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SCANNED AUG 1 0 2016

* Form 990-PF

Department of the Treasury Internal Revenue Service

EXTENDED TO AUGUST 15, 20 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.irs gov/form990pf. OMB No 1545-0052

For	calendar year 2015 or tax year beginning		, and ending				
Name of foundation A Employer identification number							
	THE CALLER FAMILY CHARITAB	N	31-1570007				
	mber and street (or P O box number if mail is not delivered to street	Room/suite	B Telephone number				
	340 EAST HIGH STREET			(859)266-1			
	ty or town, state or province, country, and ZIP or foreign po SEXINGTON, KY $40502-2107$	ostal code		C If exemption application is p	ending, check here		
	Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organizations	s check here		
_	Final return	Amended return	The public charty				
	Address change	Name change		2 Foreign organizations me check here and attach co	eeting the 85% test, omputation		
H_ (Check type of organization: X Section 501(c)(3) exe			E If private foundation sta	tus was terminated		
<u>L</u>		Other taxable private founda		under section 507(b)(1)	(A), check here		
	air market value of all assets at end of year J Accounting	=	Accrual	F If the foundation is in a			
	from Part II, col (c), line 16) ▶\$ 792, 459. (Part I, colur	ner (specify)	oasis)	under section 507(b)(1)	(B), check here		
	art Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements		
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)		
	1 Contributions, gifts, grants, etc., received	75,251.		N/A			
	2 Check If the foundation is not required to attach Sch. B						
	3 Interest on savings and temporary cash investments	14.000	11.000				
	4 Dividends and interest from securities	14,800.	14,800.		STATEMENT 1		
	5a Gross rents b Net rental income or (loss)		<u> </u>				
	63 Not som or (1000) form and of county and an in-	19,100.					
Revenue	b Gross sales price for all 94,419.						
eve	7 Capital gain net income (from Part IV, line 2)		19,100.	I RE	CEIVED		
<u> </u>	8 Net short-term capital gain				70		
	9 Income modifications Gross sales less returns			8 AUG	0 8 2016		
	10a and allowances			Si AUG	82		
	b Less Cost of goods sold c Gross profit or (loss)			OGD	EN IT		
	11 Other income				-IV. U		
	12 Total Add lines 1 through 11	109,151.	33,900.				
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.		
	14 Other employee salaries and wages						
S	15 Pension plans, employee benefits						
Expense	b Accounting fees STMT 2	4,600.	2,300.		2,300.		
Ä	c Other professional fees STMT 3	7,890.	7,890.		0.		
Š	17 Interest	1.	1.		0.		
trat	18 Taxes STMT 4	703.	88.		15.		
SIL	19 Depreciation and depletion			-			
Operating and Administrative	20 Occupancy 21 Travel, conferences, and meetings		- ··., ·				
ď	22 Printing and publications						
ga	23 Other expenses STMT 5	1,251.	0.		1,251.		
atır	24 Total operating and administrative	•		,			
ber	expenses Add lines 13 through 23	14,445.	10,279.		3,566.		
U	25 Contributions, girts, grants paid	47,450.			47,450.		
	26 Total expenses and disbursements	61 005	10 270		F1 016		
	Add lines 24 and 25 27 Subtract line 26 from line 12:	61,895.	10,279.		51,016.		
	3 Excess of revenue over expenses and disbursements	47,256.					
	b Net investment income (if negative, enter -0-)	23,621.					
	c Adjusted net income (if negative, enter -0-)			N/A			
5235 11-2	501 LHA For Paperwork Reduction Act Notice, see II	nstructions		2.1	Form 990-PF (2015)		
			1	926	12		
				\cup	• • •		

