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SCANNED JUN 0 1 2016

Return of Private Foundation

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

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For calendar year 2015 or tax year beginning and ending A Employer identification number Name of foundation 30-0238760 THE ARIZONA FAMILIES FOUNDATION, INC. Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 202 317-638-3900 50 S. MERIDIAN STREET City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here INDIANAPOLIS, IN 46204 Initial return Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Accrual F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col (c), line 16) 91,617. (Part I, column (d) must be on cash basis) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income ıncome 22,600. N/A 1 Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch B Interest on savings and temporary cash investments STATEMENT 628. 628. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 10,024 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 111,126. 10,024 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications S-0SC 10a Gross sales less returns and allowances b Less Cost of goods sol c Gross profit or (loss) 11 Other income 33,253 10,653 Total Add lines 1 through 0. 0 Ο. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 5 0 STMT 3 16a Legal fees 965. 0. STMT 4 **b** Accounting fees 0 326. 5 c Other professional fees STMT 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 1,296 expenses. Add lines 13 through 23 22,000 22,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 22,000. 0 23,296 Add lines 24 and 25 27 Subtract line 26 from line 12: 9,957 2 Excess of revenue over expenses and disbursements 10,653. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

5 Decreases not included in line 2 (itemize)

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

	ARIZONA FAMILIE and Losses for Tax on Ir			INC	•	3	30-023	<u>8760</u>	Page 3
(a) List and desc	ribe the kind(s) of property sold (e.g arehouse; or common stock, 200 shs	., real estate,	-	(b) Ho P - D -	ow acquired Purchase Donation	(c) Date (mo.,	acquired day, yr.)	(d) Dat (mo., d	
1a CPDC PROPERTY	INTEREST			 -	P	12/3	30/15	12/3	0/15
b CHARLES SCHWAB		.,			P	VAR		VARI	
c CHARLES SCHWAB			· · · · · · · · · · · · · · · · · · ·		P	VAR		VARI	
d CAPITAL GAINS									
e		<u>-</u>						-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis				Gain or (loss is (f) minus (
a 28,689.			18,94	4.	··· ·			9	,745.
b 52,002.			52,45						-456.
c 30,234.]	29,70	0.0					534.
d 201.									201.
е									
Complete only for assets showing	ng gain in column (h) and owned by	the foundation on	12/31/69			(1) Gains (Col. (h) gaın	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (ı) . (ı), ıf any		C	ol. (k), but Losse:	not less that s (from col. (n -0-) or h))	
a								9	,745.
b									-456.
С									534.
d									201.
e						_			
2 Capital gain net income or (net ca	apital loss) If gain, also enter			}	2			10	,024.
, ,				7					
3 Net short-term capital gain or (logifigain, also enter in Part I, line 8,		10 (6).]					
If (loss), enter -0- in Part I, line 8					3		N/A		
Part V Qualification L	Inder Section 4940(e) for	Reduced T	ax on Net	inve	estment Ir	ncome			
(For optional use by domestic private	e foundations subject to the section	4940(a) tax on ne	t investment in	ncome.)			N/A	
If section 4940(d)(2) applies, leave t	his part blank								
ii section 4540(u)(z) applies, leave t	ins part blank.								
Was the foundation liable for the sec If "Yes," the foundation does not qua			in the base pei	rıod?				Yes	∟ No
	each column for each year; see the i		making any e	entries.					
(a) Base period years Calendar year (or tax year beginn	ing in) Adjusted qualifying dis	stributions	Net value of no	(c) onchari	table-use asse	ts	Distrit (col. (b) div	(d) oution ratio rided by col.	(c))
2014									
2013									
2012									
2011									
2010									
2 Total of line 1, column (d)						2			
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5, or	by the number	r of yea	rs				
the foundation has been in existe	ence if less than 5 years					3			
4 Enter the net value of noncharita	ble-use assets for 2015 from Part X,	line 5				4			
	,					5			
5 Multiply line 4 by line 3						3			
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)					6	-		
7 Add lines 5 and 6						7			
8 Enter qualifying distributions fro	m Part XII, line 4					8			
If line 8 is equal to or greater tha See the Part VI instructions.	n fine 7, check the box in Part VI, line	e 1b, and complete	e that part usin	ng a 1%	tax rate.				
							-	orm 990 -	PF (2015)

