Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

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

Name of organization

THE JOHN & ANN BARNEY FAMILY FOUNDATION,

Employer identification number

<u>INC.</u>		20	<u> 1-8907213</u>
Part I	* Contributors (see instructions). Use duplicate copies of Part I	ıf addıtional space ıs needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN AND ANN BARNEY PO BOX 447 VALPARAISO, IN 46384	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash Complete Part II for

noncash contributions.)

Name of organization

Employer identification number

THE JOHN & ANN BARNEY FAMILY FOUNDATION, INC.

20-8907213

Part II	Noncash Property (see instructions) Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

янт	A MHOT.	A NINI	BARNEY	V.TTMA'S	FOUNDATION
1111	0.01114 - 00	TATA	DUVIARI	LUMILLI	FOUNDATION,

ame of organiza				Employer identification number
HE JOHN	. ANN BARNEY FAMILY	FOUNDATION,		20-8907213
Part III	Exclusively religious, charitable, etc., contr he year from any one contributor. Complete completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additional	Olumns (a) through (e) and the , charitable, etc., contributions of \$1	following line i	n 501(c)(7), (8), or (10) that total more than \$1,000 for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer (of gift	
	Transferee's name, address, an	d ZIP + 4	Re	lationship of transferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, an	od ZIP + 4	Re	lationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer	of gift	
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer	of gift	
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee

INC.

20-8907213

Part XV **Supplementary Information Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient FLORIDA FAIRTAX EDUCATIONAL ASSOCIATION INC 2799 S POINTE VEDRA BEACH BLVD S PONTE BEDRA BEACH, FL 32082 1,000. HABITAT FOR HUMANITY OF NW IN 6114 W RIDGE RD 1,000. **GARY** IN 46408 HEIFER INTERNATIONAL 1 WORLD AVENUE 250. LITTLE ROCK, AR 72202 INDIANA UNIVERSITY FOUNDATION PO BOX 500 2,000. BLOOMINGTON, IN 47402 LIFE ON LIFE NFP 5950 W EARIE ST 5,000. CHICAGO, IL 60644 NATIONAL MS SOCIETY INDIANA CHAPTER 7301 GEORGETOWN RD, SUITE 112 INDIANAPOLIS, IN 46268 1,000. NORTHWEST INDIANA CANCER KIDS 217 BACH RD 250. SCHERERVILLE, IN 46375 OPPORTUNITY ENTERPRISES, INC 2801 EVANS AVENUE VALPARAISO, IN 46383 10,000. RILEY CHILDREN'S FOUNDATION 30 S MERIDIAN ST. SUITE 200 INDIANAPOLIS IN 46204 1,000, ST TERESA OF AVILA 1511 LAPORTE AVE VALPARAISO IN 46383 1,000. Total from continuation sheets 25.000.

INC.

20-8907213

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) VANDERBILT PRESBYTERIAN CHURCH 1225 PIPER BLVD. NAPLES, FL 34110 2,500. Total from continuation sheets

FORM 990-PF INTERE	ST ON SAVIN	IGS AND TEM	IPORARY (CASH IN	VESTMENTS	STATEMENT	1
SOURCE	REVE			(B) VESTMENT ICOME	(C) ADJUSTED NET INCOME		
MORGAN STANLEY			9.		9.		
TOTAL TO PART I, LI	NE 3	4-4-5-4	9.		9.		
FORM 990-PF	DIVIDENDS	S AND INTER	REST FROI	M SECUR	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	RE	(A) VENUE BOOKS	(B) NET INVES' MENT INCO		
MORGAN STANLEY	31,666.	51	4.	31,152.	31,15	2.	
TO PART I, LINE 4	31,666.	51	14.	31,152.	31,15	2.	
FORM 990-PF		OTHER]	INCOME			STATEMENT	3
DESCRIPTION			(A) REVENU PER BOO		(B) NET INVEST- MENT INCOME		
CLASS ACTION PROCEE	DS			40.	40	•	
TOTAL TO FORM 990-F	PF, PART I,	LINE 11 =		40.	40	•	
FORM 990-PF		ACCOUNT	ING FEES		- 	STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
		800	•	400.		4	100.
TO FORM 990-PF, PG	1, LN 16B	800	•	400.			100.

FORM 990-PF. C	THER PROFES	SIONAL FEES	Si	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	5,772.	5,772.		0.
TO FORM 990-PF, PG 1, LN 16C	5,772.	5,772.		0.
FORM 990-PF	TAX	ES	Sī	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
FOREIGN TAX PAID PRIOR YEAR TAX PAID ESTIMATED TAX PAID	565. 2,364. 3,320.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	6,249.	565.		0.
FORM 990-PF	OTHER E	XPENSES	S	ratement 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSE UNREALIZED LOSS ON	69.	0.		69.
INVESTMENTS	97,407.	0.		0.
TO FORM 990-PF, PG 1, LN 23	97,476.	0.		69.

FORM 990-PF.	CORPO	ORATE STOCK		STATEMENT	8
DESCRIPTION			BOOK VALUE	FAIR MARKE	r
MARKETABLE SECURITIES		-	711,234.	650,2	90.
TOTAL TO FORM 990-PF, PART II,	LINE 3	10B =	711,234.	650,2	90.
FORM 990-PF	CORPO	ORATE BONDS		STATEMENT	9
DESCRIPTION			BOOK VALUE	FAIR MARKE' VALUE	т
MARKETABLE SECURITIES		-	482,526.	439,6	35.
TOTAL TO FORM 990-PF, PART II, LINE 10C		482,526.	439,635		
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT	10
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	т
OTHER MARKETABLE SECURITIES		COST	76,308.	72,0	89.
TOTAL TO FORM 990-PF, PART II, LINE 13			76,308.	72,0	89.

FORM 990-PF. LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 11

NAME OF CONTRIBUTOR

ADDRESS

JOHN BARNEY

PO BOX 447

VALPARAISO, IN 46384-0447