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DLN: 93491159006076

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at $\underline{www.irs.gov/form990pf}$.

Open to Public Inspection

For	cale	ndar year 2015, or tax y	, ar	and ending 12-31-2015					
	e of four	ndation ABER FAMILY FOUNDATION INC				A Employer ide	entification numbe	er	
OL.	LIV 5 OK	ADER TAPILET TOORDATION INC				83-0352635			
		street (or P O box number if mail is	not delivered to street address) Room/suite		B Telephone nur	nber (see instruction	s)	
77	16 N 900) E				(812) 636-7355			
		, state or province, country, and ZIP c RY, IN 47558	or foreign postal code			C If exemption	application is pendin	g, check here 🕨 🦵	
G CI	neck al	I that apply Tinitial return	Initial return of a f	ormer public charity		B.4.5		. –	
		Final return ▼ Address chan	A mended return	,		2. Foreign or	ganizations, check he ganizations meeting k here and attach co	the 85%	
H Ch	eck ty	pe of organization 🔽 Section 1947(a)(1) nonexempt charital	ble trust 「Other taxabl	e private foundation		E If private for	indation status was to 507(b)(1)(A), chec	erminated	
		et value of all assets at end	JAccounting method Other (specify)	Cash ✓ Accrual	ا ا		ition is in a 60-montl n 507(b)(1)(B), chec		
		rom Part II, col. (c), \$ 24,060	(Part I, column (d) must	be on cash basis.)		under section	1 307(b)(1)(b), clied	k liele F J	
Pa	rt I	Analysis of Revenue a (The total of amounts in columns in necessarily equal the amounts in constructions)	(b), (c), and (d) may not	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)	
	1	Contributions, gifts, grants, e	etc , received (attach					(a) (cash basis only)	
	-	schedule)		274,862					
	2	Check ► ☐ If the foundation							
	3	Sch B	norary cach investments	1,316		1,316	1,316		
	4	Dividends and interest from s	•	1,310		1,510	1,310		
	5a	Gross rents							
	ь	Net rental income or (loss) _							
Φ	6a	Net gain or (loss) from sale o	of assets not on line 10						
Revenue	b	Gross sales price for all asse	ets on line 6a						
	7	Capital gain net income (fron	n Part IV, line 2)						
	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	Ь	Less Cost of goods sold .							
	С	Gross profit or (loss) (attach	•						
	11	Other income (attach schedu	ıle)	205,318			205,318		
	12	Total. Add lines 1 through 11		481,496		1,316	206,634		
	13	Compensation of officers, dir							
_	14	O ther employee salaries and							
Expenses	15 16a	Pension plans, employee ben Legal fees (attach schedule).							
至	b	Accounting fees (attach sche					1,280	970	
Ë				_			1,200	370	
	_ c	Other professional fees (atta							
rati	17	Interest		2,841				2,841	
ž	18 19	Taxes (attach schedule) (see Depreciation (attach schedul	•	L_				2,011	
Administrative				71,699			1,666	70,033	
Ad	20 21	Occupancy					1,000	70,033	
and	22	Printing and publications.	-						
	23	Other expenses (attach sche		_				317,452	
ğ	24	Total operating and administ							
Operating	- :	Add lines 13 through 23	-	468,909		0	2,946	391,296	
ŏ	25	Contributions, gifts, grants p						85,800	
	26	Total expenses and disburser							
		25		554,609		0	2,946	477,096	
	27	Subtract line 26 from line 12							
	a .	Excess of revenue over expe		-73,113		4 346			
	b c	Net investment income (if ne Adjusted net income(if negat	- '			1,316	203,688		
			,						

