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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

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Open to Public Inspection

	endar year 2015, or tax year beginning	, 2015	, and ending		
Name of fo				A Employer identification num	nber
The I	<u>Michael Fand Jody J Petrie</u> nd street (or PO box number if mail is not delivered to street a	<u>Foundation, inc</u>	Room/suite	46-4616018 Telephone number (see instru	ictions)
	North Meridian Street		400	(317) 569-742	•
City or tow	rn, state or province, country, and ZIP or foreign postal code		1400		
Carme	e <u>l</u>	IN	46032	C If exemption application is	pending, check here 🕒 📘
G Che	eck all that apply Initial return	Initial return of a forme	er public charity	D 1 Foreign organizations, che	ck hore
	Final return	Amended return	'	I i oreign organizations, ener	
	Address change	Name change		2 Foreign organizations mee here and attach computation	ting the 85% test, check
H Che	eck type of organization: X Section 501	(c)(3) exempt private for	ındation	nere and allacir computation	
	Section 4947(a)(1) nonexempt charitable trus	t Other taxable p	rivate foundation	E If private foundation status	
		ounting method X C	ash Accrual	under section 507(b)(1)(A),	, check here ▶
•		Other (specify)		F If the foundation is in a 60-	month termination
▶ \$		column (d) must be on c	ash basis)	under section 507(b)(1)(B)	check here 🟲 📙
Part I	_	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	ıncome	income	for charitable
	sarily equal the amounts in column (a)				purposes (cash basis only)
	(see instructions))	F.C. 007			,,,
SCANNED	1 Contributions, gifts, grants, etc, received (attach schedule)	56,807.			
<u></u>	2 Ck I if the foundation is not required to attach Sch B				· · · · · · · · · · · · · · · · · · ·
Ź	3 Interest on savings and temporary cash investments	123.	123	3.	
<u> </u>	4 Dividends and interest from securities				
	5 a Gross rents				
≥	or (loss) • • • •				
⇒'n₽	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all				
$\bar{\mathbf{v}}$	assets on line 6a · · ·				
Æ	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain				
<u>©</u> Ü	9 Income modifications				
AFK Z WZ ZWB	10 a Gross sales less returns and				
	allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (atlach schedule)				
	11 Other income (attach schedule)				
	42 Total Add Inno 4 through 44	EC 030	100		
	12 Total Add lines 1 through 11	56,930.	123	·	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
A	16 a Legal fees (attach schedule)				
Ď M	b Accounting (ees (attach sch)				
ı N	c Other prof lees (attach sch)				·
o ï	17 Interest	O			
P S E T R R	18 Taxes (attach schedole)(see instrs)	<u>sc</u>			
O P S T R A T	19 Depreciation Tartech APR I 8 2016 schedule) and depletion	SO-S			
l i	20 Occupancy	<u> </u>		-	
N V G E	21 Travel, conferences an meetings		· · · · · · · · · · · · · · · · · · ·	-	
A E	22 Printing and publications				· - , · · · · · · · · · · · · · · · · · ·
A E X P E N	23 Other expenses (attach schedule)				
N E					
S E S	24 Total operating and administrative expenses. Add lines 13 through 23 · · · · · ·				
5	25 Contributions, gifts, grants paid	75,255.			75,255.
	26 Total expenses and disbursements.	73,233.			13,233.
	Add lines 24 and 25 · · · · · · · · · · · ·	75,255.			75,255.
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-18,325.		!	
	b Net investment income (if negative, enter -0-)	10,020.	123	3.	
	C Adjusted net income (if negative, enter -0-)			· · · -	
			•		





