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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

Open to Public Inspection

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.

For calendar year 2015 or tax year beginning January 1 2015, and ending December 31 A Employer identification number Name of foundation 47-2544074 Katharine B. Sutphin Foundation, Inc. Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 1505 N. Delaware St. 317-514-6787 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Indianapolis, IN 46202 G Check all that apply: ✓ Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here ☐ Final return □ Amended return 2. Foreign organizations meeting the 85% test, ☐ Address change ☐ Name change check here and attach computation E If private foundation status was terminated un H Check type of organization: ✓ Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at F If the foundation is in a 60-month termination end of year (from Part II, col. (c), ▶ 🔲 ☐ Other (specify) under section 507(b)(1)(B), check here line 16) ► \$ (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and expenses per (b) Net investment for charitable (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal purposes (cash basis only) income ıncome books the amounts in column (a) (see instructions)) 50,000.00 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► ☐ If the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 13.55 0 0 0 4 Dividends and interest from securities . . . 0 0 Gross rents 0 5a Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . . 8 Net short-term capital gain Λ 0 Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule). Other income (attach schedule) RECEIVED 0 11 0 12 50,013.55 0 0 Total. Add lines 1 through 11-Compensation of officers, Eirectors, trustees, etc. n 0 13 O Other employee salaries and wages R 0 4 2016 14 ol 0 0 0 Pension plans, employee benefits 0 0 15 0 10,225.50 0 0 0 16a Legal fees (attach schedule)

Operating and Administrative Expenses 0 0 0 21 Travel, conferences, and meetings 22 Printing and publications . . . O 0 0 23 Other expenses (attach schedule) 2636.11 0 0 Total operating and administrative expenses. Add lines 13 through 23 24,942.42 0 0 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 24,942.42 0 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 25,071.13 Net investment income (if negative, enter -0-) n Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Accounting fees (attach schedule) Other professional fees (attach schedule)

Interest

Taxes (attach schedule) (see instructions)

Depreciation (attach schedule) and depletion . . .

Cat No. 11289X

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Da	rt II	Attached schedules and amounts in the description column	Beginning of year	End o	
Гa 	, u	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	15,000	40,071.13	40,071.13
	2	Savings and temporary cash investments	0	0	0
	3	Accounts receivable ▶0			
		Less: allowance for doubtful accounts ▶0	0	0	0
	4	Pledges receivable ► 0			
Assets		Less: allowance for doubtful accounts ▶ 0	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other		·	
		disqualified persons (attach schedule) (see instructions)	0	0	0
- 1	7	Other notes and loans receivable (attach schedule) ▶0			
		Less: allowance for doubtful accounts ▶0	0	0	0
2	8	Inventories for sale or use	0	0	0
Se	9	Prepaid expenses and deferred charges	0	0	0
AS	10a	Investments – U S and state government obligations (attach schedule)	0	0	0
	b	Investments—corporate stock (attach schedule)	0	0	0
	C	Investments - corporate hands (attach ashedule)	0		0
	11	Investments—land, buildings, and equipment, basis ▶ 0			
	• •	Investments—corporate bonds (attach schedule) Investments—land, buildings, and equipment, basis ▶ 0 Less: accumulated depreciation (attach schedule) ▶ 0	0	0	0
	12	Investments—mortgage loans	0	0	0
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment: basis ▶ 930,000.00			
		Less: accumulated depreciation (attach schedule) ▶ 0	0	930,000	930,000
	15	Other assets (describe ▶ 0)	0	0	0
	16	Total assets (to be completed by all filers—see the			
		ınstructions. Also, see page 1, ıtem l)	15,000	970,071.13	970,071.13
_	17	Accounts payable and accrued expenses	0	0	
40	18	Grants payable	0	0	
Liabilities	19	Deferred revenue	0	0	
≝	20	Loans from officers, directors, trustees, and other disqualified persons	0		
æ	21	Mortgages and other notes payable (attach schedule)	- 0	0	1
_	22	and the state of t	0		
	23	Other liabilities (describe ► 0) Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
nd Balances		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted	15,000	970,071.13	
ᇛ	25	Temporarily restricted	0	0	1
8	26	Permanently restricted	0	0	1
Ē		Foundations that do not follow SFAS 117, check here ▶ □			1
Net Assets or Fu		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
)ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund			1
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Ä	30	Total net assets or fund balances (see instructions)	15,000.00	970,071.13	
ē	31	Total liabilities and net assets/fund balances (see			1 1
~		instructions)	o	d	
Pa	rt III		<u> </u>	···	· · · · · · · · · · · · · · · · · · ·
1		al net assets or fund balances at beginning of year-Part II, colu			
	end-	-of-year figure reported on prior year's return)		1	15,000.00
2	Ente	er amount from Part I, line 27a		2	25,071.13
3	Othe	er increases not included in line 2 (itemize) 930,000 (property)		3	930,000.00
4	Add	I lines 1, 2, and 3		4	970,071.13
5	Doo	reases not included in line 2 (itemuse)			
_6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lir	ne 30 6	970,071.13
					Form 990-PF (2015)

