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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

**2015**Department of the Treasury  
Internal Revenue Service▶ 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](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2015 or tax year beginning

, and ending

|                                                                                                                                                                                                                                                                                                     |                                                                                                                                           |                                                                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of foundation<br><b>Finish Line Youth Foundation, Inc.</b>                                                                                                                                                                                                                                     |                                                                                                                                           | A Employer identification number<br><b>35-2059749</b>                                                                                                                      |
| Number and street (or P O box number if mail is not delivered to street address)<br><b>3308 N. Mitthoeffer Road</b>                                                                                                                                                                                 | Room/suite                                                                                                                                | B Telephone number (see instructions)<br><b>888-777-3949</b>                                                                                                               |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>Indianapolis IN 46235</b>                                                                                                                                                                                            |                                                                                                                                           | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                 |
| G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |                                                                                                                                           | D 1 Foreign organizations, check here <input type="checkbox"/><br>2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                    |                                                                                                                                           | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                              |
| I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <b>8,889,889</b>                                                                                                                                                                                             | J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input checked="" type="checkbox"/>                                                |

| 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) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| 1                                                                                                                                                                  | Contributions, gifts, grants, etc., received (attach schedule)                   | 2,750,683                          |                           |                         |                                                             |
| 2                                                                                                                                                                  | Check <input type="checkbox"/> if the foundation is not required to attach Sch B |                                    |                           |                         |                                                             |
| 3                                                                                                                                                                  | Interest on savings and temporary cash investments                               |                                    |                           |                         |                                                             |
| 4                                                                                                                                                                  | Dividends and interest from securities                                           | 303,506                            | 303,506                   |                         |                                                             |
| 5a                                                                                                                                                                 | Gross rents                                                                      |                                    |                           |                         |                                                             |
| b                                                                                                                                                                  | Net rental income or (loss)                                                      |                                    |                           |                         |                                                             |
| 6a                                                                                                                                                                 | Net gain or (loss) from sale of assets not on line 10                            | 40,895                             |                           |                         |                                                             |
| b                                                                                                                                                                  | Gross sales price for all assets on line 6a                                      | 856,143                            |                           |                         |                                                             |
| 7                                                                                                                                                                  | Capital gain net income (from Part IV, line 2)                                   |                                    | 40,895                    |                         |                                                             |
| 8                                                                                                                                                                  | Net short-term capital gain                                                      |                                    |                           | 0                       |                                                             |
| 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) <b>Stmt 1</b>                                     | 7,058                              |                           | 7,058                   |                                                             |
| 12                                                                                                                                                                 | <b>Total.</b> Add lines 1 through 11                                             | 3,102,142                          | 344,401                   | 7,058                   |                                                             |
| 13                                                                                                                                                                 | Compensation of officers, directors, trustees, etc                               | 120,000                            |                           |                         | 120,000                                                     |
| 14                                                                                                                                                                 | Other employee salaries and wages                                                | 133,075                            |                           |                         | 133,075                                                     |
| 15                                                                                                                                                                 | Pension plans, employee benefits                                                 |                                    |                           |                         |                                                             |
| 16a                                                                                                                                                                | Legal fees (attach schedule) <b>See Stmt 2</b>                                   | 4,295                              |                           |                         | 4,295                                                       |
| b                                                                                                                                                                  | Accounting fees (attach schedule) <b>Stmt 3</b>                                  | 9,143                              |                           |                         | 9,143                                                       |
| c                                                                                                                                                                  | Other professional fees (attach schedule) <b>Stmt 4</b>                          | 31,456                             | 25,945                    |                         | 5,511                                                       |
| 17                                                                                                                                                                 | Interest                                                                         |                                    |                           |                         |                                                             |
| 18                                                                                                                                                                 | Taxes (attach schedule) (see instructions) <b>Stmt 5</b>                         | 8,559                              |                           |                         | 8,559                                                       |
| 19                                                                                                                                                                 | Depreciation (attach schedule) and depletion                                     |                                    |                           |                         |                                                             |
| 20                                                                                                                                                                 | Occupancy                                                                        |                                    |                           |                         |                                                             |
| 21                                                                                                                                                                 | Travel, conferences, and meetings                                                | 8,276                              |                           |                         | 8,276                                                       |
| 22                                                                                                                                                                 | Printing and publications                                                        |                                    |                           |                         |                                                             |
| 23                                                                                                                                                                 | Other expenses (att sch) <b>Stmt 6</b>                                           | 254,001                            |                           |                         | 254,001                                                     |
| 24                                                                                                                                                                 | <b>Total operating and administrative expenses.</b> Add lines 13 through 23      | 568,805                            | 25,945                    | 0                       | 542,860                                                     |
| 25                                                                                                                                                                 | Contributions, gifts, grants paid                                                | 1,999,025                          |                           |                         | 1,999,025                                                   |
| 26                                                                                                                                                                 | <b>Total expenses and disbursements.</b> Add lines 24 and 25                     | 2,567,830                          | 25,945                    | 0                       | 2,541,885                                                   |
| 27                                                                                                                                                                 | Subtract line 26 from line 12                                                    |                                    |                           |                         |                                                             |
| a                                                                                                                                                                  | <b>Excess of revenue over expenses and disbursements</b>                         | 534,312                            |                           |                         |                                                             |
| b                                                                                                                                                                  | <b>Net investment income</b> (if negative, enter -0-)                            |                                    | 318,456                   |                         |                                                             |
| c                                                                                                                                                                  | <b>Adjusted net income</b> (if negative, enter -0-)                              |                                    |                           | 7,058                   |                                                             |

For Paperwork Reduction Act Notice, see instructions.

DAA

Form 990-PF (2015)