Fo	rm 99	00-PF (2015) THE CALLER FAMILY CHARIT		N 31-	1570007 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
_	_		(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	93,707.	60,762.	60,726.
		Savings and temporary cash investments Accounts receivable ►	33,101.	00,702.	00,720.
	3	Less, allowance for doubtful accounts			
	A	Pledges receivable			
	"	Less: allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			·
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ξ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ÿ	1	Investments - U.S. and state government obligations STMT 7	25,067.	74,918.	74,735.
	Ь	Investments - corporate stock STMT 8	197,906.	74,918. 213,243.	300,357.
	C	Investments - corporate bonds STMT 9	40,172.	25,871.	25,902.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis ►			
		Less accumulated depreciation			
	1	Other assets (describe ► STATEMENT 10)	351,055.	380,369.	330,739.
	16	Total assets (to be completed by all filers - see the			
_	<u> </u>	instructions. Also, see page 1, item 1)	707,907.	755,163.	792,459.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
les	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable Other liabilities (describe)			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	-	Foundations that follow SFAS 117, check here			
	1	and complete lines 24 through 26 and lines 30 and 31			
Ses	24	Unrestricted			
and	25	Temporarily restricted			
Bal	26	Permanently restricted			
pur		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31			
S	27	Capital stock, trust principal, or current funds	0.	0.	
sset	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	707,907.	755,163.	
Š	30	Total net assets or fund balances	707,907.	755,163.	
	31	Total liabilities and net assets/fund balances	707,907.	755,163.	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30)		
		st agree with end-of-year figure reported on prior year's return)		1	707,907.
	•	amount from Part I, line 27a		2	47,256.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	ines 1, 2, and 3		4	755,163.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 30	6	755,163.

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		LLER FAMILY C			IDA	TIO	N	3	1-157	0007	Page 3
Part IV Càpital Gains and Losses for Tax on Investment Income (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co) (b) How acquirr P - Purchase D - Donation					equired hase		acquired day, yr)	(d) Dat (mo , da			
1a			 _			Don	ation				
<u>,,,,</u>	SEE ATTACHED ST	PATEMENT			1-						
C											
<u>d</u>								_	.,		
<u>e</u>			T								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		expense of sale					iain or (loss) s (f) minus (
_a										· · ·	
<u>b</u>											
<u>c</u>											
e	94,419.			75,31	9.					19	,100.
	Complete only for assets showing gai	n in column (h) and owned by	the foundatio		<u>. , .</u>			Gains ((Col. (h) gaın		, 100.
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	xcess of col (ı) r col (ı), ıf any			col	(k), but	not less thar (from col. (I	1 -0-) or	
a											
_ <u>b</u>									<u>-</u>		
<u>d</u>											
<u>e</u>			_				1			19_	<u>,100.</u>
2	Capital gain net income or (net capital l	oss) $ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0} \end{cases} $	r in Part I, line - in Part I, line	7 e 7	} 2				19	,100.	
	Net short-term capital gain or (loss) as		nd (6):		٦		1				
	If gain, also enter in Part I, line 8, colum	ın (c).			 	9			N/A		
	If (loss), enter -0- in Part I, line 8 art V Qualification Unde	r Section 4940(e) for	Reduce	d Tax on Net	· Inv	estn	ent Inc	ome	IN/A		
ш	r optional use by domestic private foun								· · · · · · · · · · · · · · · · · · ·		
(1 0	optional use by domestic private total	dations subject to the section.	4340(a) lax u	ii iiet iiivestiiieiit ii	ICOITI	5.)					
If s	ection 4940(d)(2) applies, leave this pa	rt blank									
Wa	s the foundation liable for the section 4	942 tax on the distributable an	nount of any v	rear in the base per	rınd?					Yes	X No
	/es," the foundation does not qualify un		, ,	•							
	Enter the appropriate amount in each				ntries	S.					
	(a)	(b)			(c)				Dietrib	(d) ution ratio	
(Base period years Calendar year (or tax year beginning in)	Adjusted qualifying dis	tributions	Net value of no			use assets		(col. (b) divi	ided by col	(c))
	2014	5	0,421.			84	0,821				
	2013		2,075.				4,268				<u>51045</u>
	2012		3,550.				0,747				<u>55075</u>
	2011		1,023.				2,809				<u>61266</u>
	2010	3	<u>9,039.</u>			<u>55</u>	9,442	•	,	.0	<u>69782</u>
	Total of line 1, column (d)							2		. 2	97134
	Average distribution ratio for the 5-yea the foundation has been in existence if	•	on line 2 by 5	, or by the number	of ye	ears		3		. 0	59427
		·									
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5						4		827	,411.		
5	Multiply line 4 by line 3							5		49	<u>,171.</u>
6	Enter 1% of net investment income (19	% of Part I, line 27b)						6			236.
7	Add lines 5 and 6							7		49	,407.
8	Enter qualifying distributions from Part	XII, line 4						8		51	,016.
	If line 8 is equal to or greater than line See the Part VI instructions.	7, check the box in Part VI, line	1b, and com	plete that part usin	ig a 1	% tax i	rate				

