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Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

 \blacktriangleright Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

	For	calen	dar year 2015 or tax year beginning	, 2	015, and	ending		, 20
			undation				er identification number	
t 6	HE	LPING	FILIND				35 1872573	
201			d street (or P.O. box number if mail is not delivered to street address)	R	oom/suite	B Telephor	ne number (see instruct	ions)
2		вох з					317 873 2311	
-			n, state or province, country, and ZIP or foreign postal code			C If evenor	tion application is pend	
_			·			U II EXEMP	поп арриодион в репа	ing, Great here
₹ .			LE, IN 46077 call that apply: Initial return Initial return	n of a former pu	nlic charit	V D 1 Former	n organizations, check	here 🔈
-	•	Officer	Final return Amended	•	J.1.0 011@11	-	_	_
ANN DATE			☐ Address change ☐ Name cha			1 -	n organizations meeting	· —
5	<u></u>	Chack	type of organization: Section 501(c)(3) exempt p		nn .		here and attach computed foundation status was	
S			on 4947(a)(1) nonexempt charitable trust			section 5	07(b)(1)(A), check here	▶□
			narket value of all assets at J Accounting method			4		
			f year (from Part II, col. (c),	. • Casii L	Accidal		ndation is in a 60-mont ction 507(b)(1)(B), chec	
		line 16		on coch bosic)		4.125.50		
				Torr casir basis.)			1	(d) Disbursements
			Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(0) 14	et investment	(c) Adjusted net	for charitable
			the amounts in column (a) (see instructions))	books	ŀ	income	i income	purposes (cash basis only)
		4		2000	00 (1 Walt	18 di 38 .	Land to the second	THE DESTRUCTION OF S
			Contributions, gifts, grants, etc., received (attach schedule) Check ▶ ☐ if the foundation is not required to attach Sch. B	2000	100 · 14.19 · 100 · 14.19 · 100 · 14.19 · 14.19 · 14.19 · 14.19 · 14.19 · 14.19	2000 2000 2000 Company		CHI WEEL TO SECTION
		2		· PETITION CONTRACTOR		4分 · 这一"决定	15 15 15 15 15 15 15 15 15 15 15 15 15 1	A PROPERTY OF A
		3	Interest on savings and temporary cash investments		36	36	 	Call Anna Par
9		4	Dividends and interest from securities	140		14036		
2		5a	Gross rents	W. No. 25 1.25 12 18 15 15	111 - 45 95 185 185 185 185 185 185 185 185 185 18	273	238	1754 1 1 188 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
S		b	Net rental income or (loss)	· 1000 1000 1000 1000 1000 1000 1000 10			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	A SHAPPAN GA
S 5	Revenue	6a	Net gain or (loss) from sale of assets not on line 10	1697	94 <u>Sin. 35</u>	Contract of the same	The second of the second	では、「大学など」では、「大学など」 を対しては、またいできません。
	Jen	_b	Gross sales price for all assets on line 6a	是是成为"难"。	TO THE STATE OF TH	y 体。以及4位是一个特	\$44 (3.73) 4 35 148 44 5 7 4	ALL SECTION AND COME
¥	}e∖	7	Capital gain net income (from Part IV, line 2)	SECTION AND A	Figure 15 July	102834	学的などの機能でいる	
_	-	8	Net short-term capital gain	of the state of the	A STATE OF THE STA			The state of the state of
닒		9	Income modifications	The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The same of the same of	20, 100 mg 195	在水水水流
SCANNED		10a	Gross sales less returns and allowances	5 9/3-74 CAL 52"	ేన్ స్ప్రేష్ట్ చెప్పిన చేసి	THE TRANSPORT	4,28 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Z		b	Less: Cost of goods sold	San San San San San San	4 4 C	Salver Land - British 5		2. 不要表现在一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
Ķ		С	Gross profit or (loss) (attach schedule)		7 %7, 1 %.	7 (No. 1945)	66960	1 2 2 3 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		11	Other income (attach schedule)	782		-27576	105857	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
UB.		12	Total. Add lines 1 through 11	4626	58	89603	173055	1, 3, 1 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -
	Ş	13	Compensation of officers, directors, trustees, etc.					
	enses	14	Other employee salaries and wages	ļ				
		15	Pension plans, employee benefits	ļ				<u> </u>
	X	16a	Legal fees (attach schedule)		-			
	9	b	Accounting fees (attach schedule)					
	¥ţ.	C						
	ij	17	Interest Taxes (attach schedule) (see instructions)			0407	00005	
	ī.	18	Parreciation (attach achedule) and depletion	246	42	2407	22235	
	Έ	19	Depreciation (attach schedule) and depletion					· · · · · · · · · · · · · · · · · · ·
	Ad	20	Occupancy					<u> </u>
	ַק	21	Travel, conferences, and meetings	-	-			
	Operating and Administrative Exp	22	Printing and publications		10	4444	40570	
	ng	23 24	Total operating and administrative expenses.	270	12	14446	12573	
	ati	2.4	Add lines 13 through 23		اد	40000	04666	
	ĕ	25		516		16853	34808	44544
	ö	25	Contributions, gifts, grants paid	4137		4005-		413760
		26	Total expenses and disbursements. Add lines 24 and 25	4654	21	16853	34808	413760
		27	Subtract line 26 from line 12:					
	ł	а	Excess of revenue over expenses and disbursements	-27	63		ļ	
		b	Net investment income (if negative, enter -0-)		****	72750		\\
		С	Adjusted net income (if negative, enter -0-)				138247	l