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| Part II Balance Sheets      |                                                                                                                              | Beginning of year | End of year    |                |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|----------------|
|                             |                                                                                                                              |                   | (a) Book Value | (b) Book Value |
| Assets                      | 1 Cash – non-interest-bearing                                                                                                | 134,187           | 147,347        | 147,347        |
|                             | 2 Savings and temporary cash investments                                                                                     | 607,560           | 1,198,630      | 1,198,630      |
|                             | 3 Accounts receivable ▶<br>Less allowance for doubtful accounts ▶                                                            | 38,000            |                |                |
|                             | 4 Pledges receivable ▶<br>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 (att schedule) ▶<br>Less allowance for doubtful accounts ▶                                | 0                 |                |                |
|                             | 8 Inventories for sale or use                                                                                                |                   |                |                |
|                             | 9 Prepaid expenses and deferred charges                                                                                      | 12,149            |                |                |
|                             | 10a Investments – U S and state government obligations (attach schedule)                                                     |                   |                |                |
|                             | b Investments – corporate stock (attach schedule) See Stmt 7                                                                 | 5,880,570         | 6,218,118      | 6,218,118      |
|                             | c Investments – corporate bonds (attach schedule) See Stmt 8                                                                 | 2,302,330         | 1,325,794      | 1,325,794      |
|                             | 11 Investments – land, buildings, and equipment basis ▶<br>Less accumulated depreciation (attach sch ) ▶                     |                   |                |                |
|                             | 12 Investments – mortgage loans                                                                                              |                   |                |                |
|                             | 13 Investments – other (attach schedule)                                                                                     |                   |                |                |
|                             | 14 Land, buildings, and equipment basis ▶<br>Less accumulated depreciation (attach sch ) ▶                                   |                   |                |                |
|                             | 15 Other assets (describe ▶ )                                                                                                |                   |                |                |
|                             | 16 <b>Total assets</b> (to be completed by all filers – see the instructions Also, see page 1, item I)                       | 8,974,796         | 8,889,889      | 8,889,889      |
| Liabilities                 | 17 Accounts payable and accrued expenses                                                                                     | 24,188            |                |                |
|                             | 18 Grants payable                                                                                                            | 228,825           |                |                |
|                             | 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 <b>Total liabilities</b> (add lines 17 through 22)                                                                        | 253,013           | 0              |                |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31 ▶ <input type="checkbox"/> |                   |                |                |
|                             | 24 Unrestricted                                                                                                              |                   |                |                |
|                             | 25 Temporarily restricted                                                                                                    |                   |                |                |
|                             | 26 Permanently restricted                                                                                                    |                   |                |                |
|                             | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>  |                   |                |                |
|                             | 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                                                          | 8,721,783         | 8,889,889      |                |
|                             | 30 <b>Total net assets or fund balances</b> (see instructions)                                                               | 8,721,783         | 8,889,889      |                |
|                             | 31 <b>Total liabilities and net assets/fund balances</b> (see instructions)                                                  | 8,974,796         | 8,889,889      |                |

**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 | 8,721,783 |
| 2 Enter amount from Part I, line 27a                                                                                                                         | 2 | 534,312   |
| 3 Other increases not included in line 2 (itemize) ▶                                                                                                         | 3 |           |
| 4 Add lines 1, 2, and 3                                                                                                                                      | 4 | 9,256,095 |
| 5 Decreases not included in line 2 (itemize) ▶ See Statement 9                                                                                               | 5 | 366,206   |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30                                                      | 6 | 8,889,889 |

**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.) |  | (b) How acquired<br>P – Purchase<br>D – Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------|--------------------------------------|----------------------------------|
| <b>1a Securities</b>                                                                                                               |  | <b>P</b>                                         | <b>Various</b>                       | <b>12/31/15</b>                  |
| b                                                                                                                                  |  |                                                  |                                      |                                  |
| c                                                                                                                                  |  |                                                  |                                      |                                  |
| d                                                                                                                                  |  |                                                  |                                      |                                  |
| e                                                                                                                                  |  |                                                  |                                      |                                  |

  

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| <b>a 856,143</b>      |                                            | <b>815,248</b>                                  | <b>40,895</b>                                |
| b                     |                                            |                                                 |                                              |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0- or<br>Losses (from col. (h)) |
|---------------------------|--------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------------|
| <b>a</b>                  |                                      |                                                 | <b>40,895</b>                                                                                  |
| b                         |                                      |                                                 |                                                                                                |
| c                         |                                      |                                                 |                                                                                                |
| d                         |                                      |                                                 |                                                                                                |
| e                         |                                      |                                                 |                                                                                                |

  

|                                                                                       |                                                                                                                                                                                                          |          |               |
|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------|
| <b>2 Capital gain net income or (net capital loss)</b>                                | <div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 7<br/>           If (loss), enter -0- in Part I, line 7         </div>                                | <b>2</b> | <b>40,895</b> |
| <b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)</b> | <div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in<br/>           Part I, line 8         </div> | <b>3</b> |               |

**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 the instructions before making any entries

| (a)<br>Base period years<br>Calendar year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|----------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-------------------------------------------------------------|
| 2014                                                                 | 3,003,887                                | 8,601,828                                    | 0.349215                                                    |
| 2013                                                                 | 2,682,195                                | 7,954,005                                    | 0.337213                                                    |
| 2012                                                                 | 2,543,503                                | 7,391,228                                    | 0.344125                                                    |
| 2011                                                                 | 917,162                                  | 7,625,461                                    | 0.120276                                                    |
| 2010                                                                 | 706,400                                  | 6,294,656                                    | 0.112222                                                    |

  

|                                                                                                                                                                                       |          |                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------|
| <b>2 Total of line 1, column (d)</b>                                                                                                                                                  | <b>2</b> | <b>1.263051</b>  |
| <b>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</b> | <b>3</b> | <b>0.252610</b>  |
| <b>4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5</b>                                                                                                 | <b>4</b> | <b>8,732,990</b> |
| <b>5 Multiply line 4 by line 3</b>                                                                                                                                                    | <b>5</b> | <b>2,206,041</b> |
| <b>6 Enter 1% of net investment income (1% of Part I, line 27b)</b>                                                                                                                   | <b>6</b> | <b>3,185</b>     |
| <b>7 Add lines 5 and 6</b>                                                                                                                                                            | <b>7</b> | <b>2,209,226</b> |
| <b>8 Enter qualifying distributions from Part XII, line 4</b>                                                                                                                         | <b>8</b> | <b>2,541,885</b> |

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 instructions)**

|           |                                                                                                                                                                                                                             |           |              |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------|
| <b>1a</b> | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1<br>Date of ruling or determination letter (attach copy of letter if necessary—see instructions) |           |              |
| <b>b</b>  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b                                                                  | <b>1</b>  | <b>3,185</b> |
| <b>c</b>  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)                                                                                                      |           |              |
| <b>2</b>  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                   | <b>2</b>  | <b>0</b>     |
| <b>3</b>  | Add lines 1 and 2                                                                                                                                                                                                           | <b>3</b>  | <b>3,185</b> |
| <b>4</b>  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                 | <b>4</b>  | <b>0</b>     |
| <b>5</b>  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-                                                                                                                              | <b>5</b>  | <b>3,185</b> |
| <b>6</b>  | <b>Credits/Payments</b>                                                                                                                                                                                                     |           |              |
| <b>a</b>  | 2015 estimated tax payments and 2014 overpayment credited to 2015                                                                                                                                                           | <b>6a</b> | <b>6,080</b> |
| <b>b</b>  | Exempt foreign organizations – tax withheld at source                                                                                                                                                                       | <b>6b</b> |              |
| <b>c</b>  | Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                         | <b>6c</b> |              |
| <b>d</b>  | Backup withholding erroneously withheld                                                                                                                                                                                     | <b>6d</b> |              |
| <b>7</b>  | Total credits and payments. Add lines 6a through 6d                                                                                                                                                                         | <b>7</b>  | <b>6,080</b> |
| <b>8</b>  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                                                                                    | <b>8</b>  |              |
| <b>9</b>  | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>                                                                                                                                 | <b>9</b>  |              |
| <b>10</b> | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>                                                                                                                     | <b>10</b> | <b>2,895</b> |
| <b>11</b> | Enter the amount of line 10 to be <b>Credited to 2016 estimated tax</b> <b>0</b> <b>Refunded</b>                                                                                                                            | <b>11</b> | <b>2,895</b> |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                                                    | Yes      | No       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|
| <b>1a</b> 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?                                                                                                                                                                                     |          | <b>X</b> |
| <b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?<br>If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities |          | <b>X</b> |
| <b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?                                                                                                                                                                                                                                                                                               |          | <b>X</b> |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year<br>(1) On the foundation <b>\$</b> _____ (2) On foundation managers <b>\$</b> _____                                                                                                                                                                     |          |          |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>\$</b> _____                                                                                                                                                                                                      |          |          |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                                              |          | <b>X</b> |
| <b>3</b> 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                                                                                                                                |          | <b>X</b> |
| <b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                                              |          | <b>X</b> |
| <b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?                                                                                                                                                                                                                                                                                   |          |          |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T                                                                                                                                                                                        |          | <b>X</b> |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either<br>• By language in the governing instrument, or<br>• 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?                         | <b>X</b> |          |
| <b>7</b> 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                                                                                                                                                                                                                          | <b>X</b> |          |
| <b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>IN</b>                                                                                                                                                                                                                                             |          |          |
| <b>b</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                                                                                                                                               | <b>X</b> |          |
| <b>9</b> 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                                                                                                      |          | <b>X</b> |
| <b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                                       |          | <b>X</b> |