	art.VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se			Page 4	
		e msu	uctio	113)	
16	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)		_	20	
ľ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			36.	
_	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).			^	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2			<u>0.</u> 36.	
J					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tay beard as investment income. Subtrest line 4 from line 3, liferage as less earliers.			<u>0.</u>	
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments			30.	
6					
	a 2015 estimated tax payments and 2014 overpayment credited to 2015 Exempt foreign organizations - tax withheld at source 6b				
	t lax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6c 6d				
			0	02.	
8				04.	
9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			66.	
	Enter the amount of line 10 to be: Credited to 2016 estimated tax			0.	
	art VII-A Statements Regarding Activities			<u> </u>	
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No	
	any political campaign?	1a		X	
ь	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 or		·		
	distributed by the foundation in connection with the activities				
c	Did the foundation file Form 1120-POL for this year?	10		X	
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. ▶ \$				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ▶ \$ 0.			ĺ	
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			İ	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X	
b	of "Yes," has it filed a tax return on Form 990-T for this year?	. 4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X	
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?	6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	<u> </u>	
_	Fater the state to which the favorable country is the children of the children				
88	Enter the states to which the foundation reports or with which it is registered (see instructions)	-			
	KY	-			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 8					
to the state of th					
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar					
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses					
	because production apparatural contributors out the time tay year. If thes, attach a schedule listing their names and addresses	10		X	

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X

3b

4a

Yes X No

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Part VII-B Statements Regarding Activities for Which			31-15700	<u>107</u> Page €			
	1 Form 4/20 May Be	Requirea (contin	nued)				
5a During the year did the foundation pay or incur any amount to		(]	[]				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							
(2) Influence the outcome of any specific public election (see section 4955)); or to carry on, directly or indi		[1 2]				
any voter registration drive?			es X No				
(3) Provide a grant to an individual for travel, study, or other similar purpos		Y	es X No				
(4) Provide a grant to an organization other than a charitable, etc., organiza	tion described in section						
4945(d)(4)(A)? (see instructions)			es X No				
(5) Provide for any purpose other than religious, charitable, scientific, litera	ry, or educational purposes, or		[]				
the prevention of cruelty to children or animals?			es X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify the second of the transactions fail to the second of the s		ın Regulations					
section 53.4945 or in a current notice regarding disaster assistance (see ins	,		N/A	5b			
Organizations relying on a current notice regarding disaster assistance check							
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption							
expenditure responsibility for the grant?		Y L A\V	es L No				
If "Yes," attach the statement required by Regulations section 53 49	, ,						
6a Did the foundation, during the year, receive any funds, directly or indirectly,	to pay premiums on						
a personal benefit contract?		Ye	es X No				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	a personal benefit contract?		<u> </u>	6b 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		Ye	es X No				
b If "Yes," did the foundation receive any proceeds or have any net income attr				7b			
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	stees, roundation Ma	anagers, n igni	у				
1 List all officers, directors, trustees, foundation managers and the	ir compensation.						
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other			
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances			
STEVEN H. CALLER	DIRECTOR		Compensation	anonanoo			
1805 LAKEHILL CIRCLE							
LEXINGTON, KY 40502	1.00	0.	0.	0.			
SUSAN L. CALLER	DIRECTOR						
1805 LAKEHILL CIRCLE							
LEXINGTON, KY 40502	0.00	0.	0.	0.			
BRET A. CALLER	DIRECTOR						
840 EAST HIGH STREET							
LEXINGTON, KY 40502	0.00	0.	0.	0.			
JILL CALLER KAPENSTEIN	DIRECTOR						
840 EAST HIGH STREET							
LEXINGTON, KY 40502	0.00	0.	0.	0.			
2 Compensation of five highest-paid employees (other than those in	ncluded 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 compensation	(e) Expense account, other allowances			
NONE							
	_						
	_						
				-			
Total number of other employees paid over \$50,000			L	0			
Total national of ottler embioless hair over \$20,000							