		Losses for Tax on Investn	101111 11110011110			
		kind(s) of property sold (e.g., real estate, or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b						
С						
d						
<u>e</u>					_	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g)
а						
<u>b</u>						
<u> </u>						
<u>d</u>						
<u>e</u>	Complete ash for seast above	(6)	h No for all to	10/01/00		
	Complete only for assets snow	ving gain in column (h) and owned				(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (i), if any		t less than -0-) or rom col (h))
a						
b		·				
С						
d						
е						<u> </u>
2	Capital gain net income or		also enter in Pa , enter -0- in Pa		2	
3	If gain, also enter in Part I	or (loss) as defined in sections, line 8, column (c) (see instruc	ctions). If (loss)			
				<u> J</u>	3	
Part		er Section 4940(e) for Redu	uced Tax on N	let Investment	Income	
	plional use by domestic priv	ate foundations subject to the	section 4940(a)	tax on net invest	tment income.)	
f sect Vas t	tion 4940(d)(2) applies, leave the foundation liable for the s s," the foundation does not c	this part blank. ection 4942 tax on the distribu qualify under section 4940(e). E	itable amount of Oo not complete	fany year in the this part.	base period?	☐ Yes ☐ N
f sect Vas t	tion 4940(d)(2) applies, leave the foundation liable for the s s," the foundation does not c	this part blank. ection 4942 tax on the distribu	itable amount of Oo not complete	fany year in the this part.	base period?	☐ Yes ☐ N
f sect Vas t f "Ye:	tion 4940(d)(2) applies, leave the foundation liable for the s s," the foundation does not c	this part blank. ection 4942 tax on the distribu qualify under section 4940(e). E	ntable amount of no not complete ar; see the instri	fany year in the this part.	base period? aking any entries.	(d) tribution ratio
f sect Vas t f "Ye:	tion 4940(d)(2) applies, leave the foundation liable for the s s," the foundation does not on Enter the appropriate amountable (a) Base period years	this part blank. section 4942 tax on the distribution and the distribution and the distribution are the distribution and the distribution and the distribution are the distribution are the distribution and the distribution are the distribution are the distribution and the distribution are the distribution are the distribution and the distribution are the distribution are the distribution and the distribution are the distributi	ntable amount of no not complete ar; see the instri	f any year in the this part. uctions before m	base period? aking any entries.	(d)
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Part \		nstru	ction	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
g.	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)		0	ļ
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► □ and enter 1% of Part I, line 27b			
С	here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
3	Add lines 1 and 2		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_	0	L
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	L
6	Credits/Payments:			l
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 0 Exempt foreign organizations—tax withheld at source 6b 0			
b	Exempt foreign organizations—tax withheld at source			
C d	Backup withholding erroneously withheld 6d 0			
7	Total credits and payments. Add lines 6a through 6d		0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	
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 ▶ Refunded ▶ 11		0	
	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	
b	participate or intervene in any political campaign?	<u> 1a</u>	_	~
b	Instructions for the definition)?	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		V
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			i
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	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?	2		~
•	If "Yes," attach a detailed description of the activities.		1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	 	-
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	_	Ť
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>	╁
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		~
	If "Yes," attach the statement required by General Instruction T.			$\lceil - \rceil$
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			ļ
	• 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?		<u> </u>	
7	conflict with the state law remain in the governing instrument?	6 7	V	├
, 8а	Enter the states to which the foundation reports or with which it is registered (see instructions)	├-	-	
	Indiana		1	ł
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ĺ	ļ	l
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	~	1
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,"			
4.5	Complete Part XIV	9_	-	-
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			
	names and addresses	10	_	1