**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 | Yes | 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 |     | X  |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <b>www.finishline.com/store/youthfoundation</b>    | 13 | X   |    |

14 The books are in care of ► **Matt Poske** Telephone no ► **888-777-3949**  
**3808 N. Mitthoeffer Rd**  
 Located at ► **Indianapolis** IN ZIP+4 ► **46235**

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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►

|    |     |    |
|----|-----|----|
| 16 | Yes | No |
|    |     | X  |

**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.**

|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                              |                                        |    |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------|----|
| 1a  | During the year did the foundation (either directly or indirectly)                                                                                                                                                                                                                                                                                                                                                                                                                              |                              | Yes                                    | No |
| (1) | Engage in the sale or exchange, or leasing of property with a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |    |
| (2) | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |    |
| (3) | Furnish goods, services, or facilities to (or accept them from) a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |    |
| (4) | Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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)?                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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.)                                                                                                                                                                                                                                                     | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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)? Organizations relying on a current notice regarding disaster assistance check here                                                                                                                                                                                         | N/A                          |                                        | 1b |
| 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?                                                                                                                                                                                                                                                                                                         | N/A                          |                                        | 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? If "Yes," list the years ► 20 , 20 , 20 , 20                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |    |
| b   | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions.)                                                                                                                                                                                | N/A                          |                                        | 2b |
| c   | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 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?                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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.) | N/A                          |                                        | 3b |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                 |                              |                                        | X  |
| b   | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?                                                                                                                                                                                                                                                               |                              |                                        | X  |

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

|                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                        |           |  |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--|----------|
| <b>5a</b> During the year did the foundation pay or incur any amount to                                                                                                                                                                            | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <div style="border: 1px solid black; width: 20px; height: 20px; margin: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 5px;"></div> | <b>b</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)?<br>Organizations relying on a current notice regarding disaster assistance check here<br><input type="checkbox"/> N/A | <b>5b</b> |  |          |
| <b>c</b> 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?<br>If "Yes," attach the statement required by Regulations section 53.4945–5(d) | <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                        |           |  |          |
| <b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                          | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                        |           |  |          |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?<br>If "Yes" to 6b, file Form 8870                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                        | <b>6b</b> |  | <b>X</b> |
| <b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?                                                                                                                                     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                        |           |  |          |
| <b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?                                                                                                                                 | <input checked="" type="checkbox"/> N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                        | <b>7b</b> |  |          |

**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 | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| See Statement 10     |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |

**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 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

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

0

**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 N/A |          |
| 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.<br>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 | 7,822,118 |
| b | Average of monthly cash balances                                                                            | 1b | 1,043,862 |
| c | Fair market value of all other assets (see instructions)                                                    | 1c | 0         |
| d | <b>Total</b> (add lines 1a, b, and c)                                                                       | 1d | 8,865,980 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | 1e | 0         |
| 2 | Acquisition indebtedness applicable to line 1 assets                                                        | 2  | 0         |
| 3 | Subtract line 2 from line 1d                                                                                | 3  | 8,865,980 |
| 4 | Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)      | 4  | 132,990   |
| 5 | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5  | 8,732,990 |
| 6 | <b>Minimum investment return.</b> Enter 5% of line 5                                                        | 6  | 436,650   |

**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  | 436,650 |
| 2a | Tax on investment income for 2015 from Part VI, line 5                                                    | 2a | 3,185   |
| b  | Income tax for 2015 (This does not include the tax from Part VI.)                                         | 2b |         |
| c  | Add lines 2a and 2b                                                                                       | 2c | 3,185   |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | 3  | 433,465 |
| 4  | Recoveries of amounts treated as qualifying distributions                                                 | 4  |         |
| 5  | Add lines 3 and 4                                                                                         | 5  | 433,465 |
| 6  | Deduction from distributable amount (see instructions)                                                    | 6  |         |
| 7  | <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7  | 433,465 |

**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 | 2,541,885 |
| 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 | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                    | 4  | 2,541,885 |
| 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  | 3,185     |
| 6 | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4                                                                                | 6  | 2,538,700 |

**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)<br>Corpus | (b)<br>Years prior to 2014 | (c)<br>2014 | (d)<br>2015    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|----------------|
| 1 Distributable amount for 2015 from Part XI, line 7                                                                                                                       |               |                            |             | <b>433,465</b> |
| 2 Undistributed income, if any, as of the end of 2015                                                                                                                      |               |                            |             |                |
| a Enter amount for 2014 only                                                                                                                                               |               |                            |             |                |
| b Total for prior years 20____, 20____, 20____                                                                                                                             |               |                            |             |                |
| 3 Excess distributions carryover, if any, to 2015                                                                                                                          |               |                            |             |                |
| a From 2010                                                                                                                                                                | 395,244       |                            |             |                |
| b From 2011                                                                                                                                                                | 542,433       |                            |             |                |
| c From 2012                                                                                                                                                                | 2,181,012     |                            |             |                |
| d From 2013                                                                                                                                                                | 2,291,629     |                            |             |                |
| e From 2014                                                                                                                                                                | 2,585,954     |                            |             |                |
| f Total of lines 3a through e                                                                                                                                              | 7,996,272     |                            |             |                |
| 4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ <b>2,541,885</b>                                                                                            |               |                            |             |                |
| a Applied to 2014, but not more than line 2a                                                                                                                               |               |                            |             |                |
| 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                                                                                                                                     |               |                            |             | <b>433,465</b> |
| e Remaining amount distributed out of corpus                                                                                                                               | 2,108,420     |                            |             |                |
| 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                                                                                                                          | 10,104,692    |                            |             |                |
| 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 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016                                                                |               |                            |             | 0              |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)         |               |                            |             |                |
| 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)                                                                              | 395,244       |                            |             |                |
| 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a                                                                                              | 9,709,448     |                            |             |                |
| 10 Analysis of line 9                                                                                                                                                      |               |                            |             |                |
| a Excess from 2011                                                                                                                                                         | 542,433       |                            |             |                |
| b Excess from 2012                                                                                                                                                         | 2,181,012     |                            |             |                |
| c Excess from 2013                                                                                                                                                         | 2,291,629     |                            |             |                |
| d Excess from 2014                                                                                                                                                         | 2,585,954     |                            |             |                |
| e Excess from 2015                                                                                                                                                         | 2,108,420     |                            |             |                |