Part II Balance Sheets

Page 2

. 4,1		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
,	1	Cash — non-interest-bearing	18,618.	293.	293.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)		-	
	7	Other notes and loans receivable (attach sch)			
A		Less allowance for doubtful accounts			
ASSET	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges		-	
S	10 a	Investments — U.S. and state government obligations (attach schedule)			
	b	Investments — corporate stock (attach schedule)			
		: Investments — corporate bonds (attach schedule)			
		Investments – land, buildings, and equipment: basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
				·	
		Land, buildings, and equipment basis		·	
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers -		·	
		see the instructions. Also, see page 1, item I)	18,618.	293.	293.
ŀ	17	Accounts payable and accrued expenses			4
A	18	Grants payable			1
B	19	Deferred revenue		<u>-</u> .	1
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			4
I T	21	Mortgages and other notes payable (attach schedule)			4
1	22	Other liabilities (describe	-	· · · · · · · · · · · · · · · · · · ·	4
	23	Total liabilities (add lines 17 through 22)			-
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			
N F E U T N	25	Temporarily restricted			1
ם	26	Permanently restricted			
A B S A E A		Foundations that do not follow SFAS 117, check here · A A A A A A A A A A A A A A A A A A			
E L T A	27	Capital stock, trust principal, or current funds			
S N	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	18,618.	293.]
RS	30	Total net assets or fund balances (see instructions)	18,618.	293.]
	31	Total liabilities and net assets/fund balances (see instructions).	18,618.	293.	
Par	t 111 /	Analysis of Changes in Net Assets or Fund Balance	es		
1	Total end-c	net assets or fund balances at beginning of year — Part II, column (a properties of year figure reported on prior year's return)	a), line 30 (must agree w	nth	18,618.
2	Enter	r amount from Part I, line 27a		2	-18,325.
3		increases not included in line 2 (itemize)			10,323.
4		lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·		4	293.
5	_				
6	Total	ases not included in line 2 (itemize)	art II, column (b), line 30	6	293.
BAA		TEEA0202 10			Form 990-PE (2015)

Beginning of year

(a) List and describ	be the kind(s) of property sold (e.g., real use, or common stock, 200 shares MLC	estate,	(b) How acqui	se (mo, day, yr)	(d) Date sold (mo , day, yr)
1a			D — Donaid	911	
b				-	
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) mi	
a					
b					
С					
d					
е					
Complete only for assets show	wing gain in column (h) and owned by th	e foundation on 12/31/69		(1) Gains (Co	l (h)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any		gain minus col (k), b than -0-) or Losses (fr	
a					
b					
С					
d					
е					
2 Capital gain net income or (ne	et capital loss) If gain, also	enter in Part I, line 7 er -0- in Part I, line 7		2	
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) an	d (6):			
	e 8, column (c) (see instructions) If (loss			3	
Part V Qualification Und	der Section 4940(e) for Reduce	ed Tax on Net Investr	nent Inco	me	_
	this part blank ection 4942 tax on the distributable amou alify under section 4940(e) Do not comp		eriod?	Yes	No
1 Enter the appropriate amount	t in each column for each year; see the ii	nstructions before making ai	ny entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use ass	ets ((d) Distribution (col (b) divided by c	
2014	36,475.				
2013					
2012			_		
2011					
2010		,			
2 Total of line 1, column (d) .				2	
Average distribution ratio for number of years the foundation	the 5-year base period — divide the total on has been in existence if less than 5 yo	on line 2 by 5, or by the ears	[3	
4 Enter the net value of noncha	aritable-use assets for 2015 from Part X,	line 5		4	23,485.
5 Multiply line 4 by line 3				5	
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)			6	1.
7 Add lines 5 and 6				7	1.
	from Part XII, line 4		L	8	75,255.
If line 8 is equal to or greater	than line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1%	tax rate See the	

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uction	s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here • and enter 'N/A' on line 1					
٠	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1				1.
	check here . ► X and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	3 Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>1.</u> 0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5				1.
6	Credits/Payments:					
а	2015 estimated tax pmts and 2014 overpayment credited to 2015					
	Exempt foreign organizations — tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6 c					
	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d	7				
8	Enter any penalty for underpayment of estimated tax. Check here	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	\vdash			1.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				0.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax	11				
	Statements Regarding Activities			-		
					V	- N
1 a	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?			1 a	Yes	No
				ı a		_ X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities					
С	Did the foundation file Form 1120-POL for this year?			1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation > \$ (2) On foundation managers > \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on					
	foundation managers · · · · ▶ \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? $\dots \dots \dots$			2		Χ_
	If 'Yes,' attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		,	4 a		X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b		
				5		Х
	If 'Yes,' attach the statement required by General Instruction T		İ			Ĥ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV			7	X	
	Enter the states to which the foundation reports or with which it is registered (see instructions)				^	
	IN - Indiana		-			
			-			
0	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	(5)				
•	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part X	₩.		9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names					
	and addresses			10	х	ı
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Form	n 990-PF (2015) The Michael F and Jody J Petrie Foundation, Inc. 46	<u>-46160</u> 18	F	Page 5
	री ऑक्रिक 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		Х
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)		2	х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	3 X	
	Website address			
14	The books are in care of Michael Petrie Telephone no	(317) 56	5 <u>9-</u> 742	<u> </u>
	11555 N. Heridian Sc Calmer IN _ IN _ IV	<u> </u>		
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?		Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pa	Statements Regarding Activities for Which Form 4720 May Be Required			
_	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes	s XNo		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes		ŀ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	s XNo		
	(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)?	s XNo		
	(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.)	s XNo		
k	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)?	1	l b	
	Organizations relying on a current notice regarding disaster assistance check here	.►		
C	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?	1	l c	X
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 $4942(j)(5)$)			
á	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?	s XNo		
	If 'Yes,' list the years ► 20 , 20 , 20			
ı	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)		2 b	
•	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			
3 8	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	s X No		
ı	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)		B b	
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	-		
	chantable purposes:		а	X
ı	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?		Ь	v
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	•	1 01111 -	1: (