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		~
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		,
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	<u> </u>
	Website address ► n/a			
14		7-514		
15	Located at ► 1505 N. Delaware St. Indianapolis, IN ZIP+4 ► 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	6202-4		
15	and enter the amount of tax-exempt interest received or accrued during the year		•	▶ □
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority	/	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		~
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		i
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No.			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	-	
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c		~
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2015?			
h	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			l
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			1
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	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?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			1
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	ļ	1	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2015.)	3b	t	1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a		~
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?	<u></u>	ļ	
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	<u> </u>	-

_	•
Page	t

Part	VII-B Statements Regarding Activities	TOP W	nich Form	4/20 M	иау ве н	<u>equire</u>	a (contil	nuea)	
5a	During the year did the foundation pay or incur at (1) Carry on propaganda, or otherwise attempt to			n (coot	on 404E(o)	12	□Yes	☑ No	
	(2) Influence the outcome of any specific public		_	•			□ 169	<u>- 140</u>	
	directly or indirectly, any voter registration dri						☐ Yes	☑ No	
	(3) Provide a grant to an individual for travel, stud						☐ Yes	✓ No	
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions)						☐ Yes	₩ No	
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to compare the prevention of cruelty the crue the prevention of cruelty the prevention of cruelty the prevention of cruelty the crue the prevention of cruelty the prevention of cruelty the crue the prevention of cruelty the crue the prevention of cruelty the crue the crue the crue the prevention of cruelty the crue the	charita	ıble, scientifi	c, litera	ry, or educ		Yes	☑ No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice of							ibed in	5b
	Organizations relying on a current notice regarding							▶□	
С	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility						∏Yes	□No	
	If "Yes," attach the statement required by Regula		_						
6a	Did the foundation, during the year, receive any	funds, (directly or inc	directly,	to pay pre	miums		_	
	on a personal benefit contract?						Yes	ຼ⊡ No	
D	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	ns, aire	ctly or indired	ctiy, on	a personai	benem	contract	γ.	6b 🗸
7a	At any time during the tax year, was the foundation a	a party t	o a prohibited	tax she	elter transac	tion?	☐ Yes	✓ No	
	If "Yes," did the foundation receive any proceeds								7b
Par	Information About Officers, Direct and Contractors	tors, I	rustees, Fo	ounda	tion Mana	agers,	Highly I	aid Ei	mployees,
1	List all officers, directors, trustees, foundation	n mana	gers and th	eir con	pensation	lsee ii	nstructio	ns).	
<u> </u>		(b) Title	e, and average	(c) Cor	npensation	(d) (Contribution	s to	(e) Expense account,
	(a) Name and address		s per week ed to position	(If not paid, en enter -0-) and		employee benefit plans and deferred compensation		other allowances	
Joann		Chair a	nd Director;		0			0	0
David	N. Delaware St. Indianapolis, IN 46202		ryTreasurer						
			ector; <10		0			0	0
	Roberts	Directo	r; <10						0
	N. Pennsylvania, Indianapolis, IN 46202	ļ							
	Wellwerts	Directo	r; <10		o			0	0
701 K	essler Blvd., Indianapolls, IN 46228 Compensation of five highest-paid employee	es (oth	er than tho	 se incli	ıded on li	ne 1—:	see inst	uctions	s). If none, enter
_	"NONE."							40110111	o,:, c
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expense account, other allowances
NONE									
		-)		
							 		
							<u> </u>		
							 		
								'	
Total	number of other employees paid over \$50,000 .							. ▶	
									Form 990-PF (2015)

r ai	and Contractors (continued)	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
иои		
		
		· · · · · · · · · · · · · · · · · · ·
ota	number of others receiving over \$50,000 for professional services	<u> </u>
Par	t IX-A Summary of Direct Charitable Activities	
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	NONE	
2		
3		_
•		}
4		
		<u> </u>
	t IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
2		
_	······································	
Al	other program-related investments. See instructions	
3		
	•••••••••••••••••••••••••••••••••••••••	
-	I Add Provide to the O	
IOTE	II. Add lines 1 through 3	<u> </u>

