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Form **990-PF**

Department of the Treasury
Internal Revenue Service

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 instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation
THE MCCORMICK FAMILY FOUNDATIONINC

A Employer identification number
35-2016398

Number and street (or P O box number if mail is not delivered to street address)
2500 GRANDVIEW DR

Room/suite

B Telephone number (see instructions)

City or town, state or province, country, and ZIP or foreign postal code
VINCENNES, IN 47591

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col. (c), line 16)* ▶$ 3,441,236

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ▶ ☑ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments	6	6	6	
	4 Dividends and interest from securities	70,068	70,068	70,068	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 **Total.** Add lines 1 through 11	70,074	70,074	70,074	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,780			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,055			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications	125			
	23 Other expenses (attach schedule)	157			
	24 **Total operating and administrative expenses.** Add lines 13 through 23	4,117	0		0
	25 Contributions, gifts, grants paid	184,965			184,965
	26 **Total expenses and disbursements.** Add lines 24 and 25	189,082	0		184,965
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	-119,008			
	b **Net investment income** (if negative, enter -0-)		70,074		
	c **Adjusted net income** (if negative, enter -0-)			70,074	

Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	End of year (b) Book Value	End of year (c) Fair Market Value
Assets	1	Cash—non-interest-bearing	35,853		
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	850,383	850,383	3,441,236
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	**Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	886,236	850,383	3,441,236
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable		83,155	
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	**Total liabilities** (add lines 17 through 22)		83,155	
Net Assets or Fund Balances		**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	886,236	767,228	
	30	**Total net assets or fund balances** (see instructions)	886,236	767,228	
	31	**Total liabilities and net assets/fund balances** (see instructions)	886,236	850,383	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	886,236
2	Enter amount from Part I, line 27a	2	-119,008
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	767,228
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	767,228

Part IV Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	How acquired P—Purchase **(b)** D—Donation	Date acquired **(c)** (mo , day, yr)	Date sold **(d)** (mo , day, yr)
1a			
b			
c			
d			
e			

	(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
a				
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
	(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
a				
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	**2**	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	**3**	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	**(b)** Adjusted qualifying distributions	**(c)** Net value of noncharitable-use assets	**(d)** Distribution ratio (col (b) divided by col (c))
2014	114,575	2,910,784	0 039362
2013	118,772	2,615,350	0 045413
2012	119,100	2,264,575	0 052593
2011	81,347	1,904,583	0 042711
2010	75,568	1,827,683	0 041346

2	**Total** of line 1, column (d)	**2**	0 221425
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	**3**	0 044285
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	**4**	3,099,122
5	Multiply line 4 by line 3	**5**	137,245
6	Enter 1% of net investment income (1% of Part I, line 27b)	**6**	701
7	Add lines 5 and 6	**7**	137,946
8	Enter qualifying distributions from Part XII, line 4	**8**	184,965

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b		1	701
c	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	
3	Add lines 1 and 2		3	701
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-		5	701
6	Credits/Payments			
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a 1,360		
b	Exempt foreign organizations—tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments Add lines 6a through 6d		7	1,360
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	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶		10	659
11	Enter the amount of line 10 to be **Credited to 2015 estimated tax** ▶ 659 **Refunded** ▶		11	

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	*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		No
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 ▶ $ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
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		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
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? *If "Yes," attach the statement required by General Instruction T.*	5		No
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	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ IN			
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	Yes	
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		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10		No

Part VII-A Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ JANE WISSEL Telephone no ▶ (812) 882-4360

Located at ▶ 1665 OLD US HWY 41 SOUTH VINCENNES IN ZIP+4 ▶ 47591

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No

See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶

Part 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
1a	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? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(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)? ☐ Yes ☑ No			
	(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) ☐ Yes ☑ No			
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		
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 ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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)	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 ▶ 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? ☐ Yes ☑ No			
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, Form 4720, to determine if the foundation had excess business holdings in 2015.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(Continued)*