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

Form **990-PF** (2015)



D,	art II	Relance Shoots Attached schedules and amounts in the description column	Beginning of year	End o	f year
	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	180590	448171	448171
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	بور پرور مدر او در سختین در او در است. در ۱۹۸		1,2
		Less: allowance for doubtful accounts ▶]		
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			•
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
	l	Less: allowance for doubtful accounts ▶			
ŝ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
AS	10a	Investments—U.S. and state government obligations (attach schedule)			
•	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis	J. 28. 14. 1		7 . 3 . 2 . 5 . 6
	١	Less: accumulated depreciation (attach schedule) ▶	and the second	to the control of the)
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	4007105	4706473	3747000
	14			4700473	3747000
	' "	Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) ►		and the second second	and the same
	15	Other assets (describe >		-	
	16	Total assets (to be completed by all filers—see the			<u> </u>
	10	instructions. Also, see page 1, item I)			
	17	Accounts payable and accrued expenses	5147755	5154644	4195171
	18	Grants payable			أعرفهم سانعاب أأعواث
es	l '	, •			
Liabilities	19	Deferred revenue			
چَ	20	Loans from officers, directors, trustees, and other disqualified persons			3
Ë	21 22	Mortgages and other notes payable (attach schedule)		· ·	
	—	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			
	23				
တ္သ		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.		,	, , , ,
ances					1
	24	Unrestricted			
Ва	25	Temporarily restricted			
פ	26	Permanently restricted			,
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here ▶ □			-
ř		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	25185282	25385282	
ě	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
155	29	Retained earnings, accumulated income, endowment, or other funds	-20037527	-20230638	,
ĭ,	30	Total net assets or fund balances (see instructions)	5147755	5154644	
ž	31	Total liabilities and net assets/fund balances (see	1		
		instructions)	5147755	5154644	
	rt III	Analysis of Changes in Net Assets or Fund Balances	() !! 22 /	1 '7	·····
1		net assets or fund balances at beginning of year-Part II, colur			
		of-year figure reported on prior year's return)			5147755
		r amount from Part I, line 27a			-2763
		r increases not included in line 2 (itemize) ► DPAC \$1020, SEC 120	02 \$8633	3	9653
4		lines 1, 2, and 3		4	5154645
5	Decr	eases not included in line 2 (itemize) ROUNDING		5	1
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lir	ne 30 6	5154644
					5 000 DE 0045