Pa	rt II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of	'
				(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		est-bearing	18,678	18,918	
	2	-	porary cash investments	26,068	24,060	24,060
	3		able •			
			for doubtful accounts 🕨			
	4		ble 🟲			
			for doubtful accounts 🕨			
	5		e			
	6		from officers, directors, trustees, and other			
			ons (attach schedule) (see instructions)			
	7	Other notes and	loans receivable (attach schedule) ▶			
		Less allowance	for doubtful accounts 🟲			
y,	8	Inventories for s	ale or use			
Assets	9	Prepaid expense	s and deferred charges			
	10a	Investments—U schedule)				
	b	Investments—co	orporate stock (attach schedule)			
	С	Investments—co	orporate bonds (attach schedule)			
	11	Investments—la	nd, buildings, and equipment basis 🟲			
		Less accumulat	ed depreciation (attach schedule) 🟲			
	12	Investments—mo	ortgage loans			
	13	Investments—ot	her (attach schedule)			
	14	Land, buildings, a	and equipment basis 🟲			
		Less accumulat	ed depreciation (attach schedule) 🟲 700,454	1,601,129	1,526,460	
	15	Other assets (de	escribe 🟲)			
	16	Total assets(to b	oe completed by all filers—see the			
		instructions Als	o, see page 1, item I)	1,645,875	1,569,438	24,060
	17	Accounts payabl	le and accrued expenses			
	18	Grants payable				
å.	19	Deferred revenue	e	14,826	11,502	
Liabilities	20		ers, directors, trustees, and other disqualified persons			
e e	21		ther notes payable (attach schedule)			
_	22	Other liabilities (<u> </u>			
	23	,	add lines 17 through 22)	14,826	11,502	
			t follow SFAS 117, check here 🕨 🔽	·	·	
φ			es 24 through 26 and lines 30 and 31.			
5	24			1,631,049	1,557,936	
<u>8</u>	25		ricted	, ,	, ,	
<u> </u>	26		tricted			
ū	20	•	t do not follow SFAS 117, check here			
or Fund Balance			es 27 through 31.			
	27		ust principal, or current funds			
Assets	28		I surplus, or land, bldg , and equipment fund			
Ą	29		ps, accumulated income, endowment, or other funds			
Net	30	_	or fund balances(see instructions)	1,631,049	1,557,936	
Z	31		and net assets/fund balances(see instructions)	1,645,875	1,569,438	
				1,043,073	1,303,430	
	rt III	_	Changes in Net Assets or Fund Balances	() (1 1	
1			or fund balances at beginning of year—Part II, column			1 (21 212
_			figure reported on prior year's return)			1,631,049
2			m Part I, line 27a		- I	-73,113
3			not included in line 2 (itemize)		_ 3	
4		Add lines 1, 2, ar			 	1,557,936
5			icluded in line 2 (itemize)		_ 5	
6		Total net assets	or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lır	ne 30 . 6	1,557,936

Part IV Capital Gains	and Losses for Tax on Inve	stment Income	<u> </u>		
	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase (b) D—Donation	Date acquired	Date sold (d) (mo , day, yr)
1a					
b					
c					
d					
е					
(e) Gross sales price	Depreciation allowe (f) (or allowable)		or other basis expense of sale		or (loss) (f) mınus (g)
a					
b					
с					
d					
e					
Complete only for assets	showing gain in column (h) and owne	ed by the foundation	on 12/31/69	Gains (Col	(h) gaın mınus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69		ess of col (1) col (j), if any		ot less than -0-) or (from col (h))
а					
b					
c					
d					
e					
	al gaın or (loss) as defined in sectio Part I, line 8, column (c) (see instru			2	
	Under Section 4940(e) for R	educed Tay on	Net Investme	nt Income	
-	private foundations subject to the se				
If "Yes," the foundation does n	e section 4942 tax on the distribute ot qualify under section 4940(e) Do	o not complete this	part		∀es No
1 Enter the appropriate amo	unt in each column for each year, so	ee instructions befo	re making any ent	ries	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar	itable-use assets	(d) Distributio (col (b) divided	n ratio
2014	231,638		100,514		2 304535
2013	166,655		201,832		0 825711
2012	230,360		208,087		1 107037
2011	265,259		204,349		1 298069
2010	223,178		256,139		0 871316
_ ,	n (d)			2	6 406668
the number of years	ratio for the 5-year base period—div the foundation has been in existence	e ıf less than 5 year	rs	3	1 281334
	f noncharitable-use assets for 2015	•	—	4	43,205
• • • • • • • • • • • • • • • • • • • •	e 3		<u> </u>	5	55,360
	stment income (1% of Part I, line 2	·	-	6	13
7 Add lines 5 and 6.				7	55.373