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	C
b	Average of monthly cash balances	1b	16,895.85
С	Fair market value of all other assets (see instructions)	1c	930,000.00
d	Total (add lines 1a, b, and c)	1d	946,895.85
е	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	946,895.8
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	14,203.44
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	932,692.4
6	Minimum investment return. Enter 5% of line 5	6	46,634.6
Part	Minimum investment return. Enter 5% of line 5	oundation	ns
1	Minimum investment return from Part X, line 6	1	46,634.62
2 a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b 850.00		
С	Add lines 2a and 2b	2c	850.00
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	45,784.62
4	Recoveries of amounts treated as qualifying distributions	4	(
5	Add lines 3 and 4	5	45,784.6
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,		
	<u>line 1 </u>	7	45,784.6
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	
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:		
а	Suitability test (prior IRS approval required)	3a	(
ь	Cash distribution test (attach the required schedule)	3b	- (
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	(
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundatio

Part :	XIII Undistributed Income (see instruction	ns)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
_					45,784.62
2	Undistributed income, if any, as of the end of 2015:	<u> </u>		21	
а	Enter amount for 2014 only			31	·
р	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2015:	5 }		ř	
а	From 2010	į.	ļ		
Ь			;; !! 	3	
C			1	ļ	
d	From 2013		: :	,	
е	***************************************				
f	Total of lines 3a through e	31			
4	Qualifying distributions for 2015 from Part XII,	İ	j	j.	
	line 4: ▶ \$ 0	ł	l.		
a	Applied to 2014, but not more than line 2a			0	
D	Applied to undistributed income of prior years	į		1	
_	(Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	_			
	· · ·	0			
d	Applied to 2015 distributable amount				0
e	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2015	0			
	(If an amount appears in column (d), the same amount must be shown in column (a).)		į		
6	Enter the net total of each column as				
U	indicated below:			!	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract				
_	line 4b from line 2b	;	0		
С	Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)			i	
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions		0		
е	Undistributed income for 2014. Subtract line				
	4a from line 2a. Taxable amount-see	ļ			
	instructions			31	
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016		<u> </u>	<u></u>	45,784.62
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	_			
c	required—see instructions)	0		 	
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2016.	0		;	: :
3	Subtract lines 7 and 8 from line 6a	_			
10	Analysis of line 9:	0			
a	Excess from 2011 0				
b	Excess from 2012				
C	Excess from 2013 0				
d	Excess from 2014 0	l.			
A	Excess from 2015				
_			·		·

Form 99	90-PF (2	015)					Page 10
Part	XIV	Private Operating Founda	tions (see instr	uctions and Part	VII-A, question 9)	
1a		foundation has received a ruling			private operating		
b		lation, and the ruling is effective for k box to indicate whether the four		•	tion described in se	otion [7] 4942/)(3) or 4942(j)(5)
2a		the lesser of the adjusted net	Tax year	T T T T T T T T T T T T T T T T T T T	Prior 3 years	Cilon 4942()(3) 01 <u> </u>
	incon	ne from Part I or the minimum tment return from Part X for year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
		of line 2a					
С		fying distributions from Part XII, for each year listed					
d		nts included in line 2c not used directly ive conduct of exempt activities					
е	for ac	fying distributions made directly tive conduct of exempt activities act line 2d from line 2c					
3		olete 3a, b, or c for the lative test relied upon					
а	"Asse	ets" alternative test-enter					
	(2) V	alue of all assets alue of assets qualifying under ection 4942(j)(3)(B)(j)					
b	"Endo	nimum investment return shown in in line 6 for each year listed					
С		port" alternative test-enter:				-	- "
	ir d s	otal support other than gross vestment income (interest, vidends, rents, payments on ecurities loans (section 12(a)(5)), or royalties)					
	a o	upport from general public nd 5 or more exempt rganizations as provided in ection 4942(j)(3)(B)(iii)					
	(3) L	argest amount of support from nexempt organization					
	(4) C	ross investment income		• • • • • • • • • • • • • • • • • • • •			<u> </u>
Part	ΧV	Supplementary Information			the foundation h	ad \$5,000 or n	nore in assets at
		any time during the year-		ns.)			·
1 a		mation Regarding Foundation any managers of the foundation		uitad mara than ?	0/ of the total cent	ubustiana vassiira	d b., tb. tb. ta
•	befo	re the close of any tax year (but o	only if they have o	contributed more t	than \$5 000) (See s	ection 507(d)(2))	by the foundation
N/A			,,		40,000, (000 0	001.011.007 (4)(2).)	
b	List	any managers of the foundation	who own 10% (or more of the sto	ock of a corporation	or an equally	large portion of the
		ership of a partnership or other e					
N/A							
2	Chec	mation Regarding Contribution k here ▶ ☑ If the foundation	only makes con	tributions to pres	elected charitable	organizations an	d does not accept
		licited requests for funds. If the for conditions, complete items 2a,		s giπs, grants, etc	. (see instructions) t	o individuals or	organizations unde
a		name, address, and telephone nu		ddress of the per	son to whom applic	ations should be	addressed:
		,,					
b	The	orm in which applications should	be submitted ar	nd information and	d materials they sho	uld include:	