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Part.VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	ghly		
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 (b) Type of	service	(c) Comp	ensation
NONE			
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		>	0
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 <u>N/A</u>			
2			
		<u>-</u>	
3			
A			
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 N/A			
2			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3			0.
Total. Add lines 1 dillough o		Form 990-P	
		1 OHH 300-	- (EUIU)

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

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

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

Amounts set aside for specific charitable projects that satisfy the:

Adjusted qualifying distributions Subtract line 5 from line 4

Suitability test (prior IRS approval required)

income. Enter 1% of Part I, line 27b

Cash distribution test (attach the required schedule)

4940(e) reduction of tax in those years.

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51,016.

236. 50,780.

2

3a

36

4

6

2

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			 !	41,135.
2 Undistributed income, if any, as of the end of 2015				41/155
a Enter amount for 2014 only			0.	
b Total for prior years;	-			
		0.		
3 Excess distributions carryover, if any, to 2015:				<u> </u>
a From 2010 13,339.				
b From 2011 9,611.				
c From 2012 4,176.				
d From 2013 973.				
e From 2014 9,068.				
f Total of lines 3a through e	37,167.			
4 Qualifying distributions for 2015 from	3,120,0			
Part XII, line 4: ► \$ 51,016.				
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	U •			41,135.
e Remaining amount distributed out of corpus	9,881.			41,133.
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	47,048.			
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				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	13,339.			
9 Excess distributions carryover to 2016				
Subtract lines 7 and 8 from line 6a	33,709.			
O Analysis of line 9:	-			
a Excess from 2011 9,611.				
b Excess from 2012 4,176.				
c Excess from 2013 973.				
d Excess from 2014 9,068.				
e Excess from 2015 9,881.				
				Form 990-PE (2015)

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Part XIV Private Operating Fo			A, question 9)	N/A	
1 a If the foundation has received a ruling or		, , ,			
foundation, and the ruling is effective for		-	▶ ∟		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3)_or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T 22.2	
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
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 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 Infor	mation (Comple	te this part only	if the foundation	n had \$5.000 or m	ore in assets
at any time during th				, , ,	
Information Regarding Foundation List any managers of the foundation who year (but only if they have contributed means).	have contributed more	than 2% of the total cont	ributions received by the	e foundation before the clo	ose of any tax
SEE STATEMENT 11	o. oa	00.1011 001 (0)(2))			
b List any managers of the foundation who other entity) of which the foundation has			or an equally large port	ion of the ownership of a p	partnership or
NONE	-				
2 Information Regarding Contribution Check here ► X if the foundation or				not accept unsolicited regi	uests for funds If
the foundation makes gifts, grants, etc. (
a The name, address, and telephone numb	er or e-mail address of t	he person to whom appli	cations should be addre	essed:	
b The form in which applications should be	submitted and informa	tion and materials they st	nould include:		
c Any submission deadlines		.			
		 			
d Any restrictions or limitations on awards,	, such as by geographica	il areas, charitable fields,	kinds of institutions, or	other factors	

THE CALLER FAMILY CHARITABLE FOUNDATION

31-1570007

Page 11

Form 990-PF (2015)

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

(a) Business code	(b) Amount	Exclusion code	(d) Amount	(e) Related or exempt function income
	Amount		Amount	function income
		14	14,800.	
				.
		18	19,100.	
		_		
				
	0	•	33,900.	
			13	33,90
		0	18	18 19,100.