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

the Part VI instructions

477,096

8

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	940(e).	or 4948—s	ee pag	e 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here			<u> , </u>					
Ia	and enter "N/A" on line 1	'							
	Date of ruling or determination letter			,					
	(attach copy of letter if necessary-see instructions)								
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V,	, check		J	1				13
	here Fand enter 1% of Part I, line 27b								
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza	ations e	enter 4% of						
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four	ndation	sonly Oth	ers					
_	enter -0-)		J J, J L		2				
3	Add lines 1 and 2			•	3				13
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four	ndation	s only Oth	ers	4				
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter-∩	1 =		5			-	13
6	Credits/Payments			•	3				13
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1						
b	Exempt foreign organizations—tax withheld at source	6b							
c	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7			·	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2				8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .				9				13
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount				10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	•	11				
	t VII-A Statements Regarding Activities		- Refunded			<u> </u>			
1a	During the tax year, did the foundation attempt to influence any national, state	orloc	al legislatu	nn or d	ıd			Yes	No
	it participate or intervene in any political campaign?	., 01 100	ar registati	311 O1 U	u		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	olitica	Inurnosas	· · (saa Ir	· ·	one			
	for definition)?					-	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	noies of anv	materia	ıls	-			
	published or distributed by the foundation in connection with the activities.		p ,						
С	Did the foundation file Form 1120-POL for this year?						1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos			r					
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers	> \$ _	- ,						
e	Enter the reimbursement (if any) paid by the foundation during the year for poli				osed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been rep	ported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts gove	erning instru	ıment,	articles	5			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	ormed o	copy of the o	changes	·		3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	lurıng t	he year?.				4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section $508(e)$ (relating to sections 4941 through 49	45) sa	tisfied eithe	er					
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so th	at no n	nandatory d	irectio	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	?If "Yes	s," complete	Part II	, col. (c),			
							7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (\cdot	see ins	structions)						
_	► IN								
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99							.,	
_	General (or designate) of each state as required by General Instruction G? If				/->/:>		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s If "Yes," complete Part XIV	ee inst	.ructions for	rart)	(1 /) /		9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes,</i>	" attach	a schedula	licting	their	amec	-	\vdash	140
10	and addresses.			_			10		No
					•		ــــــــــــــــــــــــــــــــــــــ		