Form	990-PF (2015) THE ARIZONA FAMILIES FOUNDATION, INC.	30-	0238	760		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see i	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	L	N/.	A	
	of Part I, line 27b					
	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				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-	5				0.
6	Credits/Payments:					
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a					
b	Exempt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d		<u> </u>			<u>0.</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_				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶	11	l			
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 participate or intervene	ın			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition))?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities.					
C	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 ▶ \$0.					
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, o	r				1
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
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:			1		
	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 Part XV	,		7	X	
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	IN					
t	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 cale	ndar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," 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		Х

Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		}	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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 ► FRED A. OST, JR. Telephone no. ► 317-63	38-3	900	
	Located at ▶ 50 SOUTH MERIDIAN STREET, SUITE 202, INDIANAPOLIS ZIP+4 ▶4	5204		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\cdot \Box \Box$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16]	Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		•	
	foreign country			
Pa	art 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
1:	a 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			İ
	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			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	}		
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
	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			
	before the first day of the tax year beginning in 2015?	1c		Х
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? Yes X No			
	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			
	statement - see instructions.) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1		
	>			
3	a 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		İ	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	3b		
4	a 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 charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	<u> </u>	X

Form 990-PF (2015) THE ARIZONA FAMILIES FOU	NDATION, INC.		30-02387	50 Page 6
Part VII-B' Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,		
any voter registration drive?	_		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section	,	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
4945(d)(4)(A)? (see instructions)	1 1 1		s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or i		s X No	
the prevention of cruelty to children or animals?	des the avacations described		S LALINO	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations	N/A 5	ib
section 53 4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h				-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined		
expenditure responsibility for the grant?		I/A 🔲 Ye	s No	
If "Yes," attach the statement required by Regulations section 53 494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				1
a personal benefit contract?	pay promisers on	☐ Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a property of the property o	personal benefit contract?			ib X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y6	s X No	1 1
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A 7	'b_
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their				
() No	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deferred compensation	allowances
KATHLEEN M. OST	PRESIDENT			
50 S. MERIDIAN ST, SUITE 202		_		
INDIANAPOLIS, IN 46204	0.00	0.	0.	0.
FRED A OST, JR.	SECRETARY, TR	REASURER		
50 S. MERIDIAN ST, SUITE 202				0
INDIANAPOLIS, IN 46204	0.00	0.	0.	0.
ALEXANDRIA M. GABLE	DIRECTOR			
50 S. MERIDIAN ST, SUITE 202	- 00	0.	0.	0.
INDIANAPOLIS, IN 46204	0.00	<u> </u>	0.	<u> </u>
	-			
	-			
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	, enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
NONE	devoted to position	-	compensation	allowarices
NONE	-			
	1			
				-
	_			
		<u> </u>	<u> </u>	
Total number of other employees paid over \$50,000		<u> </u>	> _	0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Paid Employees, and Contractors (continued)		0238760 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
	of service	(c) Compensation
NONE		(0)
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	the	Expenses
1	"	
SEE STATEMENT 7		0.
2		
3		
4		
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
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.
		Form 990-PF (2015)

30-0238760 Form 990-PF (2015) THE ARIZONA FAMILIES FOUNDATION, INC. 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: 61,408. a Average monthly fair market value of securities 1a 6,504. 1b b Average of monthly cash balances c Fair market value of all other assets 1c 67,912. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 67,912. 3 Subtract line 2 from line 1d 3 1,019. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 5 66,893. 5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 3,345. Minimum investment return. Enter 5% of line 5 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.) 3,345. Minimum investment return from Part X, line 6 Tax on investment income for 2015 from Part VI, line 5 2a 2b income tax for 2015. (This does not include the tax from Part VI.) 2c Add lines 2a and 2b 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 345. Add lines 3 and 4 5 0. Deduction from distributable amount (see instructions) 6 7 345. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 22,000. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a

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)

22,000.

3b

4

6

4

Cash distribution test (attach the required schedule)

4940(e) reduction of tax in those years.