Part XV	Helationship of Activities to the Accomplishment of Exempt Purposes
Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
-	

orm 990				ARITABLE FOU			570007 charitable		age 13
	Exempt Organ							_	
1 Did	the organization directly or ind	rectly engage in any of t	he followin	g with any other organizat	ion described in sec	tion 501(c) of		Yes	No
the	Code (other than section 501(o	c)(3) organizations) or in	section 52	7, relating to political orga	nizations?				
a Tra	nsfers from the reporting found	lation to a noncharitable	exempt or	ganization of:					
(1)	Cash						1a(1)		_X_
(2)	Other assets						1a(2)		X
b Oth	er transactions								
(1) Sales of assets to a noncharitable exempt organization									X
	Purchases of assets from a no		nızatıon				1b(2)		X
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements	3					1b(4)		X
	Loans or loan guarantees						1b(5)		X
	Performance of services or m						1b(6)		X
	aring of facilities, equipment, ma	-					1c		X
	ne answer to any of the above is		-	• •				sets,	
	services given by the reporting turn (d) the value of the goods,			eu iess man iair market va	ue in any transactio	n or snaring arrangent	ieiii, Silow iii		
(a) Line ni				exempt organization	(d) Description	in of transfers, transactions	s and sharing a	rangeme	ents
(u) Eine ii	(b) rundant mvoived	(b) Name of no	N/A	oxompt organization	(a) Bescription	TO TRANSPORT	a, and anamy a	rangeme	
			14 / 12						
						_			
								•	
						 			
2a Ist	he foundation directly or indirec	ctly affiliated with, or relat	ted to, one	or more tax-exempt organ	iizations described				_
	ection 501(c) of the Code (othe) or in sect	ion 527?			Yes	LX	No No
b If "\	es," complete the following sch			/h) Time of accompany	 	(-) December of vole			
	(a) Name of or	ganization		(b) Type of organization	-	(c) Description of rela	HIONSHIP		
	N/A								
									
		·							
	Under penalties of perjury, I declare	that I have examined this ret	urn, includin	l	d statements, and to the	e best of my knowledge	14 11 100		
Sign	and belief, it is true, correct, and co	mplete Declaration of prepar	er (other that	n taxpayer) is based on all infor	mation of which prepare	er has any knowledge	May the IRS return with the	e prepa	rer
Here) twin	H Celler		18/2/16	DIREC	TOR	shown below		No
	Signature of officer or truste	e e	·	Date	Title				
-	Print/Type preparer's n	ame Pr	eparer's s	ignature	Date	Check If F	PTIN		
				. >	_ / ,	self- employed			
Paid	MICHAEL T.	SHEPHERD 7	MQ	0	2/29/14		P00162		<u> </u>
Prepa Use (arer Firm's name ► DEA	N DORTON A	LLEN	FORD, PLLC		Firm's EIN ► 27			

Phone no. (859)255-2341
Form **990-PF** (2015)

Firm's address ► 106 W. VINE STREET, LEXINGTON, KY 40507

SUITE 600

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

2015

Name of the organization

Employer identification number

T	HE CALLER FAMILY CHARITABLE FOUNDATION	31-1570007						
Organization type (check of								
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	X 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								
	in filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor's							
Special Rules								
sections 509(a)(1) any one contributo	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							
year, total contribu	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.								
but it must answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo t 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)

Name of organization

Employer identification number

THE CALLER FAMILY CHARITABLE FOUNDATION

31-1570007

Part I	Contributors (see instructions) Use duplicate copies of Part I if additiona	l space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRET A. CALLER 840 EAST HIGH STREET LEXINGTON, KY 40502	\$ <u>75,251.</u>	Person X 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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

THE CALLER FAMILY CHARITABLE FOUNDATION

31-1570007

Part II	Noncash Property (see instructions) Use duplicate copies of F	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.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	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) (

Schedule B (Form 990, 990 EZ, or 990 PF) (2015) Page 4 Name of organization Employer identification number THE CALLER FAMILY CHARITABLE FOUNDATION 31-1570007 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations. Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) 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) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part l (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