**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 foundation 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 |           |
| <b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed                      |          |               |          |          |           |
| <b>b</b> 85% of line 2a                                                                                                                                  |          |               |          |          |           |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed                                                                             |          |               |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities                                                           |          |               |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities<br>Subtract line 2d from line 2c                                 |          |               |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon                                                                                       |          |               |          |          |           |
| <b>a</b> "Assets" alternative test – enter                                                                                                               |          |               |          |          |           |
| <b>(1)</b> Value of all assets                                                                                                                           |          |               |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)                                                                                     |          |               |          |          |           |
| <b>b</b> "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed                              |          |               |          |          |           |
| <b>c</b> "Support" alternative test – enter                                                                                                              |          |               |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |          |               |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |          |               |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization                                                                                         |          |               |          |          |           |
| <b>(4)</b> Gross investment income                                                                                                                       |          |               |          |          |           |

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)

**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) )  
**N/A**

**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  
**N/A**

**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 e-mail address of the person to whom applications should be addressed  
**Marty Posch 317-899-1022**  
**3308 North Mitthoeffer Road Indianapolis IN 46235**

**b** The form in which applications should be submitted and information and materials they should include  
**See Statement 11**

**c** Any submission deadlines  
**Applications will be accepted on a quarterly basis.**

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
**See Statement 12**

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient                                                | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount           |
|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|------------------|
| Name and address (home or business)                      |                                                                                                                    |                                      |                                     |                  |
| <b>a</b> Paid during the year<br><b>See Statement 13</b> |                                                                                                                    |                                      |                                     | <b>1,999,025</b> |
| <b>Total</b>                                             |                                                                                                                    |                                      | <b>▶ 3a</b>                         | <b>1,999,025</b> |
| <b>b</b> Approved for future payment<br><b>N/A</b>       |                                                                                                                    |                                      |                                     |                  |
| <b>Total</b>                                             |                                                                                                                    |                                      | <b>▶ 3b</b>                         |                  |



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

- 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
  - (2)** Other assets
- b** Other transactions
- (1)** Sales of assets to a noncharitable exempt organization
  - (2)** Purchases of assets from a noncharitable exempt organization
  - (3)** Rental of facilities, equipment, or other assets
  - (4)** Reimbursement arrangements
  - (5)** Loans or loan guarantees
  - (6)** Performance of services or membership or fundraising solicitations
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- 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.

|       | Yes | No |
|-------|-----|----|
| 1a(1) |     | X  |
| 1a(2) |     | X  |
| 1b(1) |     | X  |
| 1b(2) |     | X  |
| 1b(3) |     | X  |
| 1b(4) |     | X  |
| 1b(5) |     | X  |
| 1b(6) |     | X  |
| 1c    |     | X  |

[illegible]

- 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 |
|--------------------------|--------------------------|---------------------------------|
| <b>N/A</b>               |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

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.

**Sign  
Here**

Signature of officer or trustee

Date \_\_\_\_\_

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes

☒ Yes ☐ No

**President**

**Paid**  
**Preparer**  
**Use Only**

Print/Type preparer's name

Preparer's signature

Date \_\_\_\_\_

Check ☐ if self-employed

Robert K. Brinkers, CPA

**Robert K. Brinkers, CPA**

09/01/16

Firm's name ► **Alerding CPA Group**

PTIN P00409428

Firm's address ▶ 4181 E 96th St Ste 180  
Indianapolis, IN 46240

Firm's EIN ▶ 35-2043580

Phone no **317-569-4181**

**Schedule B**  
**(Form 990, 990-EZ,**  
**or 990-PF)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

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

OMB No 1545-0047

**2015**

Name of the organization

Employer identification number

**Finish Line Youth Foundation, Inc.**

**35-2059749**

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

**Finish Line Youth Foundation, Inc.**

Employer identification number

**35-2059749****Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                      | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|--------------------------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | <b>The Cohen Family FDTN Inc</b><br><b>10360 Charter Oaks</b><br><br><b>Carmel IN 46032</b>            | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 2          | <b>Vasey</b><br><b>10830 Andrade Dr.</b><br><br><b>Zionsville IN 46077</b>                             | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 3          | <b>Pacers Basketball, LLC</b><br><b>125 S. Pennsylvania Street</b><br><br><b>Indianapolis IN 46204</b> | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 4          | <b>Quality Solutions</b><br><b>128 North 1st Street</b><br><br><b>Colwich KS 67030</b>                 | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 5          | <b>Gildan USA, Inc.</b><br><b>1980 Clements Ferry Road</b><br><br><b>Charleston SC 29492</b>           | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 6          | <b>Willis North America Inc.</b><br><b>26 Century Blvd. Suite 101</b><br><br><b>Nashville TN 37214</b> | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |

Name of organization

**Finish Line Youth Foundation, Inc.**

Employer identification number

**35-2059749****Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                              | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|------------------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7          | Bank of America<br>3400 Pawtucket Ave.<br><br>East Providence RI 02915                         | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 8          | Sports Graphics, Inc.<br>3432 Park Davis Circle<br><br>Indianapolis IN 46235                   | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 9          | Premier Fixtures<br>400 Osser Avenue Suite 350<br><br>Hauppauge NY 11788                       | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 10         | Joseph F. Farivar Education Foundati<br>4335 East Valley Boulevard<br><br>Los Angeles CA 90032 | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 11         | Duke Realty<br>600 East 96th Street Suite 100<br><br>Indianapolis IN 46240                     | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 12         | Sogeti<br>8395 Keystone Crossing Suite 200<br><br>Indianapolis IN 46240                        | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |

Name of organization

Finish Line Youth Foundation, Inc.