Part	V Capital Gains and	d Losses for Tax on Investme	ent Income			
	(a) List and describe to 2-story brick warehou	ne kind(s) of property sold (e.g., real estate, use; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acqui	1 , 2
_1a	From K-1 #36 4369010lor	ng term capital gain				
b	From K-1 #36 4369010Se	c 1231				
<u> </u>	From K-1 #36 4369010qu	alified small business exclusion pe	Sec 1202			
d	Litigation recovery					
<u>e</u>				L		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		(h) Gain or (loss)) plus (f) minus (g)
а						111450
b						66960
<u>C</u>						-8633
d						17
е	Complete only for coasts abo	when sain in calumn (b) and accord by		10/01/00		
	Complete only for assets sno	owing gain in column (h) and owned by				ns (Col. (h) gain minus but not less than -0-) or
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) (j), if any		sses (from col. (h))
<u>a</u>						
b						
<u> </u>						
d						
ее		/ If gain a	no ontor in Do	rt Lling 7		
2	Capital gain net income o		so enter in Pa enter -0- in Par		2	169794
3	If gain, also enter in Part	n or (loss) as defined in sections 1 I, line 8, column (c) (see instruct	ons). If (loss)			
Part		er Section 4940(e) for Reduc		ot Invoctment	3 Income	
		vate foundations subject to the se				
Was t	s," the foundation does not	section 4942 tax on the distributa qualify under section 4940(e). Do	not complete	this part.	·	☐ Yes ☐ No
1		ount in each column for each year	; see the instru	ictions before ma	iking any ent	
Cale	(a) Base penod years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) noncharitable-use as	sets (co	(d) Distribution ratio ol. (b) divided by col (c))
	2014	650	977	385	6275	16.88%
	2013	450	829	321	2987	14.03%
	2012	1107	741	175	4998	63.12%
	2011	367	103	235	5033	15.59%
	2010	475	011	259	7477	18.29%
2	Total of line 1, column (d)				. 2	127.91%
3		for the 5-year base period—divide				
	number of years the found	lation has been in existence if les	s than 5 years		. 3	25.58%
4	Enter the net value of none	charitable-use assets for 2015 fro	m Part X, line	5	. 4	4130105
5	Multiply line 4 by line 3				. 5	1056481
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				727
7	Add lines 5 and 6				. 7	1057208
8		ns from Part XII, line 4 ter than line 7, check the box in F			. 8	413760 g a 1% tax rate. See the
	Part VI instructions.	· · · · · · · · · · · · · · · · ·		, and complete th		3 = 775 tax (ato) 000 the

Part		instruction	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		
L	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check	445	<u>.</u>
р	here \blacktriangleright and enter 1% of Part I, line 27b	145	}
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	ı	o
3	Add lines 1 and 2	145	5
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	145	5
6	Credits/Payments:	***	1 15
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 2984		
b	Exempt foreign organizations—tax withheld at source 6b 0		- ^
C	Tax paid with application for extension of time to file (Form 8868) . 6c 0 Backup withholding erroneously withheld		1
d			· · ·
7 8	Total credits and payments. Add lines 6a through 6d	298	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<u></u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10	152	`
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 1529 00 Refunded ▶ 11		0
Part	VII-A Statements Regarding Activities		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	∜∴ Yes	No
	participate or intervene in any political campaign?	1a	√
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b	1
	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?	1c	1
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ N/A (2) On foundation managers. ▶ \$ N/A		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	3. " [
	on foundation managers. ► \$ N/A		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	√
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	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a ✓	† -
b	If "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	✓
	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?		1
-		6 1	┿
7 8a	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 Enter the states to which the foundation reports or with which it is registered (see instructions)		
Ua	INDIANA		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b 🗸	
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	9	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	-	+
	names and addresses	10 1	