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

c Any submission deadlines:

Part	XV Supplementary Information (contri	nued)			
3	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	
а	Paid during the year				
NONE				,	
			l		
		İ			
			1		
			[
		<u> </u>	<u> </u>	<u> </u>	
		· · · · · · ·			
NONE	Approved for future payment				
		ļ			ļ
					1
					1
					}
	Total			<u></u>	

Par	LAV	Analysis of Income-Producing Ac	uviues				
Ente	r gros	ss amounts unless otherwise indicated.	Unrelated bu (a) Business code	(b) Amount	(c) Exclusion code	on 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1	Prog	ram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions)
	а						
	ь -						
	c ¯						
	d ¯						
	е -						
	f						
	g F	ees and contracts from government agencies					
2	-	nbership dues and assessments					
3		est on savings and temporary cash investments					
4	Divid	dends and interest from securities					
5	Net	rental income or (loss) from real estate:					
	аС	Debt-financed property					
	b N	Not debt-financed property					
6	Net	rental income or (loss) from personal property					
7	Othe	er investment income			T		
8	Gain	or (loss) from sales of assets other than inventory					
9	Net	income or (loss) from special events					
10	Gros	ss profit or (loss) from sales of inventory					
11	Othe	er revenue: a					
	b _						
	c _						
	d _						L
	е						
	_						
		total. Add columns (b), (d), and (e)					
13	Tota	al. Add line 12, columns (b), (d), and (e)				13	
13 (See	Tota work	al. Add line 12, columns (b), (d), and (e)	 ıs.)			13	
13 (See Pa	Tota work rt XV	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alea Relationship of Activities to the A	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		
13 (See Pa	Tota work	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alea Relationship of Activities to the A	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alea Relationship of Activities to the A	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		importantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
13 (See Pa	Total work rit XV ne No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	 ıs.) .ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)

Part	XVII			Trans	sfers To and Tra	ansactio	ns and	Relationshi	ps W	ith N	onch	aritabl		90.0
	D -1 41	<u>-</u>	ganizations								 .		V	
1					ngage in any of th ection 501(c)(3) or								Yes	No
		ations?	le Code (other	man 5	ection so r(c)(s) or	yanızatıdı	15) 01 111 5	ection 527, i	eratiriş	y to b	Unticai		i '	
а	-		oorting foundat	ion to	a noncharitable ex	rompt ord	ianization	of						
a												1a(1)		~
		er assets .							•	• •		1a(2)	\vdash	7
b	. ,	ransactions:							•	• •		10(2)		
_			a noncharitabl	e exer	npt organization							1b(1)		~
					ble exempt organi							1b(2)		~
					assets							1b(3)		~
		mbursement a	• •									1b(4)		~
			•									1b(5)		~
	(6) Per	formance of se	ervices or mem	bersh	p or fundraising so	olicitation	s					1b(6)		\
С	Sharing	of facilities, e	quipment, maıl	ing lis	ts, other assets, o	r paid em	ployees					1c		1
d					," complete the fo									
					es given by the re									
					ement, show in col									
(a) Line	e no (b)	Amount involved	(c) Name o	f nonch	arıtable exempt organız	ation	(d) Desc	ription of transfe	rs, trans	saction	s, and sh	naring arr	angeme	ents
							<u> </u>							
					-									
														
							<u> </u>							
		-												
					· · ·		<u> </u>							
							· · · · · ·							
		••••					<u> </u>							
		-												
					•									
				_	•		İ							
												_		
2 a	Is the	foundation dire	ectly or indirec	tly aff	liated with, or rela	ated to, o	ne or mo	re tax-exem	ot org	anıza	tions			
					ther than section 5	501(c)(3)) (or in secti	on 527? .				☐ Yes	· 🗹	No
b			e following sch											
		(a) Name of organ	nization		(b) Type of	organization			(c) Des	cription	of relati	onship		
														