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes ☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?		**5b**	
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**6b**	**No**
	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?	☐ Yes ☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		**7b**	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
C JAMES MCCORMICK 2500 GRANDVIEW DR VINCENNES,IN 47591	PRESIDENT 2 00	0	0	0
CRAIG JANE WISSEL 2289 SOUTH DAYSON DRIVE VINCENNES,IN 47591	OFFICER 1 00	0	0	0
PATRICK LYNN S MCCORMICK 2812 OLD 41 SOUTH VINCENNES,IN 47591	OFFICER 1 00	0	0	0
MICHAEL D MARGARET A MCCORMICK 11905 E COUNTY ROAD 500 S ZIONSVILLE,IN 46077	OFFICER 1 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation	Contributions to employee benefit plans and deferred **(d)** compensation	Expense account, **(e)** other allowances
NONE				

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	**(b)** Type of service	**(c)** Compensation
NONE		

Total number of others receiving over $50,000 for professional services. ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

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 N/A	
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 foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	3,097,432
b	Average of monthly cash balances	1b	48,885
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	3,146,317
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,146,317
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	47,195
5	**Net value of noncharitable-use assets.**Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,099,122
6	**Minimum investment return.**Enter 5% of line 5	6	154,956

Part XI Distributable Amount
(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6			1	154,956
2a	Tax on investment income for 2015 from Part VI, line 5	2a	701		
b	Income tax for 2015 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	701
3	Distributable amount before adjustments Subtract line 2c from line 1			3	154,255
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	154,255
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	154,255

Part XII Qualifying Distributions (see instructions)

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	184,965
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.**Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	184,965
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	701
6	**Adjusted qualifying distributions.**Subtract line 5 from line 4	6	184,264

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 4940(e) reduction of tax in those years

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				154,255
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			46,402	
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2015				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f **Total** of lines 3a through e				
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ $ 184,965				
a Applied to 2014, but not more than line 2a			46,402	
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2015 distributable amount				138,563
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015				
(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				
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				15,692
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)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)				
9 **Excess distributions carryover to 2016.** Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
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 Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				184,965
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					6
4 Dividends and interest from securities					70,068
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)					70,074
13 **Total.** Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)				13	70,074

Part XVI-B Relationship 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) (See instructions)

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

		Yes	No
1	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)	No
	(2) Other assets	1a(2)	No
b	Other transactions		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	No
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	No
	(3) Rental of facilities, equipment, or other assets	1b(3)	No
	(4) Reimbursement arrangements	1b(4)	No
	(5) Loans or loan guarantees	1b(5)	No
	(6) Performance of services or membership or fundraising solicitations	1b(6)	No
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	No

d 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

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

******	2016-04-02	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☐ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
EDGAR R MCGONIGAL		2016-04-01		P00971356

Firm's name ▶ EDGAR R MCGONIGAL CPA PA

Firm's EIN ▶ 27-1877894

Firm's address ▶ 2048 SHROUD ST UNIT 103 ORLANDO, FL 328146913

Phone no (407) 927-5520

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HEART TO HEART INC 1404 NORTH 4TH STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	2,500
KNOX COUNTY COMMUNITY FOUNDATION PO BOX 273 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	200
HERITAGE CHRISTIAN SCHOOL 6401 EAST 75TH STREET INDIANAPOLIS,IN 462502799			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
VINCENNES EDUCATION FOUNDATION 1712 SOUTH QUAIL RUN ROAD VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
SCOTTISH RITE FREE MASONRY DAVID BE PO BOX 519 LEXINGTON,MA 024200529			SUPPORT PUBLIC PURPOSE OF RECIPIENT	40
RED SKELTON MUSEUM FOUNDATION 20 RED SKELTON BLVD VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	600
THE HENRY COUNTY COMMUNITY FOUNDATI 700 SOUTH MEMORIAL DRIVE NEW CASTLE,IN 47362			SUPPORT PUBLIC PURPOSE OF RECIPIENT	5,000
RED SKELTON MUSEUM FOUNDATION 20 RED SKELTON BLVD VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	2,000
VINCENNES UNIVERSITY ALUMNI COMMUNI 1002 NORTH FIRST STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,800
RED SKELTON MUSEUM FOUNDATION 20 RED SKELTON BLVD VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
SPECIAL OLYMPICS 720 WEST 4TH STREET BICKNELL,IN 47512			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
CEF 229 CHURCH STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
KEEP VINCENNES ROLLING 1078 NORTH ASPEN DRIVE VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	200
ICM 1901 NORTH ARMISTEAD AVEN HAMPTON,VA 23666			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
SRBF-SCOTTISH RITE CHARITIES PO BOX 859 LEWISTON,ME 042430859			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
Total . . . . . ▶ **3a**				184,965