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within to		Yes	No
12	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		ļ	✓
12	person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	n? 13	✓	J
14	Website address ► N/A The books are in care of ► ROLLIN M. DICK, TRUSTEE Telephone no. ►	317 873	2211	
	Located at ▶ PO BOX 334, ZIONSVILLE, IN 46077	46077-		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	ار د ر	J ·	▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	Nr	1	N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authorized bank, securities, or other financial account in a foreign country?	· · · · · · · · · · · · · · · · · · ·	Yes	l .
	See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the name		٠	
	the foreign country ► _{N/A}			, C.
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	12. 7	Yes	No
1a	During the year did the foundation (either directly or indirectly):	1,0	12.	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Yo اُزُرُّ		3 11
	disqualified person?		1	·涂
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 120	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 250
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	ارین	1	2 E. C.
	the benefit or use of a disqualified person)?	۱۰ ا	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1c		
	foundation agreed to make a grant to or to employ the official for a period after	,	18 m	2 () 2 () 2
	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 Regulation section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	7 ~	£ . 8	2.54
	Organizations relying on a current notice regarding disaster assistance check here]	37	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the were not corrected before the first day of the tax year beginning in 2015?	1c	٠,	1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a prival operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	te -	,	She She
а	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?	No		*
	If "Yes," list the years ▶ 20, 20, 20, 20		ļ	1
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	all years listed, answer "No" and attach statement—see instructions.)	2b	ļ	<u> </u>
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20, 20, 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	No		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation	or		1
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the second seco		-	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse			
	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.)			,
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	3b 3 4a	 	1
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize		†	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 201			1

Page	6

Pari	VII-B Statements Regarding Activities	s for W	hich Form	4720	May Be R	equire	d (conti	nued)			
5a	 Ouring the year did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt t (2) Influence the outcome of any specific public directly or indirectly, any voter registration or 	to influe c election	nce legislation on (see secti		55); or to ca		☐ Yes	✓ No	, -	n le trans	
	(3) Provide a grant to an individual for travel, stu(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions)	n a cha		organiz	ation desc	ribed in	☐ Yes	✓ No ✓ No	\$	7,73	
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to compare the compared to the com	children	or animals?				∐Yes	☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice	regardii	ng disaster as	ssistand	ce (see instr			ribed in	5b		قى , *
С	Organizations relying on a current notice regardiff the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	the four	ndation claim grant?	exem	ption from		□ Yes	No	2 1 2 1 1 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1		
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract?	funds,	directly or in	directly	, to pay pre	emiums 	∏Yes	▼ No	4		7.
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.					benefit		_	6b	EFT-	√
	At any time during the tax year, was the foundation of "Yes," did the foundation receive any proceeds						☐ Yes ansactio		2 40		. 1 ° k
Part	VIII Information About Officers, Direction and Contractors List all officers, directors, trustees, foundation	-	·				-		mploy	ees,	
	List all Officers, directors, dustees, roundation		, and average		mpensation		Contribution		(-) C		
POLL II	(a) Name and address	hour devote	rs per week ed to position	(If r	not paid, nter -0-)	emplo	yee benefit erred compe	plans		nse acco allowanc	
		1	EE/ HOURS QUIRED		0		-, <u>-</u>	0			0
CHERY	/L J. DICK	Ì									
			EE/ HOURS		0			0			0
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se incl	uded on li	ne 1	see instr	uction	s). If no	one, e	nter
	a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	reek -	(c) Comper		(d) Contribution employee plans and compens	benefit deferred		nse acco allowanc	
	NONE										
			_								
Total	number of other employees paid over \$50,000 .			•					Form 99	0-PF (2015)

Dago	•
raue	

Total number of others receiving over \$50,000 for professional services	• 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	e number of Expanses
organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	
Detail V. D. Common of December Deleted Investments (see instructions)	
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign founda	itions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1.4 T	
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	84400
C	Fair market value of all other assets (see instructions)	1c	4108600
d	Total (add lines 1a, b, and c)	1d	4193000
е	Reduction claimed for blockage or other factors reported on lines 1a and	1/2	
	1c (attach detailed explanation)	ļ' '	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	4193000
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	62895
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4130105
6	Minimum investment return. Enter 5% of line 5	6	206505
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► and do not complete this part.)	oundation	S
1	Minimum investment return from Part X, line 6	1	206505
2 a	Tax on investment income for 2015 from Part VI, line 5 2a 1455	[η-15 <i>Π</i> 15	· · ·
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b 0	7. 1	
С	Add lines 2a and 2b	2c	1455
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	205050
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	205050
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	205050
Part		• •	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	413760
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		<u>~</u>
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:	-	<u>×</u>
а	Suitability test (prior IRS approval required)	3a	o
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	413760
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		713700
-	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	413760
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	9 **********	iodiidalion