Adjusted qualifying distributions. Subtract line 5 from line 4

income Enter 1% of Part I, line 27b

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

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

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	-			3,345.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:	į	0		
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010 18,906.				
b From 2011 8,289.				
c From 2012 8,087.				
d From 2013 16,973.				
e From 2014 21,932.				
f Total of lines 3a through e	74,187.			
4 Qualifying distributions for 2015 from	-			
Part XII, line 4: ► \$22,000.				
a Applied to 2014, but not more than line 2a			0.	
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				3,345.
e Remaining amount distributed out of corpus	18,655.			
Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	92,842.			
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	1	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	i	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				0.
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.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	18,906.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	73,936.			<u> </u>
10 Analysis of line 9:				
a Excess from 2011 8, 289.		1	}	
b Excess from 2012 8,087.				
c Excess from 2013 16,973.				
d Excess from 2014 21,932.				
e Excess from 2015 18,655.				Form 000-DE (0015)

Part XIV Private Operating F	ZONA FAMILI			N/A	238760 Page 10
	·		1-A, question 3)	N/A	
1 a If the foundation has received a ruling o foundation, and the ruling is effective fo					
b Check box to indicate whether the found	•	<u> </u>	un coction	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g loulidation described	Prior 3 years	4542())(5) 01 4	342(J)(3)
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for	(4) 2010	(5) 2511	(6) 23.3	(4) 13 12	(0) 10101
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					
3 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 Info			if the foundati	on had \$5,000 or m	ore in assets
at any time during t	he year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			tributions received by	the foundation before the cl	ose of any tax
year (but only if they have contributed r	nore than \$5,000) (See s	ection 507(d)(2).)			
KATHLEEN M. OST	<u>,</u>				
b List any managers of the foundation wh			(or an equally large p	ortion of the ownership of a	partnership or
other entity) of which the foundation ha	s a 10% or greater intere	o.,			
NONE				· · ·	
2 Information Regarding Contribut					
Check here X if the foundation of the foundation makes gifts, grants, etc.					
	`	· · · · · · · · · · · · · · · · · · ·			iu u.
a The name, address, and telephone num				aressea:	
FRED A OST, JR, 317				C204	
50 S MERIDIAN STREET				6204	
b The form in which applications should	be submitted and informa	tion and materials they	snoula include:		
N/A					
c Any submission deadlines:					
NONE	la ayah as hu sa	ol arona, abasitable £314.	Lundo of matitutess	or other feeters:	
d Any restrictions or limitations on award TO BENEFIT CHRISTIAN					מעדספ יייר
STUDENTS ATTENDING			LIS, GRANT	OK SCHODAK	SHIES IO
PIONEMIS WITEMPING (TIVIDITUM DC	1100110			- 000 PF

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager or substantial contributor Name and address (home or business) a Paid during the year TO FURTHER CHRISTIAN THE OAKS ACADEMY EDUCATION 2301 N PARK AVENUE 20,000. INDIANAPOLIS, IN 46205 TO FURTHER CHRISTIAN FRENCH CAMP ACADEMY EDUCATION ONE FINE PLACE 2,000. FRENCH CAMP, MS 39745 **▶** 3a 22,000. Total b Approved for future payment NONE **▶** 3b Total

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

Enter gross amounts unless otherwise indicated.	Unrelated	d business income		by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Tunction income
a			+		
b	1 1				
C	1		 		·· =
d e	1		1		
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					<u> </u>
4 Dividends and interest from securities			01	628.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	ļ				
6 Net rental income or (loss) from personal					
property			+ +		
7 Other investment income					
8 Gain or (loss) from sales of assets other			01	201.	9,823.
than inventory Net income or (loss) from special events			101	201.	3,043.
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
8					
b					
С					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	829.	
13 Total Add line 12, columns (b), (d), and (e)				13	10,653.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xempt F	Purposes	
Line No. Explain below how each activity for which inc	ome is reported ii	n column (e) of Part XVI-	·A contribute	ed importantly to the accomi	olishment of
the foundation's exempt purposes (other than				ou importantly to the decom	
4 INVESTMENTS TO PROVIDE	FOR CHA	ARITABLE FU	NCTIO	NS	
					
					
					
1		,			
					···

THE ARIZONA FAMILIES FOUNDATION, INC. Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) X 1a(2) Х (2) Other assets **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) 1b(4) (4) Reimbursement arrangements 1b(5) (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (b) Type of organization (c) Description of relationship (a) Name of organization Under penalties accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer an taxpayer) is b Sign Here X Yes PRESIDENT Signature of officer or trustee Date Title Check Print/Type preparer's name Preparer's signature Date self- employed Paid LEE R. FORD 05/09/16 P01321652

SUITE 320

(317) 816-1100

Firm's EIN ► 35-2108852

Phone no.