Form 990-PF (2015) The Michael F and Joo	dy J Petrie Founda	ation, Inc.	46-461	16018 Page 6				
Part VII Statements Regarding Activiti	es for Which Form		uired (continued)					
5 a During the year did the foundation pay or incur at(1) Carry on propaganda, or otherwise attempt to	•	ection 4945(e))?	Yes 🖂	No				
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?								
(3) Provide a grant to an individual for travel, stu	dy, or other similar purpo	oses?		No				
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions) .	a charitable, etc, organiz	zation described	Yes X	No				
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	charitable, scientific, lite of cruelty to children or ar	rary, or nimals? • • • • • • • • • • • • • • • • • • •	· · · · Yes X	No				
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b				
Organizations relying on a current notice regardi								
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsibulif 'Yes,' attach the statement required by Regulation	ility for the grant?	<i>.</i>	· · · · Yes	No				
6 a Did the foundation, during the year, receive any find on a personal benefit contract?	unds, directly or indirectl	y, to pay premiums	· · · · Yes X	No				
b Did the foundation, during the year, pay premium	is, directly or indirectly, o	n a personal benefit con		6 b X				
If 'Yes' to 6b, file Form 8870		Any abaltas termanation	□v					
7 a At any time during the tax year, was the foundation b If 'Yes,' did the foundation receive any proceeds	on a party to a pronibited or have any net income a	itax shelter transaction?	····· Yes X	No 7 b				
Part VIII Information About Officers, D								
and Contractors	·			<u> </u>				
1 List all officers, directors, trustees, foundation		· · · · · · · · · · · · · · · · · · ·		<u> </u>				
(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				
Michael F. Petrie 11555 N. Meridian St. Suite 400 Carmel IN 46032	President and Treasurer	0.	0.	0.				
Jody J. Petrie								
11555 N. Meridian St. Suite 400 Carmel IN 46032	Vice President and Secretary 1.50	0.	0.	0.				
			·					
2 Compensation of five highest-paid employee			·	T				
(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			<u> </u>					
		<u></u>						
Total number of other employees paid over \$50,000 .			<u> </u>	None				

	·	
Form Part	990-PF (2015) The Michael F and Jody J Petrie Foundation, Inc. 46-461 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E 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
<u>None</u>	e	
<u></u>		
Total	number of others receiving over \$50,000 for professional services	None
Parí	Summary of Direct Charitable Activities	
List the	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
3		
4		
Parí	Summary of Program-Related Investments (see instructions)	<u> </u>
Desc	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program related investments. See meta-stices	
All other program-related investments See instructions.	
3 	
Total. Add lines 1 through 3	<u> </u>
Tetali ilia ilia ilia ilia ilia ilia ilia	

Form **990-PF** (2015)