		d describe the kind(s) of property solo rick warehouse, or common stock, 20		(b) How a P - Pur D - Doi	acquired chase nation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr.)
1a	TD AMERITRADE-	MAIN ACCOUNT LON	G TERM		P	VARIOUS	12/31/15
b		ZOLONDEK ACCOUNT					12/31/15
С	DEUTSCHE BANK						12/31/15
			ITAL GAIN DISTRIB				12/31/15
			CAPITAL GAIN DIST				12/31/15
_ _			CAPITAL GAIN DIS				12/31/15
a		CAPITAL GAIN DIS					12/31/15
h h		CHI I I I I I I I I I I I I I I I I I I	11(10110110	-	<u>-</u>	VIIICIOD	12/31/13
<u> </u>							
 k				·			
<u>``</u>							
m		· · · · · · · · · · · · · · · · · · ·					
n				_	-		
0							
0	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			Gain or (loss) lus (f) minus (g)	
2	15,532.	(15,932.		(3) P	(9)	<400.>
a b	4,000.		4,200.				<200.>
	64,200.		55,187.			 .	9,013.
c d	5,464.		33,107.			 .	5,464.
e e	541.						541.
f f	4,612.						4,612.
g	70.						70.
y h	70.						70.
<u>''</u>				<u> </u>			
+							
k							
ì							
m							
n							
0							
_	Complete only for assets showing	ng gain in column (h) and owned by t	he foundation on 12/31/69		(I) Los	ses (from col (h))	
	(1) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess o	f col. (h) gain over ot less than "-0-")	col. (k),
a							<400.>
b						_	<200.>
С							9,013.
d							5,464.
е							541.
f							4,612.
g							70.
h	· · · · · · · · · · · · · · · · · · ·						
ı							
<u> </u>							· · · · · · · · · · · · · · · · · · ·
k							
1							
m							
n							
0		<u> </u>		1			
2	Capital gain net income or (net ca	apıtal loss) { If gain, also enter If (loss), enter "-0	ın Part I, line 7 -" ın Part I, line 7	2			19,100.
	If gain, also enter in Part I, line 8,		d (6):				
	If (loss), enter "-0-" in Part I, line t	8	J	3		N/A	

FORM 990-PF DIVIDENT	DS AND INTER	EST FROM SECUE	RITIES ST	PATEMENT 1
GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS & 14,800	0.	0. 14,800.	14,800.	
TO PART I, LINE 4 14,800	0.	0. 14,800.	14,800.	
FORM 990-PF	ACCOUNTI	NG FEES	SI	CATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	4,600.	2,300.		2,300.
TO FORM 990-PF, PG 1, LN 16B	4,600.	2,300.		2,300.
FORM 990-PF (OTHER PROFES	SIONAL FEES	ST	PATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	7,890.	7,890.		0.
TO FORM 990-PF, PG 1, LN 16C	7,890.	7,890.		0.
FORM 990-PF	TAX	ES	sı	ATEMENT 4
FORM 330-FF				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE

FORM 990-PF	OTHER E	XPENSES	S'	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	1,251.	0.		1,251.
TO FORM 990-PF, PG 1, LN 23	1,251.	0.		1,251.
	FOOTN	OTES	G	TATEMENT 6

FORM 990-PF U.S. AND STATE	E/CITY GOVERNMENT	OBLIGATIONS	STATEMENT 7
DESCRIPTION	U.S. OTHER GOV'T GOV'T	BOOK VALUE	FAIR MARKET VALUE
UST BONDS - DEUTSCHE BANK		74,918.	74,735.
TOTAL U.S. GOVERNMENT OBLIGATIONS	5	74,918.	74,735.
TOTAL STATE AND MUNICIPAL GOVERNM	MENT OBLIGATIONS		
TOTAL TO FORM 990-PF, PART II, LI	INE 10A	74,918.	74,735.
FORM 990-PF C	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
VARIOUS STOCKS - DEUTSCHE BANK AC	CCOUNT	213,243.	300,357.
TOTAL TO FORM 990-PF, PART II, LI	INE 10B	213,243.	300,357.
FORM 990-PF C	CORPORATE BONDS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS - DEUTSCHE BANK		25,871.	25,902.
TOTAL TO FORM 990-PF, PART II, LI	INE 10C	25,871.	25,902.
FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION MUTUAL FUNDS - ZOLONDEK ACCOUNT MUTUAL FUNDS - MAIN ACCOUNT MUTUAL FUNDS - PESKOFF ACCOUNT MUTUAL FUNDS - DEUTSCHE ACCOUNT			