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HADI SHRINERS PO BOX 1 EVANSVILLE,IN 477010001			SUPPORT PUBLIC PURPOSE OF RECIPIENT	60
VINCENNES HISTORIC FARMERS MARKET 1421 MENTOR STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	300
ASPCA PO BOX 96929 WASHINGTON,DC 200777127			SUPPORT PUBLIC PURPOSE OF RECIPIENT	25
SPCAI PO BOX 92240 WASHINGTON,DC 200902240			SUPPORT PUBLIC PURPOSE OF RECIPIENT	10
HSUS PO BOX 96930 WASHINGTON,DC 200906930			SUPPORT PUBLIC PURPOSE OF RECIPIENT	10
CEF 229 CHURCH STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
CASA 105 BROADWAY STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
MENTAL HEALTH AMERICA OF KNOX COUNT PO BOX 859 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	250
JUNIOR ACHIEVEMENT OF SOUTHWESTERN 431 EAST DIAMOND AVENUE EVANSVILLE,IN 477113713			SUPPORT PUBLIC PURPOSE OF RECIPIENT	4,000
KNOX COUNTY HUMANE SOCIETY PO BOX 64 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	10
KNOX COUNTY HUMANE SOCIETY PO BOX 64 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,500
LEAGUE OF WOMEN VOTERS OF KNOX COUN PO BOX 1366 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
LHSCMS BAND BOOSTERS BAND BOOSTER PO BOX 591 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	250
LHS ACADEMIC SOCIETY 1545 SOUTH HART STREET RO VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	500
PAN AMERICAN MISSION INC PO BOX 429 NEWBERG,OR 971320429			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
Total . . . . . ▶ **3a**				184,965

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
PAN AMERICAN MISSION INC PO BOX 429 NEWBERG,OR 971320429			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
INDIANA GOLF FOUNDATION PO BOX 516 FRANKLIN,IN 46131			SUPPORT PUBLIC PURPOSE OF RECIPIENT	30
HELPING HIS HANDS 102 EAST LYNDALE AVENUE VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,500
BOYS TOWN PO BOX 6000 BOYS TOWN,NE 680109988			SUPPORT PUBLIC PURPOSE OF RECIPIENT	250
NATIONAL AIR AND SPACE SOCIETY-SMIT PO BOX 92192 WASHINGTON,DC 200902192			SUPPORT PUBLIC PURPOSE OF RECIPIENT	35
UNITED STATES OLYMPIC COMMITTEE PO BOX 7010 ALBERT LEA,MN 560078010			SUPPORT PUBLIC PURPOSE OF RECIPIENT	20
DISABLED VETERANS NATIONAL FOUNDATI PO BOX 96648 WASHINGTON,DC 200906648			SUPPORT PUBLIC PURPOSE OF RECIPIENT	15
PARALYZED VETERANS OF AMERICA PO BOX 921 WILTON,NH 030860921			SUPPORT PUBLIC PURPOSE OF RECIPIENT	15
RILEY CHILDREN'S FOUNDATION 30 SOUTH MERIDIAN STREET INDIANAPOLIS,IN 462043509			SUPPORT PUBLIC PURPOSE OF RECIPIENT	2,000
SOUTH KNOX EDUCATION FOUNDATION 6116 EAST STATE ROAD 61 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
BUFFALO TRACE COUNCIL-BOY SCOUTS OF 3501 EAST LLOYD EXPRESSWA EVANSVILLE,IN 477158624			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
MAKE-A-WISH OF OHIO KENTUCKY & IND PO BOX 97104 WASHINGTON,DC 200907104			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
SPECIAL OLYMPICS PO BOX 44094 INDIANAPOLIS,IN 462040094			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
VU FOUNDATION 1002 NORTH FIRST STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	5,000
VU FOUNDATION 1002 NORTH FIRST STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	5,000
Total . . . . . ▶ **3a**				184,965