	Under o	penalties of deriury.	declare that I have	examine	d this return, including ac	companying	schedules an	d statements, and	to the l	nest of r	Try knowl	edne and	helief it	is true
Sign	correct	and complete Deci	laration of preparer (other the	n taxpayer) is based on a	II information	of which pre	parer has any kno	wledge) 1				
Here		$\mathbf{Y}\mathbf{Y}$	11/ 1/V	$Y \mathcal{F}$	1.3/25	//6 Ch	air					IRS disci preparer		
	Signat	re Control	tee /	10 -	Date	Title				— [ructions)?		
Deid		Print/ ype preparer	\		Preparer's signature			Date		<u>_</u>		PTIN		
Paid			$\overline{}$							Check self-er	f nployed			
Prep Use		rm's name ▶			. I				Firm's	EIN ►		L		
		irm's address ▶						-	Phone					
				_										

Schedule B

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

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury Internal Revenue Service

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

Schedule of Contributors

OMB No 1545-0047

	the organization	Employer identification number 47-2544074				
Katharine B. Sutphin Foundation, Inc. 47-2544074 Organization type (check one):						
Organiz	ation type (oncor on	.				
Filers o	f:	Section:				
Form 99	90 or 990-EZ	☐ 501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private for	undation			
		☐ 527 political organization				
Form 99	90-PF	√ 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundate	ation			
		501(c)(3) taxable private foundation				
	Only a section 501(c)(7 ions.	covered by the General Rule or a Special Rule . (), (8), or (10) organization can check boxes for both the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the General Rule and the Gen	and a Special Rule See			
V	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.					
Specia	I Rules					
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9d that received from any one contributor, during the year, total contribute amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line utions of the greater of (1)			
	contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, total contributions of more than \$1,000 exclusively for religious that purposes, or for the prevention of cruelty to children or animals. Co	s, charitable, scientific,			
	contributor, during contributions totale during the year for a General Rule appli	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Do not complete any es to this organization because it received nonexclusively religious, charitable during the year	ses, but no such outions that were received y of the parts unless the naritable, etc., contributions			

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 Katharine B. Sutphin Foundation, Inc. Employer identification number 47-2544074

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	National Bank of Indianapolis, as personal representative for the Estate of Katharine B. Sutphin; 107 N. Pennsylvania St. #700 Indianapolis, IN 46204	\$50,000.00	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Estate of Katharine B. Sutphin 107 N. Pennsylvania St. #700 Indianapolis, IN 46204	\$930,000.00	Person Payroli Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Moncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.							
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
1	700 Questover Circle (also known as 700 W. 56th St.) Indianapolis, IN (4600 sf home + 7 acres of surrounding land)	\$ 930,000.00	10/21/2015					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
•		\$						

Part III	(10) that total more than \$1,000 for t	the year from any one contr	tions described in section 501(c)(7), (8), or ibutor. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.,					
	contributions of \$1,000 or less for the Use duplicate copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Part III if additional copies of Pa	year. (Enter this information						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gift						
	Transferee's name, address, and		Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	Transferee's name, address, an	Relationship of transferor to transferee						
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					

EIN 47-2544074

2015 Schedule of Legal Fees (990-PF line 16a)

\$10,225.50

March 31, 2015

Faegre Baker Daniels (600 E. 96th St., suite 600, Indianapolis, IN 46240)
Professional fees for addressing foundation governance issues (FaegreBD File 506303.000001)

EIN 47-2544074

2015 Schedule of Professional Fees (990-PF line 16c)

\$6285.30

October 27, 2015 Gregory & Appel Insurance (1402 N. Capitol, suite 400, Indianapolis, IN 46202) Professional fees for evaluation of Policy #ATRR393699 for 700 W. 56th St.

EIN 47-2544074

2015 Schedule of Taxes (990-PF line 18)

\$850.00 February 26, 2015 -- U.S. Treasury

\$4945.51 November 4, 2015 -- Marion County Treasurer (property tax for 700 Questover Circle, Indianapolis, IN 46228

TOTAL -- \$5795.51

EIN 47-2544074

2015 Schedule of Other Expenses (990-PF line 23)

\$2388.17 Utilities, Maintenance and Security for 700 Questover Circle, Indianapolis, IN 46228

\$247.94 Checks, envelopes, stamps for bill paying

TOTAL - \$2636.11