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<u> </u>	see instructions.)	,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
	Average monthly fair market value of securities	1 a	
	Average of monthly cash balances	1 b	23,843.
	Fair market value of all other assets (see instructions)	1 c	<u> </u>
	Total (add lines 1a, b, and c)	1 d	23,843.
•	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	23,843.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	358.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	23,485.
6	Minimum investment return. Enter 5% of line 5	6	1,174.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ☐ and do not complete this part.)	founda	
1	Minimum investment return from Part X, line 6	1	1,174.
2 8	Tax on investment income for 2015 from Part VI, line 5		<u> </u>
	Income tax for 2015. (This does not include the tax from Part VI)		
(Add lines 2a and 2b	2 c	1.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,173.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,173.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,173.
Pa	रिं Qualifying Distributions (see instructions)	,	
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes [.] Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	75,255.
I	Program-related investments – total from Part IX-B	1 b	
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		
	Suitability test (prior IRS approval required)	3 a	
		3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	75,255.
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	1.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	75,254.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo qualifies for the section 4940(e) reduction of tax in those years.	undation	
BAA			Form 990-PF (2015)

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7 · · · · · · · · · · · · · · · · · ·				1,173.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			907.	
b Total for prior years 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2015				
a From 2010				
b From 2011 0 .				
c From 2012 0 .				
d From 2013 0 .				
e From 2014				
f Total of lines 3a through e	36,475.			
4 Qualifying distributions for 2015 from Part				
XII, line 4: 5 75, 255.				
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				·
e Remaining amount distributed out of corpus .	75,255.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the				
(ii an amount appears in column (a), the same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:	111 500			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	111,730.		<u> </u>	,
b Prior years' undistributed income Subtract line 4b from line 2b		,		
c Enter the amount of prior years' undistributed	' 	0.		
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		0.		
		·		" -
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			907.	
				· · · · · · · · · · · · · · · · · · ·
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2016	.[1,173.
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)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	. 111,730.			
10 Analysis of line 9				
a Excess from 2011 0 .	_			
b Excess from 2012 0 .	_			
c Excess from 2013 0 .	-			
d Excess from 2014 36, 475.	1			
e Excess from 2015				

Form 990-PF (2015) The Michael F and Jo	dy J Petrie I	Foundation, Inc	c	46-4616018	8 Page 10
Part XIV Private Operating Foundati					N/A
1 a If the foundation has received a ruling or determined is effective for 2015, enter the date of the ruling	ng		• • • • • • • • •	· · <u>· ·</u> · · · · · • •	T
b Check box to indicate whether the foundation		ing foundation descr		4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b 85% of line 2a					
© Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) · · · · · · · ·					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information assets at any time during the	(Complete this e year – see ir	s part only if the nstructions.)	e foundation ha	d \$5,000 or more	e in
1 Information Regarding Foundation Manage					· · · · · · · · · · · · · · · · · · ·
a List any managers of the foundation who have close of any tax year (but only if they have co	e contributed more ntributed more tha	than 2% of the total n \$5,000). (See sect	contributions receiv ion 507(d)(2).)	ed by the foundation b	efore the
Michael F. Petrie					
Jody J. Petrie	400/ an magne of th	a stack of a second	tion for an aqually la	and an of the sum	anabin of
b List any managers of the foundation who own a partnership or other entity) of which the foun N/A	ndation has a 10%	or greater interest	non (or an equally la	irge portion of the own	ersnip or
2 Information Regarding Contribution, Gran	Cife Loon Sobo	Jarohin eta Brezz	amar		
Check here X if the foundation only ma requests for funds If the foundation makes gromplete items 2a, b, c, and d	kes contributions to	preselected charita	ible organizations ar		
a The name, address, and telephone number of	r e-mail address of	the person to whom	n applications should	be addressed	
Michael F. Petrie					
11555 N. Meridian Street, S					
Carmel	IN 4603		17) 569-7420		
b The form in which applications should be sub N/A	mitted and informa	ition and materials th	ney snould include		
c Any submission deadlines					
d Any restrictions or limitations on awards, such N/A	h as by geographic	al areas, charitable	fields, kinds of institu	itions, or other factors	
				 	

Part XXV Supplementary Information (continued)