Employer identification number

35-2059749

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                   | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|-------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 13         | Wells Fargo Bank, N.A.<br>90 South 7th Street<br><br>Minneapolis MN 55479           | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 14         | Stifel Nicolaus<br>P.O. Box 88940<br><br>St. Louis MO 63188                         | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 15         | PNC Financial Services Group<br>1 PNC Plaza 249 5th Ave.<br><br>Pittsburgh PA 15222 | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 16         | MS Management Assoc Inc<br>PO Box 7033<br><br>Indianapolis IN 46207                 | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 17         | Agron, Inc.<br>2440 S Sepulveda Blvd<br><br>Los Angeles CA 90064                    | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 18         | Brooks Sports<br>3400 Stone Way N #500<br><br>Seattle WA 98103                      | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |

Name of organization

**Finish Line Youth Foundation, Inc.**

Employer identification number

**35-2059749****Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                              | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|--------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 19         | Fifth Third<br>38 Fountain Square Plaza<br>Cincinnati OH 45263                 | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 20         | Macerich<br>401 Wilshire Blvd Ste 700<br>Santa Monica CA 90401                 | \$ 5,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 21         | Allegheny Design Management<br>1154 Industrial Park Rd<br>Vandergrift PA 15690 | \$ 5,800                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 22         | Indianapolis Colts<br>P.O. Box 535000<br>Indianapolis IN 46253                 | \$ 6,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 23         | Innomark Communications, Inc.<br>420 Distribution Circle<br>Fairfield OH 45014 | \$ 6,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 24         | Bill Kirkendall<br>2400 E. Cherry Creek S. Dr.<br>Unit 302<br>Denver CO 80209  | \$ 7,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |

Name of organization

**Finish Line Youth Foundation, Inc.**

Employer identification number

**35-2059749****Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                          | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|--------------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 25         | Salvage Traders, Inc.<br>19352 Barrett Lane<br><br>Santa Ana CA 92705                      | \$ 7,500                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 26         | James Kaspar<br>10296 Muirfield Trace<br><br>Fishers IN 46037                              | \$ 7,500                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 27         | Michael Paton<br>4548 Chase Oak Court<br><br>Zionsville IN 46077                           | \$ 7,500                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 28         | The Shone Family Foundation<br>12821 E. New Market Street Suite 310<br><br>Carmel IN 46032 | \$ 9,000                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 29         | REV Solutions<br>10400 Viking Drive, Suite 500<br><br>Eden Prairie MN 55344                | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 30         | Barnes & Thornburg LLP<br>11 South Meridian Street<br><br>Indianapolis IN 46204            | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |

Name of organization

**Finish Line Youth Foundation, Inc.**

Employer identification number

**35-2059749****Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                   | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|-------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 31         | General Growth Services, Inc.<br>110 N. Wacker Drive<br><br>Chicago IL 60606        | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 32         | Converse, Inc.<br>160 North Washington St.<br><br>Boston MA 02114                   | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 33         | Reebok<br>1895 J.W. Foster Blvd.<br><br>Canton MA 02021                             | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 34         | Macy's<br>2101 E. Kemper Rd.<br><br>Sharonville OH 45241                            | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 35         | Manhattan Associates<br>2300 Windy Ridge Parkway 10th Floor<br><br>Atlanta GA 30339 | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 36         | Asics<br>P.O. Box 827483<br><br>Philadelphia PA 19182                               | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |

Name of organization

**Finish Line Youth Foundation, Inc.**

Employer identification number

**35-2059749****Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|-------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 37         | Sketchers<br>228 Manhattan Beach Blvd<br>Manhattan Beach CA 90266 | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 38         | Sof Sole<br>2001 TW Alexander Dr Box 13925<br>Durham NC 27709     | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 39         | Sports Illustrated<br>P.P. Box 30602<br>Tampa FL 33630            | \$ 10,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 40         | CBTS<br>221 E 4th St<br>Cincinnati OH 45202                       | \$ 12,500                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 41         | Merrill Lynch<br>250 Vesey St<br>New York NY 10080                | \$ 15,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 42         | Puma<br>1 Congress St Ste 110<br>Boston MA 02114                  | \$ 15,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |

Name of organization

**Finish Line Youth Foundation, Inc.**

Employer identification number

**35-2059749****Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                          | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                         |
|------------|----------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 43         | IBM<br>1 New Orchard Rd<br><br>Armonk NY 10504                             | \$ 22,500                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 44         | Under Armour, Inc.<br>1020 Hull Street Suite 300<br><br>Baltimore MD 21230 | \$ 25,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 45         | Nike Inc.<br>One Bowerman Drive<br><br>Beaverton OR 97005                  | \$ 25,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 46         | Adidas<br>5055 N Greeley Ave<br><br>Portland OR 97217                      | \$ 25,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
| 47         | Finish Line Inc.<br>3308 N. Mitthoeffer Rd.<br><br>Indianapolis IN 46235   | \$ 2,176,780               | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions ) |
|            |                                                                            | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions )            |

## Federal Statements

Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

| Description  | Revenue per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income |
|--------------|----------------------|--------------------------|------------------------|
| Sample Sales | \$ 7,058             | \$                       | \$ 7,058               |
| Total        | \$ 7,058             | \$ 0                     | \$ 7,058               |

Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees

| Description | Total    | Net<br>Investment | Adjusted<br>Net | Charitable<br>Purpose |
|-------------|----------|-------------------|-----------------|-----------------------|
| Legal       | \$ 4,295 | \$                | \$              | \$ 4,295              |
| Total       | \$ 4,295 | \$ 0              | \$ 0            | \$ 4,295              |

Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

| Description | Total    | Net<br>Investment | Adjusted<br>Net | Charitable<br>Purpose |
|-------------|----------|-------------------|-----------------|-----------------------|
| Accounting  | \$ 9,143 | \$                | \$              | \$ 9,143              |
| Total       | \$ 9,143 | \$ 0              | \$ 0            | \$ 9,143              |

Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

| Description                | Total     | Net<br>Investment | Adjusted<br>Net | Charitable<br>Purpose |
|----------------------------|-----------|-------------------|-----------------|-----------------------|
| Investment Management Fees | \$ 25,945 | \$ 25,945         | \$              | \$                    |
| Other Professional Fees    | 5,511     |                   |                 | 5,511                 |
| Total                      | \$ 31,456 | \$ 25,945         | \$ 0            | \$ 5,511              |

## Federal Statements

Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

| Description | Total    | Net<br>Investment | Adjusted<br>Net | Charitable<br>Purpose |
|-------------|----------|-------------------|-----------------|-----------------------|
| Taxes       | \$ 8,559 | \$                | \$              | \$ 8,559              |
| Total       | \$ 8,559 | \$ 0              | \$ 0            | \$ 8,559              |

Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses

| Description                | Total      | Net<br>Investment | Adjusted<br>Net | Charitable<br>Purpose |
|----------------------------|------------|-------------------|-----------------|-----------------------|
| Expenses                   | \$         | \$                | \$              | \$                    |
| Golf Outing Expense        | 184,031    |                   |                 | 184,031               |
| Bowlathon Expense          | 31,740     |                   |                 | 31,740                |
| Supplies                   | 1,504      |                   |                 | 1,504                 |
| D&O Insurance              | 1,225      |                   |                 | 1,225                 |
| Spring Fundraising Drive   | 14,451     |                   |                 | 14,451                |
| Staff Development          | 2,175      |                   |                 | 2,175                 |
| Other Fundraising Expenses | 12,660     |                   |                 | 12,660                |
| Marketing                  | 796        |                   |                 | 796                   |
| Office Expenses            | 5,419      |                   |                 | 5,419                 |
| Total                      | \$ 254,001 | \$ 0              | \$ 0            | \$ 254,001            |

Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

| Description      | Beginning<br>of Year | End of<br>Year | Basis of<br>Valuation | Fair Market<br>Value |
|------------------|----------------------|----------------|-----------------------|----------------------|
| Corporate Stocks | \$ 5,880,570         | \$ 6,218,118   | Market                | \$ 6,218,118         |
| Total            | \$ 5,880,570         | \$ 6,218,118   |                       | \$ 6,218,118         |

## Federal Statements

Statement 8 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

| Description     | Beginning<br>of Year | End of<br>Year | Basis of<br>Valuation | Fair Market<br>Value |
|-----------------|----------------------|----------------|-----------------------|----------------------|
| Corporate Bonds | \$ 2,302,330         | \$ 1,325,794   | Market                | \$ 1,325,794         |
| Total           | \$ 2,302,330         | \$ 1,325,794   |                       | \$ 1,325,794         |

**Statement 9 - Form 990-PF, Part III, Line 5 - Other Decreases**

| <u>Description</u>               | <u>Amount</u>            |
|----------------------------------|--------------------------|
| Unrealized Losses on Investments | \$ <u>366,206</u>        |
| Total                            | \$ <u><u>366,206</u></u> |

## Federal Statements

Statement 10 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees,  
Etc.

| Name and<br>Address                                                       | Title        | Average<br>Hours | Compensation | Benefits | Expenses |
|---------------------------------------------------------------------------|--------------|------------------|--------------|----------|----------|
| Melissa Greenwell<br>3308 North Mitthoeffer Road<br>Indianapolis IN 46235 | President    | 2.00             | 0            | 0        | 0        |
| Greg Beidler<br>3308 North Mitthoeffer Road<br>Indianapolis IN 46235      | Vice Preside | 2.00             | 0            | 0        | 0        |
| Matt Poske<br>3308 North Mitthoeffer Road<br>Indianapolis IN 46235        | Treasurer    | 2.00             | 0            | 0        | 0        |
| Bill Kuntz<br>3308 North Mitthoeffer Road<br>Indianapolis IN 46235        | Secretary    | 2.00             | 0            | 0        | 0        |
| Heather Abidi                                                             | Director     | 1.00             | 0            | 0        | 0        |
| Bill Benner                                                               | Director     | 1.00             | 0            | 0        | 0        |
| Jeremie Dunning                                                           | Director     | 1.00             | 0            | 0        | 0        |
| Al Goizueta                                                               | Director     | 1.00             | 0            | 0        | 0        |
| Mike Grimes                                                               | Director     | 1.00             | 0            | 0        | 0        |
| Regina Heller                                                             | Director     | 1.00             | 0            | 0        | 0        |
| Jeff Kish                                                                 | Director     | 1.00             | 0            | 0        | 0        |
| Steve Schneider                                                           | Director     | 1.00             | 0            | 0        | 0        |
| Alyssa Smith                                                              | Director     | 1.00             | 0            | 0        | 0        |
| Beau Swenson                                                              | Director     | 1.00             | 0            | 0        | 0        |
| Marty Posch                                                               | Executive Di | 40.00            | 120,000      | 7,376    | 0        |

**Statement 11 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents****Description**

Applications must be submitted online via the Organization's website at the following URL: <http://www.finishline.com/store/youthfoundation/youthfoundation.jsp> and then clicking the "Online Eligibility Quiz" link.

**Form 990-PF, Part XV, Line 2c - Submission Deadlines****Description**

Applications will be accepted on a quarterly basis.

**Statement 12 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations****Description**

The Organization only grants funds to registered 501(c)(3) organizations with certain priorities: Organizations with youth athletic programs, sports camps serving disadvantaged youth, programs that directly benefit individuals, programs that serve and impact a greater number of individuals, those with proven fiscal responsibility, ability to support ongoing programs, and proximity to Finish Line stores.

The Organization does not grant funds to non-501(c)(3) organizations, political campaigns or lobbying organizations, organizations that unlawfully discriminate, religious organizations, fraternal or labor organizations, foundations of for-profit entities, endowments, start-up organizations, requests for operating support and debt reduction, beauty or talent contests, individuals, team sponsorships, medical or scientific research or travel reimbursements.