- EIT	Undistributed income (see inst	tructio	oris)	r	1	r
1	Distributable amount for 2015 from Part	t XI,	(a) Corpus	(b) Years pnor to 2014	(c) 2014	(d) 2015
	line 7	•	***		A STATE OF S	205050
2	Undistributed income, if any, as of the end of 20	1015:	-49. J. G. 17.3	The state of the s	m t t v v	
а	Enter amount for 2014 only	•		1 200	00	7
b	Total for prior years: 20,20,20			0	مَنْ أَنْ مُنْ مُنْ مُنْ مُنْ مُنْ مُنْ مُنْ مُ	Bridge Frankling Co
3	Excess distributions carryover, if any, to 20	015:	region to the time.	Land Control of	The state of	
а	From 2010	45137	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
b	From 2011 24	49351				
C	From 2012 102	20441	高的100 PC		A CHARLES	
d	From 2013 29	94046			(1) (1) (1) (1)	,
e		61147	and the state of t		12.5	
f	Total of lines 3a through e		2370122		(p)"- , (\$P\$)	
4	Qualifying distributions for 2015 from Part		2070122	132	4 , 4	
-	line 4: ▶ \$ 413760	,			\$ - 365 A	
а	Applied to 2014, but not more than line 2a		- (3) . (3			TO SA . 18 2 2 5
b	Applied to undistributed income of prior ye		2, 2, 4, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	w 1 3 - 1 2 2	U	
U	(Election required—see instructions)	cais		_	Name of the second	
_	•			<u> </u>	45 4 2 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	reacon show find the se
С	Treated as distributions out of corpus (Elec required—see instructions)	TION		Like the first of the control of the		
		•	0	1 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
d	Applied to 2015 distributable amount .			2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3	205050
е	Remaining amount distributed out of corpu		208710	E A CONTRACT		· 1000 (1000) (1000)
5	Excess distributions carryover applied to 20		0		Bern College Col	
	(If an amount appears in column (d), the sa	ame			· " " " " " " " " " " " " " " " " " " "	Note that the same
	amount must be shown in column (a).)					法 公务的信息
6	Enter the net total of each column	as				
	indicated below:			A. A	本学 李子供 · ·	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract lin	ne 5	2578832			
b	Prior years' undistributed income. Subt				54 1 18 17 18	18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	line 4b from line 2b			o	[图1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	
С	Enter the amount of prior years' undistribu	uted				
·	income for which a notice of deficiency		, a 35			
	been issued, or on which the section 494		A			
	tax has been previously assessed	(4)		0	Company of a	
d	Subtract line 6c from line 6b. Taxa	ahle		<u> </u>	*****	N
u	amount—see instructions	abie			Sale - Section	10 m
_				0	3 ''	· · · · · · · · · · · · · · · · · · ·
e	Undistributed income for 2014. Subtract 4a from line 2a. Taxable amount—		-	•		*
	instructions	- 266	• -	,	_	,
_		.		Language and the second	0	
t	Undistributed income for 2015. Subtract li			•	-	
	4d and 5 from line 1. This amount must	t be	ī	• •		
	distributed in 2016			,		0
7	Amounts treated as distributions out of cor	• 1				-
	to satisfy requirements imposed by sec					
	170(b)(1)(F) or 4942(g)(3) (Election may				******** 4	7
	required—see instructions)		0			
8	Excess distributions carryover from 2010					
	applied on line 5 or line 7 (see instructions)	L	345137			
9	Excess distributions carryover to 20	016.				
	Subtract lines 7 and 8 from line 6a	.	2233695			
10	Analysis of line 9:				-	
a	•	49351				
b		20441				
C		94046				
d		61147				
u A		08710				
₹		VO / IV				