Name and address (home or business) a Paid during the year Ryan Baker Foundation 6165 Guilford Avenue Indianapolis IN 46220 United Catholic Appeal 1400 N. Meridian Street Indianapolis IN 46290 Indianapolis Indiana	Paginiant	If recipient is an individual,	Foundation		
A Paid dumng the year Ryan Baker Foundation 6165 Guilford Avenue Indianapolis IN 46202 Indianapolis IN 46202 Indianapolis IN 46203 Indianapolis IN 46203 Indianapolis IN 46204 Indianapolis IN 46205 Indianapolis IN 46206 Indianapolis IN 46207 Indianapolis IN 46208	Recipient		status of	ruipose oi grant or	Amount
Ryan Baker Foundation ditof5 Guilford Avenue Indianapolis IN 46220 United Catholic Appeal 1400 N. Meridian Street Indianapolis IN 46202 St. Vincent Foundation RAG2 Harcourt Road, St. 210 Indianapolis IN 46260 JORF JORF JORG JORF JORG JORG JORG JORG JORG JORG JORG JORG		substantial contributor	recipient		
Indianapolis IN 46200 United Catholic Appeal 1400 N. Meridian Street Indianapolis IN 46202 St. Vancent Foundation 3620 Harcourt Road, St. 210 Indianapolis IN 46200 JORF 10401 N. Meridian, Suite 150 Indianapolis IN 46200 Little Sisters of the Poor 2345 W. 86th Street Indianapolis IN 46260 ID Foundation 10 Foundation 11 Foundation 12 Foundation 12 Foundation 13 Support research to cure juvenile diabetes 14 Support nursing home elderly. 15 Support nursing home elderly. 16 Support aducation at Indiana University through 16 The Hardon PC 17 Foundation 18 Foundation 19 Foundation 19 Foundation 10 Foundation 10 Foundation 10 Foundation 10 Foundation 10 Foundation 11 Foundation 12 Foundation 12 Foundation 12 Foundation 13 Support die operations 14 St. Vicent hospital. 15 Creation of study lab for medicial professionals 15 to vicent hospital. 15 Creation of study lab for medicial professionals 15 Creation of study lab for medicial professionals 15 to vicent hospital. 15 Creation of study lab for medicial professionals 15 Cure tion of study lab for medicial professionals 16 The medicial professionals 16 The medicial professionals 16 The medicial professionals 17 Octon professi				m	
Indianapolis IN 46220 United Catholic Appeal 1400 N. Meridian Street Indianapolis IN 46202 St. Vincent Foundation 8402 Harcourt Road, St. 210 JDRF 10401 N. Meridian, Sutte 150 Indianapolis IN 46260 JDRF 10401 N. Meridian, Sutte 150 Indianapolis IN 46260 Indianapolis IN 46260 IDRF 10401 N. Meridian, Sutte 150 Indianapolis IN 46260 IDRF 1050 Harcourt Road, St. 210 Indianapolis IN 46260 IDRF 1050 Harcourt Road, St. 210 Indianapolis IN 46260 IDRF 1050 Harcourt Road, St. 210 Indianapolis IN 46260 IDRF 1050 Harcourt Road, St. 210 Indianapolis IN 46260 IDRF 1050 Harcourt Road, St. 210 Indianapolis IN 46260 IDRF 1050 Harcourt Road, St. 210 Indianapolis IN 46202 IDRF 1050 Harcourt Road, St. 210 IDRF 1050 Harcourt Road, St. 21					
United Catholic Appeal 1400 N. Meridian Street Indianapolis IN 46202 St. Vincent Foundation APR 10401 N. Meridian Street Indianapolis IN 46260 JDRF 10401 N. Meridian, Suite 150 Indianapolis IN 46290 Little Sisters of the Poor 2436 W. 86th Street Indianapolis IN 46260 ID FOUNDATION IN Foundation FO Box 500 Bloomington IN 47402 Holy Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Chidren's Museum 3000 N. Meridian Street Indianapolis IN 46208 FC Support deucation at Indiana University through the Kelly School of business. Holling and Indianapolis IN 46202 Wounded Warrior Project Support the treatment of wounded servicemen. 1,000 Chicago IL 60606 Chidren's Museum 3000 N. Meridian Street Indianapolis IN 46208 FC Framily Fromote family Indianapolis IN 46208 FC Framily F			DE	- 1	1 000
Indianapolis IN 46202 St. Vincent Foundation 8402 Marcourt Road, St. 210 Indianapolis IN 46260 JDRF 10401 N. Meridian, Suite 150 Indianapolis IN 46260 IDRF 10401 N. Meridian, Suite 150 Indianapolis IN 46260 IDRF 10401 N. Meridian, Suite 150 Indianapolis IN 46260 IDRF 10501 Meridian Street Indianapolis IN 46260 ID Foundation FO Box 500 ID Foundation FO Box 500 IBloomington IN 47402 IGO Family Shelter 907 N. Holmes Avenue Indianapolis IN 46220 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement To support the operations for betwich study lab for medical professionals for professionals for cure profession Support deuction for the first	-		F	Index	1,000
Indianapols St. Vincent Foundation St. Vincent Foundation 8402 Harcourt Road, St. 210 For medical professionals 10 A6260 JBF 1001 N. Meridian, Suite 150 Indianapols IN 46290 Little Sisters of the Poor 2345 W. 86th Street Indianapols IN 46260 JB POR Box 500 Bloomington IN 47402 Holy Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 Seeline 3a statement PC For Indianapolis IN 46208 Seeline 3a statement PC For Indianapolis IN 46208 Seeline 3a statement PC For Indianapolis IN 46208 POF Ind				To support the operations	