## Federal Statements

Statement 13 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year

| Name                                |                           | Address                                 |  | Relationship | Status | Purpose | Amount    |
|-------------------------------------|---------------------------|-----------------------------------------|--|--------------|--------|---------|-----------|
| Address                             |                           |                                         |  |              |        |         |           |
| Expensed Prior to Method Change     |                           |                                         |  |              |        |         |           |
| Various Recipients                  |                           |                                         |  |              |        |         |           |
| Special Olympics International      | 1133 19th Street NW       | 11th F                                  |  |              |        |         |           |
| Washington DC 20036                 | 501(c)(3)                 | Pu 2015 Partnership Payment             |  |              |        |         | -228,825  |
| Boys & Girls Club of Indianapolis   | 3530 S. Keystone Ave.     | #20                                     |  |              |        |         | 74,090    |
| Indianapolis IN 46227               | 501(c)(3)                 | Pu Finish Line Boys & Girls Club Lead G |  |              |        |         | 1,207,027 |
| Elevate, Inc.                       | P.O Box 508               |                                         |  |              |        |         | 250,000   |
| Fishers IN 46038                    | 501(c)(3)                 | - 2015 Mega Meal Madness food packing   |  |              |        |         | 88,250    |
| Make-A-Wish Foundation              | 7330 Woodland Drive       | Suite                                   |  |              |        |         | 85,737    |
| Indianapolis IN 46278               | 501(c)(3)                 | Pu 2014 Finish Line Employee Campaign   |  |              |        |         | 73,730    |
| P.F. Bresee Foundation              | 184 South Bimini Place    |                                         |  |              |        |         | 70,000    |
| Los Angeles CA 90004                | 501(c)(3)/17              | Transform Bresees Make-Shift Parking    |  |              |        |         | 40,000    |
| Indianapolis Parks Foundation       | 615 Alabama Street        | #119                                    |  |              |        |         | 30,000    |
| Indianapolis IN 46204               | 501(c)(3)                 | Pu 2013 Employee Matching Campaign - Du |  |              |        |         | 29,208    |
| Nine 13, Inc.                       | 2841 Sunmeadow Way        |                                         |  |              |        |         | 28,000    |
| Indianapolis IN 46228               | 501(c)(3)                 | Pu Kids Riding Bikes                    |  |              |        |         | 25,000    |
| Brainy Camps Association            | 111 Michigan Ave.         | NW                                      |  |              |        |         | 7,000     |
| Washington DC 20010                 | 501(c)(3)/50              | Sasha's Finish Line: Brainy Camps' R    |  |              |        |         | 5,000     |
| San Antonio Youth                   | 1514 W. Cesar E Chavez Bl |                                         |  |              |        |         | 5,000     |
| San Antonio TX 78207                | 501(c)(3)/50              | Triumph Club                            |  |              |        |         | 5,000     |
| YMCA of El Paso                     | 810 Wyoming Ave.          |                                         |  |              |        |         | 5,000     |
| El Paso TX 79902                    | 501(c)(3)/50              | Youth Sports                            |  |              |        |         | 5,000     |
| True Friends                        | 10509 108th St.           | NW                                      |  |              |        |         | 5,000     |
| Annandale MN 55302                  | 501(c)(3)/17              | Accessible Ropes Challenge Course       |  |              |        |         | 5,000     |
| The Indianapolis Public Library Fou | 2450 N. Meridian Street   |                                         |  |              |        |         | 5,000     |
| Indianapolis IN 46206               | 501(c)(3)                 | Pu Library Night at Victory Field       |  |              |        |         | 5,000     |
| Allegro Foundation                  | 419 Ardmore Road          |                                         |  |              |        |         | 5,000     |
| Charlotte NC 28209                  | 501(c)(3)/17              | Free Weekly Movement Education Class    |  |              |        |         | 5,000     |
| Boys & Girls Club of the CSRA       | 206 Milledge Road         |                                         |  |              |        |         | 5,000     |
| Augusta GA 30904                    | 501(c)(3)/17              | Triple Play                             |  |              |        |         | 5,000     |
| Camp Laurel Foundation, Inc.        | 75 S. Grand Avenue        |                                         |  |              |        |         | 5,000     |
| Pasadena CA 91105                   | 501(c)(3)/17              | 2015 Camp Laurel Summer Camp            |  |              |        |         | 5,000     |
| Camp Smile-a-Mile                   | 1510 5th Avenue South     |                                         |  |              |        |         | 5,000     |
| Birmingham AL 35233                 | 501(c)(3)/17              | Programs for Children with Cancer       |  |              |        |         | 5,000     |
| Catch the Stars Foundation          | PO Box 53557              |                                         |  |              |        |         | 5,000     |
| Indianapolis IN 46253               | 501(c)(3)/17              | Catch the Stars Foundatio Fintness C    |  |              |        |         | 5,000     |

## Federal Statements

Statement 13 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

| Name                                |  | Address                   |                                      | Relationship | Status | Purpose | Amount |
|-------------------------------------|--|---------------------------|--------------------------------------|--------------|--------|---------|--------|
| Address                             |  |                           |                                      |              |        |         |        |
| Damar Services                      |  | 6067 Decatur Boulevard    |                                      |              |        |         |        |
| Indianapolis IN 46241               |  | 501(c)(3)/50              | Indy Twisters Special Hockey         |              |        |         | 5,000  |
| Down Syndrome Association of Charlo |  | PO Box 34787              |                                      |              |        |         |        |
| Charlotte NC 28234                  |  | 501(c)(3)/17              | DSAGC Camp Horizon                   |              |        |         | 5,000  |
| Family Support Network              |  | 1015 S. Placentia Avenue  |                                      |              |        |         |        |
| Fullerton CA 92831                  |  | 501(c)(3)/17              | Camp TLC                             |              |        |         | 5,000  |
| Florida Disabled Outdoors Associati |  | 2475 Apalachee Pkwy Suite |                                      |              |        |         |        |
| Tallahassee FL 32301                |  | 501(c)(3)/17              | SportsAbility                        |              |        |         | 5,000  |
| Greater Ithaca Activities Center, I |  | 301 West Court Street     |                                      |              |        |         |        |
| Ithaca NY 14850                     |  | 501(c)(3)/50              | Rashad Richardson Summer Basketball  |              |        |         | 5,000  |
| Happy Hollow Children's Camp        |  | 615 North Alabama Street  |                                      |              |        |         |        |
| Indianapolis IN 46204               |  | 501(c)(3)/17              | 2014 City Camp                       |              |        |         | 5,000  |
| Hear Indiana                        |  | 4740 Kingsway Drive Suite |                                      |              |        |         |        |
| Indianapolis IN 46205               |  | 501(c)(3)/17              | Hear Indiana's Listening and Spoken  |              |        |         | 5,000  |
| Lincoln Teammates Mentoring Program |  | 6801 O Street             |                                      |              |        |         |        |
| Lincoln NE 68510                    |  | 501(c)(3)/17              | Abbott Summer Camp Activity          |              |        |         | 5,000  |
| Little Red Door Cancer Agency       |  | 1801 North Meridian Stree |                                      |              |        |         |        |
| Indianapolis IN 46202               |  | 501(c)(3)/50              | Camp Little Red Door                 |              |        |         | 5,000  |
| Masters City Little League          |  | 1951 Phinizy Road         |                                      |              |        |         |        |
| Augusta GA 30906                    |  | 501(c)(3)/17              | Project Scholar                      |              |        |         | 5,000  |
| NorCal Services for Deaf and Hard o |  | 4708 Roseville Road Suite |                                      |              |        |         |        |
| North Highlands CA 95660            |  | 501(c)(3)/17              | Camp Grizzly                         |              |        |         | 5,000  |
| Philly Girls in Motion              |  | 40 W. Turnbull Avenue     |                                      |              |        |         |        |
| Havertown PA 19083                  |  | 501(c)(3)/17              | Philly Girls in Motion Sports Progra |              |        |         | 5,000  |
| Phoenix Children's Hospital Foundat |  | 2929 E. Camelback Suite 1 |                                      |              |        |         |        |
| Phoenix AZ 85016                    |  | 501(c)(3)/17              | Phoenix Childrens Hospital Camp Rain |              |        |         | 5,000  |
| Playworks Education Energized       |  | 2605 E. 25th Street       |                                      |              |        |         |        |
| Indianapolis IN 46218               |  | 501(c)(3)/17              | Powered by Playworks Program Support |              |        |         | 5,000  |
| Project C.A.M.P., Inc.              |  | 1501 Burnley Road         |                                      |              |        |         |        |
| Scottsville KY 42164                |  | 501(c)(3)/17              | Camp Experience for Critically Ill C |              |        |         | 5,000  |
| Project Goal                        |  | 79 Savoy Street           |                                      |              |        |         |        |
| Providence RI 02906                 |  | 501(c)(3)/50              | Project GOAL 2016                    |              |        |         | 5,000  |
| Ronald McDonald House Charities of  |  | 1250 Lyman Place          |                                      |              |        |         |        |
| Los Angeles CA 90029                |  | 501(c)(3)/17              | Camp Ronald McDonald for Good Times  |              |        |         | 5,000  |
| Roundup River Ranch                 |  | PO Box 8589               |                                      |              |        |         |        |
| Avon CO 81620                       |  | 501(c)(3)/17              | Challenge Course Program Support     |              |        |         | 5,000  |