10	Page

	XIV Private Operating Founda	tione (coo instru	ctions and Part	VII-A guestion 9	 	
					<u> </u>	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for					PLICABLE
b	Check box to indicate whether the four		operating foundat		ction 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(0) 1042
	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					
е	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:					
а	"Assets" alternative test - enter:					}
_	(1) Value of all assets					
	(2) Value of assets qualifying under			-		
	section 4942(j)(3)(B)(j)					
b	"Endowment" alternative test-enter 2/3		······································			
	of minimum investment return shown in					
_	Part X, line 6 for each year listed "Support" alternative test—enter:					
С	• •			j		
	(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	(0	!	<u> </u>	- d &E 000	
Part				ne roundation na	ad \$5,000 or m	ore in assets at
	any time during the year-		lS.)			
1	Information Regarding Foundation			/ -£4b- 4-4-14	اممانام مساعد ما	h. the ferredation
а	List any managers of the foundation value before the close of any tax year (but of					by the loundation
	EES HAVE CONTRIBUTED SUBSTANTIAL List any managers of the foundation					rae portion of the
U	ownership of a partnership or other er					arge portion of the
	Ownership of a partiership of other cr	idity) of Willon the	iodiloddioii iido d	1070 of grouter line		
NONE	Information Regarding Contribution	Grant Gift Las	n Scholarchia e	to Programe:		
2	Check here ▶ ☐ if the foundation		_	-	roopizations and	I door not accort
	unsolicited requests for funds. If the f					
	other conditions, complete items 2a, b		giris, granis, etc.	(See instructions) to	S Individuals of O	rgamzations under
a	The name, address, and telephone nu		dress of the perso	on to whom applica	ations should be:	addressed:
u	The fighte, address, and telephone ha	mber or e man ad	arese or the perso	on to whom applied		200,00000
POLL I	N M. DICK, PO BOX 334, ZIONSVILLE, IN	46077ROLLIF D	ICK@STERLINGLI	FFCO.COM		
	The form in which applications should				uld include:	·
	••			•		
WRITT						
C	Any submission deadlines:					
NONE						
d	Any restrictions or limitations on aw	ards, such as by	/ geographical ar	reas, charitable fie	lds, kinds of ins	stitutions, or other
	factors:					
LIMITE	D TO INDIANAPOLIS AREA			······································		

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment					
<u> </u>		If recipient is an individual			
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		·
а	Paid during the year				
CHE	DULE				
	Total			▶ 3a	413760
b	Approved for future payment				710700
		l '			
					!
		i			
		·····		<u></u>	
	Total			▶ 3h	<i>(F</i>)

Pa	rt X	VI-A Analysis of Income-Producing Ac	tivities				
		oss amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1		gram service revenue:	<u></u>				200000
	a	CONTRIBUTIONS RECEIVED					200000
	b						
	C d		<u></u>				
	e						
	f						
	-	Fees and contracts from government agencies					
_	_	mbership dues and assessments					
2 3		erest on savings and temporary cash investments			14	36	
4		idends and interest from securities			14	14036	
5	-	rental income or (loss) from real estate:	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -				THE THERMALE
Ŭ		Debt-financed property	3 3/10-2 5.5	<u> </u>			**************************************
		Not debt-financed property	525990	238	16	273	
6		rental income or (loss) from personal property					ï
7		ner investment income	525990	105857	14	-27576	
8		n or (loss) from sales of assets other than inventory	525990	66960	18	102834	
9		income or (loss) from special events					
10		oss profit or (loss) from sales of inventory					
11		er revenue: a					
	b						
	C						
	d						
	e						1
						· - · · · · · · · · · · · · · · · · · ·	
12		ototal. Add columns (b), (d), and (e)	1 2 2 2 2 3 3	173055	State of the state	89603	200000
13	Sul To	al. Add line 12, columns (b), (d), and (e)		173055		89603 13	200000 462658
13 (See	Sul To	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation	 ns.)				
13 (See Pa	Sul To wo	al. Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	462658
13 (See Pa	Sul To	tal. Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	462658
13 (See Pa	Sul To Wor t X	al. Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	462658
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Form **990-PF** (2015)