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS

STATEMENT 11

NAME OF MANAGER

STEVEN H. CALLER SUSAN L. CALLER

Caller Family Charitable Foundation, Inc. 2015 Summary of Donations

Check Number	Check Date	Payee	Amount
11316	6/22/2015	AJC	\$ 250.00
11317	6/22/2015	AMERICAN FRIENDS OF MAGEN DAVID ADOM	\$ 250.00
11267	9/22/2015	AMERICAN ORT	\$ 1,000.00
11327	6/22/2015	AMERICAN RED CROSS	\$ 250.00
11315	6/22/2015	ANTI DEFAMATION LEAGUE	\$ 250.00
11318	6/22/2015	BABY HEALTH SERVICE, INC	\$ 100.00
11311	5/4/2015	BAIS YAAKOV SCHOOL FOR GIRLS	\$ 1,800 00
11319	6/22/2015	BOY SCOUTS OF AMERICA	\$ 250 00
11268	12/9/2015	CHABAD OF KENTUCKY	\$ 5,000 00
11320	6/22/2015	CHILD DEVELOPMENT CENTER	\$ 100.00
11265	6/22/2015	ETTA ISRAEL CENTER	\$ 1,000 00
11331	9/22/2015	HADASSAH-LEXINGTON CHAPTER	\$ 3,600.00
11321	6/22/2015	HIAS	\$ 250.00
11322	6/22/2015	HILLEL AT THE UNIV OF FLORIDA	\$ 1,800.00
11332	9/22/2015	HOPE CENTER - NIGHT OF HOPE	\$ 2,500.00
11323	6/22/2015	JAFCO CHILDREN'S VILLAGE MEMBERSHIP	\$ 100.00
11324	6/22/2015	JUNIOR ACHIEVEMENT OF THE BLUEGRASS	\$ 1,000.00
11312	5/4/2015	KOSHER INFORMATION BOARD	\$ 5,000.00
11325	6/22/2015	KY HISTORICAL SOC FOUNDATION	\$ 100.00
11326	6/22/2015	LEXINGTON HEARING & SPEECH	\$ 100.00
11313	5/4/2015	MESIVTA BIRKAS YITZCHOK	\$ 1,800.00
11333	9/22/2015	NATIONAL JEWISH OUTREACH PROGRAM	\$ 1,000.00
11314	5/4/2015	OHR ELIYAHU ACADEMY	\$ 10,000 00
11334	9/24/2015	UNITED WAY	\$ 8,700.00
11264	5/7/2015	UNIVERSITY OF KENTUCKY (HOLOCAUST)	\$ 1,250.00

\$ 47,450.00

AS OF DECEMBER 31, 2015

INTIL MANAGEMENT

REALIZED GAINS/LOSSES

CALLER CHARITABLE FAMILY (908638550)

From December 31, 2014 to Dece, (zee, 31, 2015

OPEN	CLOSE	December	CHARA		COST	NET	SHORTTERM	LONG TERM	TOTAL
Mare	Date	DESCRIPTION	STREBUL	QUANTITY	BASIS	PROCEEDS	GAIN/LOSS	CALIN/LOSS	GAIN/LOSS
REALI	CED Gei	Realized Gains/Losses							
1/7/2014	8/3/2015	MANAGERS AMG SKYLINE SPECIAL E QUITIES FUND	SKSEX	62	\$2,462	\$2,500		\$38	\$38
6/17/2013	5/4/2015	LORD ABBETT SHORT DURATION LALDX INC	' LALDX	2,922	\$13,470	\$13,032		-\$438	-\$438
		Total Realized Gain/Loss			\$15,932	\$15,532		-\$400	-\$400

AS OF DECEMBER 31, 2015

INTI MANAGEMENT

REALIZED GAINS/LOSSES

Caller Charitable Family (908638560, Zolondey)

From December 31, 2014 to December 31, 2015

OPEN CLOSE								
	Description	Symbol	QUANTITY	COST BASIS	NET PROCEEDS	SHORT TERM GAIN/LOSS	LONG TERM GAIN/LOSS	TOTAL GAIN/LOSS
Realized Gains/Losses	ws/Losses							
6/17/2013 9/23/2015	LORD ABBETT SHORT DURATION LALDX INC	V LALDX	911	\$4,200	\$4,000		-\$200	-\$200
	Total Realized Gain/Loss			\$4,200	\$4,000		-\$200	-\$200