St. Vancent Foundation 8402 Harcourt Road, St. 210 Indianapolis IN 46260 JDRF 10401 N. Meridian, Suite 150 Indianapolis IN 46290 Little Sisters of the Poor 2345 W. 86th Street Indianapolis IN 46260 IU Foundation PO Box 500 Bloomington Bloomington For N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total			PC		2,625
### Manageria M	St. Vincent Foundation				_,
JORF 10401 N. Meridian, Suite 150 Indianapolis IN 46290 Little Sisters of the Poor 2345 W. 86th Street Indianapolis IN 46260 IU Foundation PO Box 500 Bloomington IN 47402 Holly Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicken's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3e statement Total Total Support research to cure juvenile daabetes Support nursing home that cares for low-income that care for low-income that	8402 Harcourt Road, St. 210			I – I	
Indianapolis IN 46290 Little Sisters of the Poor 2345 W. 86th Street Indianapolis IN 46260 ID Foundation PO Box 500 Bloomington IN 47402 Holy Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Chiclagen's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement PC cure juvenile diabetes Support education at Indianapolis of low-income elderly. 25i Support education at Indianapoli the Kelly School of business. 5,001 Holmes Avenue Homeless shelter for the poor. 1,001 Support the treatment PC of wounded servicemen. 1,001 PC the poor. 25i Support education at Indianapoli the Kelly School of business. 5,001 Homeless shelter for the poor. 1,001 PC the poor. 25i Support education at Indianapolis Support the Meridian Special the PC of wounded servicemen. 25i Support education at Indianapolis Support the Meridian Special the Relly School of Business. 25i Support education at Indianapolies PC elderly. 25i Support education at Indianapolis Support the Meridian Special the Relly School of Business. 25i Support education at Indianapolies PC elderly. 25i Support education at Indianapolis Support the Meridian Special	Indianapolis IN 46260 JDRF		POF	at St. Vicent hospital.	5,000.
Little Sisters of the Poor 2345 W. 86th Street Indianapolis IN 46260 IU Foundation PC Box 500 Bloomington IN 47402 Bloomington IN 47402 Bloomington IN 46222 Brown Blow Brain School Bloomington IN 46222 Brown Br	10401 N. Meridian, Suite 150			Support research to	
2345 W. 86th Street Indianapolis IN 46260 ID Foundation FO Box 500 Bloomington IN 47402 Holy Family Shelter 907 N. Holmes Avenue 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total	Indianapolis IN 46290		PC	1	250.
Indianapolis IN 46260 IU Foundation FO Box 500 Bloomington IN 47402 Holly Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 Support the Kelly School of business. FC the poor. Support the treatment of wounded servicemen. 1,000 PC from the poor. 1,000 PC the poor. 1,000 PC from the poor. 1,000 PC from the poor. 1,000 PC from the family Promote family Indianapolis IN 46208 See Line 3a statement Total. Total. Total. Total. Total.	Little Sisters of the Poor		Ì	1	
IU Foundation PO Box 500 Bloomington IN 47402 Holy Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total					
PO Box 500 Bloomington IN 47402 Holy Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total	-		PC		250.
Bloomington IN 47402 Holy Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total				1	
Holy Family Shelter 907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total			IDOE	,	F 000
907 N. Holmes Avenue Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total			POF	the kerry school of business.	5,000.
Indianapolis IN 46222 Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total				Homeless shelter for	
Wounded Warrior Project 230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total			PC		1,000.
230 W. Monroe St., Suite 200 Chicago IL 60606 Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total					_,
Children's Museum 3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total b Approved for future payment Promote family learning experiences 30,000 29,130	230 W. Monroe St., Suite 200			Support the treatment	
3000 N. Meridian Street Indianapolis IN 46208 See Line 3a statement Total	Chicago IL 60606		PC	of wounded servicemen.	1,000.
Indianapolis IN 46208 See Line 3a statement Total	Children's Museum				
Total	3000 N. Meridian Street			- 1	
Total	-		POF	learning experiences	30,000.
Total ▶ 3a 75,25! b Approved for future payment	See Line 3a statement				
b Approved for future payment					29,130
b Approved for future payment					
				3a	75,255.
Total	b Approved for future payment				
Total					
	Tatal		<u> </u>		