Preparer

Use Only

Firm's name ► FORD & COMPANY,

CARMEL,

Firm's address ▶ 11595 N MERIDIAN ST,

IN 46032

Schedule B

(Form·990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www.irs.gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

	THE ARIZONA FAMILIES FOUNDATION, INC.	30-0238760			
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	n			
	527 political organization				
Form 990-PF X 501(c)(3) exempt private foundation					
4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation				
Note. Only a section General Rule	ization is covered by the General Rule or a Special Rule . In 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Sp				
	anization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions from any one contributor. Complete Parts I and II. See instructions for determining a con				
Special Rules					
sections 50 any one co	anization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% significant to 30(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the 1990-EZ, line 1 Complete Parts I and II	13, 16a, or 16b, and that received from			
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 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

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)

Employer identification number

THE ARIZONA FAMILIES FOUNDATION, INC.

30-0238760

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FRED A OST JR 11429 ST ANDREWS LANE CARMEL, IN 46032	\$\$22,600.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll 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 Oncash Complete Part II for noncash contributions)

Employer identification number

THE ARIZONA FAMILIES FOUNDATION, INC.

30-0238760

Part II	Noncash Property (see instructions) Use duplicate copies of P	art 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
			990, 990-EZ, or 990-PF) (

Employer identification number

THE AR	IZONA FAMILIES FOUNDATI	ON, INC.		30-0238760		
Part III	Exclusively religious, charitable, etc., contribute the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious.	lumns (a) through (e) and the follov charitable, etc., contributions of \$1,000 or	ving line entry. For organization	c		
(=\ \\ \	Use duplicate copies of Part III if additional	space is needed				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
-		(e) Transfer of gift	<u> </u>			
-	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
	Transferee's name, address, and	(e) Transfer of gift		nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
	Transferee's name, address, an	(e) Transfer of gif		nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	Insferor to transferee		

FORM 990-PF INTERE	ST ON SAVIN	IGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1	
SOURCE	(A REVEI PER BO	NUE	(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME			
BMO HARRIS	· · ·	1.						
TOTAL TO PART I, LI	NE 3		1.		1.			
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT	2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE		(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME	
CHARLES SCHWAB 3169-8151	829.	20	1.	628. 628		8.		
TO PART I, LINE 4	829.	20	1.	628.	62	8.		
FORM 990-PF		LEGAL	FEES			STATEMENT	3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(ENET IN MENT I	WEST-	(C) ADJUSTED NET INCOM			
LEGAL FEES		5.		0.			0.	
TO FM 990-PF, PG 1,	5.	5. 0.				0.		
FORM 990-PF		ACCOUNTING FEES			STATEMENT 4			
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I					
ACCOUNTING FEES	965.		0.		·····	0.		
					 			

FORM 990-PF C	THER PROFES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
MANAGEMENT FEES	326.	0.		0.	
TO FORM 990-PF, PG 1, LN 16C	326.	0.			
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6	
DESCRIPTION		ВО	OK VALUE	FAIR MARKET VALUE	
DESCRIPTION SCHWAB ACCOUNT 3169-5181		BO	OK VALUE	FAIR MARKET	

ACTIVITY ONE

THE FOUNDATION RECEIVES AND ADMINISTERS FUNDS FOR RELIGIOUS, CHARITABLE AND EDUCATIONAL PURPOSES, ALL FOR THE PUBLIC WELFARE, WITH THE SPECIFIC PURPOSES TO BENEFIT CHRISTIAN EDUCATION BY (A) PROVIDING AID DIRECTLY THROUGH GIFTS AND GRANTS TO CHRISTIAN SCHOOLS, (B) PROVIDING SCHOLARSHIPS TO STUDENTS ATTENDING CHRISTIAN SCHOOLS, AND (C) PROVIDING SCHOLARSHIPS TO CHRISTIAN STUDENTS ATTENDING COLLEGES AND UNIVERSITIES.

							EXPENSES
то	FORM	990-PF,	PART	IX-A,	LINE	1	0.