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
VINCENNES CITY FIRE DEPARTMENT 928 VIGO STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
VINCENNES TOWNSHIP VOLUNTEER FIRE D PO BOX 575 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
UNITED WAY OF KNOX COUNTY PO BOX 198 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	6,000
KNOX COUNTY EXTENSION HOMEMAKERS VINCENNES VINCENNES VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	200
COMMUNITY UNITED METHODIST CHURCH 1548 SOUTH HART STREET RO VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	10,000
BETTYE J MCCORMICK SENIOR CENTER 2009 PROSPECT AVENUE VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	200
LATVIAN LUTHERAN CHURCH 502 WALBRIDGE ST CARMEL,IN 46032			SUPPORT PUBLIC PURPOSE OF RECIPIENT	2,500
KNOX COUNTY COMMUNITY FOUNDATION VINCENNES VINCENNES VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	5,000
GROUSELAND FOUNDATION INC 1421 MENTOR ST VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	50
ST PETER LUTHERAN CHURCH 7000 SOUTH DECKER ROAD VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	50
GOOD SAMARITAN HOSPICE 520 S 7TH ST VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	2,000
ANGEL MINISTRIES 5115 HOLLYRIDGE DRIVE RALEIGH,NC 276123111			SUPPORT PUBLIC PURPOSE OF RECIPIENT	500
ALPHA GAMMA RHO EDUCATIONAL FOUNDAT 10101 N AMBASSADOR DR KASAS CITY,MO 641531366			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
CHILDREN & FAMILY SERVICES CORP 105 BROADWAY STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,500
DECKER HIGH SCHOOL ALUMNI - CO RON 1442 EAST BLOEBAUM ROAD DECKER,IN 47524			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
Total . . . . . ▶ **3a**				184,965

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BPO ELKS NO 291 VINCENNES VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
SISTERS OF ST BENEDICT 802 EAST 10TH STREET FERDINAND,IN 475329239			SUPPORT PUBLIC PURPOSE OF RECIPIENT	5,000
INDIANA MASONIC HOME FOUNDATION IN PO BOX 44210 INDIANAPOLIS,IN 462094489			SUPPORT PUBLIC PURPOSE OF RECIPIENT	500
RADIANT CHRISTIAN LIFE - KHMM 16162 CAREY ROAD WESTFIELD,IN 46074			SUPPORT PUBLIC PURPOSE OF RECIPIENT	500
KIWANIS INTERNATIONAL FOUNDATION 3636 WOODVIEW TRACE INDIANAPOLIS,IN 462683196			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
GRAND LODGE OF INDIANA F & AM PO BOX 44210 INDIANAPOLIS,IN 462440210			SUPPORT PUBLIC PURPOSE OF RECIPIENT	50
KNIGHTS TEMPLAR EYE FOUNDATION VINCENNES YORK RITE VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
VINCENNES LODGE NO 1 PO BOX 1 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
SCOTTISH RITE COMMUNITY CENTER 203 CHESTNUT STREET EVANSVILLE,IN 47713			SUPPORT PUBLIC PURPOSE OF RECIPIENT	100
VINCENNES FOOD PANTRY PO BOX 1235 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,500
VINCENNES SWIM TEAM VINCENNES VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	250
VU CHRISTIAN CAMPUS FELLOWSHIP 102 EAST LYNDALE AVENUE VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
GROUSELAND FOUNDATION INC 3 WEST SCOTT ST VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
JOE BLACK 4-H CLUB PO BOX 202 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
INDIANA 4-H FOUNDATION INC 615 WEST STATE STREET WEST LAFAYETTE,IN 479072053			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
Total . . . . . ▶ **3a**				184,965