## Federal Statements

Statement 13 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

| Name<br>Address                                              | Relationship               | Address<br>Status | Purpose                              | Amount |
|--------------------------------------------------------------|----------------------------|-------------------|--------------------------------------|--------|
| Shining Stars Foundation<br>Tabernash CO 80478               | PO Box 730                 | 501(c)(3)/17      | 2016 Winter Games                    | 5,000  |
| Soccer Without Borders<br>Cambridge MA 02138                 | 9 Waterhouse Street        | 501(c)(3)/17      | Continuation of SWB Boston Winter Pr | 5,000  |
| Spina Bifida Association of Western<br>Mars PA 16046         | 1158 Dutilh Road           | 501(c)(3)/17      | FireFly Camps and Retreats Program   | 5,000  |
| Student Run America<br>Tarzana CA 91356                      | 5252 Crebs Avenue          | 501(c)(3)/17      | Training for a Marathon ... Training | 5,000  |
| The Channel 3 Kids Camp<br>Andover CT 06232                  | 73 Times Farm Road         | 501(c)(3)/17      | Inclusive Overnight Camp             | 5,000  |
| The Children's Home of Cincinnati<br>Cincinnati OH 45227     | 5050 Madison Road          | 501(c)(3)/17      | Camp-I-Can                           | 5,000  |
| The Painted Turtle<br>Santa Monica CA 90401                  | 1300 4th Street Suite 300  | 501(c)(3)/17      | Medical Specialty Camp Program       | 5,000  |
| Thomas Chew Memorial Boys and Girls<br>Fall River MA 02723   | 803 Beford Street P.O. Box | 501(c)(3)/50      | Camp Welch Athletic Programs         | 5,000  |
| Tri-State Bleeding Disorder Foundat<br>Cincinnati OH 45203   | 635 W. Seventh Street Sui  | 501(c)(3)/17      | Camp NJOYITALL                       | 5,000  |
| Turnstone Center<br>Fort Wayne IN 46805                      | 3320 North Clinton Street  | 501(c)(3)/17      | Turnstone's Adaptive Sports and Recr | 5,000  |
| Via Services, Inc.<br>Santa Clara CA 95050                   | 13861 Stevens Canyon Road  | 501(c)(3)/17      | Water World Camp for Youth with Disa | 5,000  |
| YMCA of Cumberland<br>Cumberland MD 21502                    | 601 Kelly Road             | 501(c)(3)/50      | Cumberland YMCA's Middle School Girl | 4,943  |
| Patachou<br>Indianapolis IN 46205                            | 4923 North College Ave. S  | 501(c)(3)/17      | Whole Meals & Healthy Choice Educati | 4,705  |
| Maine-Niles Association of Special<br>Morton Grove IL 60053  | 6820 Dempster Street       | 501(c)(3)/17      | Special Olympic Young Athletes       | 4,200  |
| Girls on the Run of New Orleans<br>New Orleans LA 70115      | 5500 Prytania #528         | 501(c)(3)/17      | Girls on the Run of the Rockies      | 4,000  |
| Muscular Dystrophy Association<br>Downers Grove IL 60515     | 1100 31st Street #210      | 501(c)(3)/17      | MDA Summer Camp                      | 4,000  |
| Aaron's Acres<br>Lancaster PA 17601                          | 102 White Oak Drive        | 501(c)(3)/17      | Summer Camp Program                  | 3,050  |
| Girls on the Run of the Rockies<br>Greenwood Village CO 8012 | 5565 South Madison Way     | 501(c)(3)/17      | Girls on the Run of the Rockies      | 3,000  |

## Federal Statements

Statement 13 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

| Name                                |                         | Address                   |              | Relationship                            | Status | Purpose | Amount    |
|-------------------------------------|-------------------------|---------------------------|--------------|-----------------------------------------|--------|---------|-----------|
| Cancer Support Community            | Indianapolis IN 46268   | 5150 West 71st Street     | 501(c)(3)/17 | Kids Connect Expansion: Let's Move!     |        |         | 2,500     |
| Muscular Dystrophy Association      | (MT) Billings MT 59102  | 2132 Broadwater Ave. Ste. | 501(c)(3)/17 | Montana Muscular Dystrophy Summer Ca    |        |         | 2,500     |
| Perspectives, Inc.                  | St. Louis Park MN 55426 | 3381 Gorkhna Avenue       | 501(c)(3)/17 | Basketball in the Park                  |        |         | 2,500     |
| Streamline Miami Foundation         | Miami FL 33125          | 3684 NW 19th Tier         | 501(c)(3)/50 | Earlington Flag Football                |        |         | 2,400     |
| Mason City Family YMCA              | Mason City IA 50401     | 1840 South Monroe Avenue  | 501(c)(3)/17 | Inclusion Project                       |        |         | 2,000     |
| Coburn Place                        | Indianapolis IN 46205   | 604 East 38th Street      | 501(c)(3)    | Pu Room dedication on behalf of Finish  |        |         | 1,500     |
| Epic Center                         | Milwaukee WI 53215      | 1236 South Layton Bouleva | 501(c)(3)/17 | ECCO Youth Soccer League                |        |         | 1,500     |
| Indy Thunder                        | Indianapolis IN 46220   | 6010 Winnpeny Land        | 501(c)(3)    | Beep Ball                               |        |         | 1,500     |
| The Shining Stars Foundation        | Tabernash CO 80478      | PO Box 730                | 501(c)(3)/17 | 2016 Winter Games                       |        |         | 1,010     |
| Brooke's Place for Grieving Childre | Indianapolis IN 46240   | 50 East 91st Street Suite | 501(c)(3)/17 | Finish Line Cares Award - November 2    |        |         | 1,000     |
| Cystic Fibrosis Foundation - Indian | Indianapolis IN 46260   | 1261 W. 86th Street Suite | 501(c)(3)    | Pu Great Strides for Cystic Fibrosis    |        |         | 1,000     |
| Dedham Community Association        | Dedham MA 02026         | 671 High Street           | 501(c)(3)/17 | DCH Summer Camp Scholarship Program     |        |         | 1,000     |
| La Plaza Inc                        | Indianapolis IN 46226   | 8902 E. 38th Street       | 501(c)(3)/17 | Finish Line Cares Award - July 2014     |        |         | 1,000     |
| Resort Charity Events, Inc          | French Lick IN 47432    | 8670 W. State Rd 56       | 501(c)(3)    | Pu "Hope Starts Here" for Riley Childre |        |         | 500       |
| Total                               |                         |                           |              |                                         |        |         | 1,999,025 |