Part XVI-A Analysis of Income-Producing Activities

Ente	r gross	amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	(a)
•		am service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
æ	·						
Ł					 		
•	;				 		
•	' —				 		
f					 		
ç	Fees	and contracts from government agencies	-				· · · · · · · · · · · · · · · · · · ·
2		ership dues and assessments					
3	Interest	on savings and temporary cash investments			1	123.	
4		ends and interest from securities					
5		ntal income or (loss) from real estate					
		inanced property	_	_			
_		ebt-financed property					
6 7		tal income or (loss) from personal property					·
8		(loss) from sales of assets other than inventory			 		
9		come or (loss) from special events			 		
10		profit or (loss) from sales of inventory					
11		revenue:					
á	a						
ı							
•	~						
•	d				-		
12	Subto	tol Add columns (h) (d) and (o)				123.	
12	Total	tal Add columns (b), (d), and (e)					123.
		neet in line 13 instructions to verify calculations					123.
				University of Francis			
<u>ائىكا</u>	<u> </u>	Relationship of Activities to the	Accomp	isnment of Exem	pt Purpos	ies	
Lin	e No. ▼	Explain below how each activity for which inco accomplishment of the foundation's exempt pu	ome is report	ed in column (e) of Part	XVI-A contr	buted importantly to t	he
	<u> </u>	accomplishment of the foundation's exempt po	urposes (our	er than by providing fun	us for such p	urposes). (See instru	
				· · · · · · · · · · · · · · · · · · ·			
						· · · · · · · · · · · · · · · · · · ·	
			 -				
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				· · · · · · · · · · · · · · · · · · ·			
					-		

Form 990-PF (2015) The Michael F and Jody J Petrie Foundation, Inc. 46-4616018 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

•									Yes	No
described	rganization directly or I in section 501(c) of to political organization	the Code (othe	ige in any of the fol r than section 501(llowing with an c)(3) organizat	y other org	ganization section 527,				
	from the reporting fo									
										<u> X</u>
(2) Othe	r assets							1 a (2)		X
b Other trai	nsactions:									
(1) Sales	s of assets to a nonch	arıtable exemp	t organization					1 b (1)		X
(2) Purcl	hases of assets from	a noncharitable	e exempt organizat	ion				1 b (2)		X
	al of facilities, equipm									X
(4) Reim	bursement arrangem	ents						1 b (4)		X
(5) Loan	s or loan guarantees							1 b (5)		X
(6) Perfo	ormance of services o	r membership	or fundraising solic	itations				1 b (6)		X
c Sharing o	of facilities, equipment	t, mailing lists,	other assets, or pa	id employees.				1c		X
the goods	wer to any of the abo s, other assets, or ser action or sharing arra	vices given by	the reporting found	lation. If the for	undation r	eceived less tha	an fair market v	arket value of value in		
(a) Line no	(b) Amount involved		f noncharitable exempt		1			, and sharing arrar	gements	
(4) 2	(2) /	(0)			(-/		-	, -	9	
										—
			<u> </u>							
						.,			_	—
	-			··-						
ļ <u>-</u>										
									-	
						-				
	-									
describe	indation directly or inc d in section 501(c) of complete the following	the Code (othe	d with, or related to r than section 501(, one or more t c)(3)) or in sec	ax-exemp tion 527?	t organizations		XYe	s []	No
	Name of organization		(b) Type o	f organization	I	(c) Description o	f relationship		
Kenwood H			501(c)(3)	. 5.50		Common Boa			_	
Kenwood E			501 (c) (3)			Common Boa				
	<u>Place II, Inc</u> ourn Village,		Wholly owner	d 501 (a) (31	Common Boa				
	Affordable Hous		_	<u>u 501(c) (</u>		Common Boa				
Merchants	Alloldable Hou:	sing corp.	301 (C) (3)			COMMICIT BOS	itu flesi	denc		
Sign Here	enalties of perjury, I declare I and complete Declaration of	that I have examine f prepare (other tha	f 1	4-1-14	<u> </u>	Preside	est of my knowledge	May the this return preparer	IRS discus n with the shown be ructions)2	l i
Signa	ture of officer or trustee			ate	Tit				Yes	No
	Print/Type preparer's name	e	Preparer's sign	Taktire 7	_	Date	Check	if PTIN		
Paid	Scott A. Tho	man	1 ln	11/m	non	03/28/16	self-employe	P0137	3106	
Preparer	Firm's name M	ERRILL &	THOMAN, LLP)			Firm's EIN > 3	5-2028059		
Use Only	Firm's address > 9	449 PRIOR	RITY WAY W.	DRIVE, ST	re 130					
	I	NDIANAPOL	IS		IN 462	240	Phone no (317) 705-	2070	
BAA								Form 99	0-PF (2	015)