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
INDIANA MILITARY MUSEUM INC PO BOX 977 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
HIGHER BOUND INC 300 NORTH 5TH STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
YMCA 2010 COLLEGE AVENUE VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	2,500
PACE 525 NORTH 4TH STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
MAYO CLINIC 200 FIRST STREET SW ROCHESTER,MN 55905			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
MAYO CLINIC 200 FIRST STREET SW ROCHESTER,MN 55905			SUPPORT PUBLIC PURPOSE OF RECIPIENT	2,000
THE LAWRENCEVILLE-VINCENNES AIRPORT VINCENNES VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
SHOP WITH A COP 501 BUSSERON STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	350
HADI SHRINERS PO BOX 1 EVANSVILLE,IN 477010001			SUPPORT PUBLIC PURPOSE OF RECIPIENT	50
HADI SHRINE CIRCUS PO BOX 1 EVANSVILLE,IN 477010001			SUPPORT PUBLIC PURPOSE OF RECIPIENT	180
HADI SHRINE CIRCUS PO BOX 1 EVANSVILLE,IN 477010001			SUPPORT PUBLIC PURPOSE OF RECIPIENT	40
SALVATION ARMY VINCENNES VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
FCA - CENTRAL INDIANA FCA 2230 STAFFORD ROAD PLAINFIELD,IN 46168			SUPPORT PUBLIC PURPOSE OF RECIPIENT	500
GOOD SAMARITAN HOSPICE 520 SOUTH 7TH STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
THE INDIANA ACADEMY 30 SOUTH MERIDIAN STREET INDIANAPOLIS,IN 46204			SUPPORT PUBLIC PURPOSE OF RECIPIENT	500
Total . . . . . ▶ **3a**				184,965

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MIDWEST FOOD BANK 6450 SOUTH BELMONT AVENUE INDIANAPOLIS,IN 46217			SUPPORT PUBLIC PURPOSE OF RECIPIENT	500
OLD NORTHWEST CORP 1409 AUDUBON ROAD VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	125
ALICE OF OLD VINCENNES 2202 EAST SEMINOLE DRIVE VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
VINCENNES UNIVERSITY FOUNDATION 1002 NORTH FIRST STREET VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	200
PALM HARBOR UNITED METHODIST CHURCH 1551 BELCHER ROAD PALM HARBOR,FL 34683			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
INNISBROOK ASSOCIATE SCHOLARSHIP FU 36750 US HWY 19 NORTH PALM HARBOR,FL 34684			SUPPORT PUBLIC PURPOSE OF RECIPIENT	3,000
KNOX COUNTY COMMUNITY FOUNDATION PO BOX 273 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,000
OLD TOWN PLAYERS INC PO BOX 855 VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	1,500
COMMUNITY UMC ENDOWMENT FUND 1548 SOUTH HART STREET RO VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	25,000
KCARC VINCENNES VINCENNES,IN 47591			SUPPORT PUBLIC PURPOSE OF RECIPIENT	50,000
GRAND ALMONER'S CAMPAIGN PO BOX 519 LEXINGTON,MA 024200519			SUPPORT PUBLIC PURPOSE OF RECIPIENT	5,000
Total . . . . . ▶ **3a**				184,965

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491096005056

TY 2015 Accounting Fees Schedule

Name: THE MCCORMICK FAMILY FOUNDATIONINC

EIN: 35-2016398

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT ACCOUNTING FEES	1,780			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491096005056

TY 2015 Investments Corporate Stock Schedule

Name: THE MCCORMICK FAMILY FOUNDATIONINC

EIN: 35-2016398

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	850,383	3,441,236

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491096005056

TY 2015 Other Expenses Schedule

Name: THE MCCORMICK FAMILY FOUNDATIONINC

EIN: 35-2016398

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
FILING FEES	7			
INVESTMENT FEES	150			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491096005056

TY 2015 Taxes Schedule

Name: THE MCCORMICK FAMILY FOUNDATIONINC

EIN: 35-2016398

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL INCOME TAX	2,055			