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Part XV	Ш	Information Exempt Or			nsiers i c	and Ira	nsacuo	ns and i	reiationsni	ips wi	tn Noncha	iritabi	е	
in :	sec	e organization of tion 501(c) of the	directly	or indirectly								1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Yes	No
-	organizations?								3.1	1 . E	34 T 95 N			
		fers from the rep	_				empt org	anization	of:			الميلة المعاد	8, 7, ".!.	15
		ısh								<i>.</i>		1a(1)		1
• •		her assets .										1a(2)	w	V
		transactions:										15. Desc.		
		les of assets to										1b(1)		/
		rchases of asse										1b(2)		1
		ental of facilities										1b(3)		✓
		eimbursement a	_									1b(4)		<u> </u>
		ans or loan gua										1b(5)		✓
		erformance of se			-	-						1b(6)		✓
		ng of facilities, e		_			-	•	0-1			1c	<u> </u>	<u> </u>
		answer to any												
		of the goods, o												
(a) Line no.) Amount involved) Name of nonc					ption of transfe					
(a) Line no.	· (C) Amount involved			alantable exer	mpt organizat	POLI	(a) Desci	ipuon or transie	rs, transi	acuons, and sn	aring arr	angeme	erius .
	+		NOT A	PPLICABLE			-							
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des	scri	foundation dire bed in section 5 s," complete the	01(c) of	f the Code (d	other than					ot orga] Yes	Ø	No
*		(a) Name of organi				b) Type of org	ganization			(c) Desc	ription of relation	nship		
NOT APPL	ICA	BLE												
110011111					 	•	*							
														
	-					· · · · · · · · · · · · · · · · · · ·								
				$\overline{\Delta}$					·					
	•	penalties of perjury, I	declare /X	at I nave examin	ed this return,	including acco	mpanying s	chedules and	statements, and	to the be	st of my knowle	dge and l	oelief, rt	is true,
Sign Here	OF BC	g zgar complete. Deciz	aration of p	oreparer (other th	nan taxpayer) is based on all information of which preparer has ar		arer has any knov	as any knowledge. May the li						
1/7	igna	defe of difficer orticus	// X			Date	Title				(see instru	ictions)?	_Yes[⊒No
	_	Print/Type preparer		(Preparer's	signature			Date	Τ.	, n	PTIN		
Paid				`					1		Check if self-employed			
Prepare		Firm's name			_				<u> </u>	Firm's E				
Use Onl	עי	Firm's address ▶				-				Phone r				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Employer identification number

OMB No 1545-0047

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

HELPIN	G FUND			35 1872573			
Organization type (check one):							
Filers o	of:	Section:					
Form 9	90 or 990-EZ	☐ 501(c)() (enter number) organization				
		4947(a)(1) no	nexempt charitable trust not treated as a private for	undation			
		527 political	organization				
Form 9	90-PF	√ 501(c)(3) exer	mpt private foundation				
		4947(a)(1) no	nexempt charitable trust treated as a private founda	ation			
		501(c)(3) taxa	able private foundation				
Note. Construction	ions.	7), (8), or (10) organ	ization can check boxes for both the General Rule	and a Special Rule. See			
√	For an organization	or property) from an	90-EZ, or 990-PF that received, during the year, con my one contributor. Complete Parts I and II. See inst				
Special	Rules						
	regulations under so	ections 509(a)(1) and that received from	on 501(c)(3) filing Form 990 or 990-EZ that met the 3 nd 170(b)(1)(A)(vi), that checked Schedule A (Form 9 n any one contributor, during the year, total contribu Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line utions of the greater of (1)			
	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.						

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).

Schedule B	(Form 990, 990-EZ, or 990-PF) (2015)		Page
Name of	organization		Employer identification number
<u>HELPING</u>	FUND		35 1872573
Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space	is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROLLIN M. DICK, PO BOX 334, ZIONSVILLE, IN 46077-0334	\$	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

THE HELPING FUND

YEAR 2

FORM 990-PF PAGE 1 LINE 11 OTHER INCOME

K-1CENTERFIELD, ORDINARY BUSINESS INCOME K-1MONUMENT, ORDINARY BUSINESS INCOME K-1CENTERFIELD, OTHER INCOME TOTAL	(a) 105893 -27576 -36 78281	(b) -27576 -27576	© 105893 -36 105857
FORM 990-PF PAGE 1 LINE 23 K-ICENTERFIELD: Portfolio management Sec 179 Other	O T H E R 16314 1544 261	E X P E N S E 6345 261	9969 1544
K-1MONUMENT: Portfolio management Sec 179 Other	7455 0 345	7455 345	
Postage expense DPADFORM 8903	80 1020	40	40 1020
TOTAL	27019	14446	12573