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

2015

Department of the Treasury Internal Revenue Service

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

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

Employer Identification number Name of the organization 46-4616018 The Michael F and Jody J Petrie Foundation, Inc. Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (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 33-1/3% 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)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

•			
Schedule	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part
Name of org	enization	Employe	r Identification number
The Mi	chael F and Jody J Petrie Foundation, Inc.	46-46	616018
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Michael and Jody Petrie 11555 North Meridian Street, Suite 400 Carmel IN 46032	\$ <u>50,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Rex M. Barrett 817 Clearwater Pointe Indianapolis IN 46240	\$ <u>6,807.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foun- dation status of re-	Purpose of grant or contribution	Person or Business Checkbox
	any foundation manager or substantial contributor	cipient		Amount
a Paid during the year				
St. Baldrick Foundation				Person or
1333 S. Mayflower Avenue			Childhood cancer	Business X
Monrovia CA 91016		PC	research	250.
Indiana Golf Foundation				Person or
PO Box 516			Promote golf for	Business
Franklin IN 46131		POF	youths	8,430.
Renew_Indianapolis			Fix and cleanup	Person or
202 E. Market Street			blighted properties	Business X
Indianapolis IN 46204		PC	ın Indianapolis	250.
St. Luke Catholic Church				Person or
7575 Holliday Drive East			Cotholic church	Business X
Indianapolis IN 46260 St. Mary's Child Center	<u> </u>	PC	Catholic church	500.
901 Dr. Martin Luther King St.			Promote early childhood development	Business X
Indianapolis IN 46202		PC	for the poor	500.
Harrison Center		10	Tor the poor	Person or
1505 N. Deleware Street			Promote art and	Business X
Indianapolis IN 46202		PC	art education	500.
Progress House				Person or
201 E. Shelby Street			Assist men ın	Business X
Indianapolis IN 46202		PC	recovering from addictions	1,000.
Logansport High School				Person or
1 Berry Lane		_ _		Business X
Logansport IN 46947		PC	K-12 Public education	500.
Immaculate Heart of Mary				Person or
317 E. 57 Street				Business X
Indianapolis IN 46220		PC	Catholic church	500.
Marian University		-		Person or
3200 Colds Springs Road		PC	University	Business X
Indianapolis IN 46222 Riley Childrens Hospital		PC	Treat and conduct medical	1,000.
300 South Meridian Street	-		research for children	Business X
Indianapolis IN 46204		PC PC	Tegearch for children	250.
Buckingham Foundation		10	Promote affordable	Person or
941 N. Meridian Street			housing and commmunity	Business X
Indianapolis IN 46204	_ 	PF	development	200.
St. Judes Children Hospital				Person or
262 Danny Thomas Place		-	Treat childhood	Business X
MemphisTN 38105		PC	diseases	250.
IU Foundation			To support athletic	Person or
1001 East 17th Street	_ ======		scholarships for student	Business
Bloomington IN 47408		PC	atheletes at IU	15,000.

46-4616018

2

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement			
Recipient	If recipient		

Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
Paid during the year				

Total

29,130.