FORM 990-PF PAGE 2 LINE 13 INVESTMENTS

	BEGINNING OF YEAR	END OF YEAR		
	BOOK VALUE	BOOK VALUE	FMV	
Polymer Tech	4451388	4451388	3546000	
Centerfield	479658	254225	157000	
Monument	36119	860	44000	
	TOTAL 4967165	4706473	3747000	

CC-7-HELPING 2015 TAX SCHEDULES

THE HELPING FUND YEAR 2015 FORM 990PF PARTXV LINE 3(a) CONTRIBUTIONS PAID IN 2015

The address of all donees is Indianapolis, IN unless otherwise noted.

No contributions are made to individuals or to private foundations.

No contributions are made to organizations that are related to The Helping Fund or any of its donors.

Contributions are made only to public charities, educational institutions or governmental agencies for the furtherance of their organizational mission.

NAME AND ADDRESS OF RECIPIENT AND PURPOSE OF THE CONTRIBUTION:

A. Contributions to educational institutions for the purpose of furthering their educational and building programs:

American Enterprise Inst, washington, DC	5000
Butler University	40350
International Center	2500
lvy Tech	28000
Junior Achievement	5000
- 16 A	3500
Teach for America	3500
Tindley School	1900
Wealth Creation Scholarship Fund, Bloomington, IN	1250
TOTAL EDUCATION PROGRAMS	87500

CC-7-HELPING 2015 TAX SCHEDULES

THE HELPING FUND YEAR 2015 FORM 990PF PART XV LINE 3(a) CONTRIBUTIONS PAID IN 2015

NAME AND ADDRESS OF RECIPIENT AND PURPOSE OF THE CONTRIBUTION:

В.	Contributions to arts, civic and cultural organizations for the purpose of furthering	ηg
	their arts and cultural missions and building programs:	

their arts and cultural missions and building programs.	
American Pianist Association	600
Center for the Performing Arts, Carmel IN	25000
Michael Feinstein Foundation, Carmel, IN	13000
Civic Theatre, Carmel IN	16500
Connor Prairie, Noblesville, IN	500
Eiteljorg Museum	250
Indianapolis Chamber Orchestra	600
Indiana Repetory Theatre	3700
Indianapolis Symphony Orchestra	50000
Indianapolis Public Broadcasting	30700
Indianapolis Zoo	56500
International Violin Competition	1250
memational violin competition	1250
TOTAL ARTS PROGRAMS	198600

C. Contributions to charitable organizations for the purpose of furthering their programs that promote or support health improvement::

American Diabetes Assn, Merrifield, VA	100
Mental Health Assn of Maryland, Baltimore, MD	100
Planned Parenthood	
Open Door Fund, Boulder, CO	330
St. Vincent Foundation	78200
Leukemia Society	

78730

TOTAL HEALTH PROGRAMS

CC-7-HELPING 2015 TAX SCHEDULES

THE HELPING FUND YEAR 2015 FORM 990PF PARTXV LINE 3(a) CONTRIBUTIONS PAID IN 2015

NAME AND ADDRESS OF RECIPIENT AND PURPOSE OF THE CONTRIBUTION:

D. Contributions to charitable organizations for the purpose of furthering their programs of improving communities:

ACLU	5000
Boone County Community Foundation, Lebanon, IN Green Bikes, Bloomington, IN Crossroads Easter Seals	10500 500 250
Second Presbyterian Church United Way YMCA	750 25000 5250
TOTAL COMMUNITY PROGRAMS	47250
E. Contributions less than \$251 to six charitable organizations as memorial gifts	1450
Sub total of contributions made directly by Helping Fund	413530
Deduction limited to 50% of taxable income before charitable contribution deduction, or \$78523	
F. Contributions reported on Forms K-1	230
GRAND TOTAL	413760