Pai	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►NONE			
14	The books are in care of ►CATHERINE WAGLER Telephone no ►(812) 636	-8231	
	Located at ▶7351 E 1150 N ODON IN ZIP+4 ▶47562			
15	· · · · · · · · · · · · · · · · · · ·			-
13	and enter the amount of tax-exempt interest received or accrued during the year		- 1	
			1.,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	ء ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			T
	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 V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
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?			
	If "Yes," list the years 🕨 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
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			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
D	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	+-	No
ъ Б	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-ru		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pal	Statements Rega	irding Activities for	· Wr	iich Form 4/20	мау	, se kednirea (<i>cont</i>	inuea)	<u>'</u>	_
5a	During the year did the foundation	n pay or incurany amoun	t to						ı
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (section 49	45(e	(a)) [?]	No		l
	(2) Influence the outcome of any	specific public election ((see	section 4955), or to	car	ry			l
	on, directly or indirectly, any	voter registration drive?				⊤ Yes 🔽	No		l
	(3) Provide a grant to an individu	al for travel, study, or oth	hers	ımılar purposes?		┌ Yes ┌	√ No		l
	(4) Provide a grant to an organiza	ation other than a charita	ble,	etc , organızatıon de	scrib	ped			l
	ın section 4945(d)(4)(A)? (se	ee instructions)				│ Yes 🖟	√ No		l
	(5) Provide for any purpose other	than religious, charitabl	e, sc	ientific, literary, or					l
	educational purposes, or for t	he prevention of cruelty	to ch	ııldren or anımals?.			√ No		l
b	If any answer is "Yes" to 5a(1)-(5), dıd any of the transac	tions	s fail to qualify under	the	exceptions described in			i
	Regulations section 53 4945 or i	n a current notice regard	ling (disaster assistance	(see	instructions)?	· • L	5b	_
	Organizations relying on a curren	t notice regarding disast	eras	ssistance check her	e		_		ı
C	If the answer is "Yes" to question	n 5a(4), does the foundat	ion c	laım exemption fron	n the				l
	tax because it maintained expend	diture responsibility for th	he gr	ant?		T Yes T	No No		l
	If "Yes," attach the statement requ	ired by Regulations sectio	n 53.	.4945–5(d).					l
6a	Did the foundation, during the yea	ar, receive any funds, dire	ectly	or indirectly, to pay	prer	miums on			l
	a personal benefit contract?						No No		l
b	Did the foundation, during the yea	ar, pay premiums, directl	y or i	indirectly, on a perso	onal	benefit contract?		6b No	
	If "Yes" to 6b, file Form 8870.								l
7a	At any time during the tax year, v	vas the foundation a part	y to a	a prohibited tax shel	ter t	ransaction? TYes F	No		i
b	If yes, did the foundation receive	any proceeds or have an	ıy ne	t income attributable	e to t	the transaction?		7b	
Pai		t Officers, Directors	s, T	rustees, Founda	atio	n Managers, Highly	Paid E	mployees,	
	and Contractors List all officers, directors, trustee	- foundation monages	4	hair commonantion (:				-
	List all officers, directors, trustee				<u> </u>	(d)			-
	(a) Name and address	Title, and average hours per week	(c)) Compensation(If not paid, enter		Contributions to	Ex	pense account,	
	(a) Name and address	(b) devoted to position		-0-)		mployee benefit plans	(e) otl	her allowances	
500	Addıtıonal Data Table				and	deferred compensation			-
See	Additional Data Fable	1							
									-
		-							
									-
		4							
									_
		4							
									_
2	Compensation of five highest-paid	l employees (other than	thos	e included on line 1– T	-see	1	nter "NO	NE."	-
	(a)	Title, and aver				Contributions to employee benefit	Ex	pense account,	
Nar	me and address of each employee ; more than \$50,000	paid hours per we (b) devoted to pos		(c) Compensation	n	plans and deferred		herallowances	
		(b) devoted to pos	1011			(d) compensation			_
NON	IE								
									_
							1		
									_
									_
									-
							1		
									-
							1		
T	I					<u> </u>			-

Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, Hi	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	A mount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<u></u>

Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	ıs.)	
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	25,064
b	Average of monthly cash balances	1b	18,799
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	43,863
e	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	43,863
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	658
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	43,205
6	Minimum investment return. Enter 5% of line 5	6	2,160
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and ce check here ► and do not complete this part.)	rtaın fo	reign organizations
1	Mınımum ınvestment return from Part X, line 6	1	2,160
2a	Tax on investment income for 2015 from Part VI, line 5 2a 13		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	13
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,147
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,147
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	2,147
Par	Qualifying Distributions (see instructions)		
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	477,096
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	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	477,096
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	13
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	477,083
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the f	oundation qualifies for

	art XIII	Unaistributea	Income (see instr	uctions)			
				(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributab	le amount for 2015	from Part XI, line 7	0.0.0	, care prior to zoz		2,147
			s of the end of 2015				
		int for 2014 only.					
b		·	, 20, 20				
		tributions carryover					
			210,473				
b			255,224				
_			220,140				
			156,745				
			226,694				
f	Total of line	es 3a through e		1,069,276			
		listributions for 201					
		> \$					
		2014, but not more					
		undistributed incom					
	(Election re	quired—see instruc	tions)				
C		distributions out of ee instructions)	•				
d			amount				2,147
е	Remaining	amount distributed	out of corpus	474,949			
5	Excess dis	trıbutıons carryoveı	applied to 2015				
		nt appears in column mount must be shov					
6		et total of each col					
•	indicated						
а	Corpus Add	d lines 3f, 4c, and 4	e Subtract line 5	1,544,225			
b		undistributed incon					
C		mount of prior years					
		which a notice of de I, or on which the se	•				
		n previously assess					
d		ie 6 c from line 6 b T					
	—see ınstru	ictions					
е	Undistribut	ed income for 2014	Subtract line				
		2a Taxable amour					
Т		ed income for 2016 d 5 from line 1 This					
		ed in 2015					0
7	Amounts tre	eated as distribution	ns out of				
	corpus to sa	atisfy requirements	ımposed by				
)(b)(1)(F) or 4942(
_		•					
8		tributions carryover ine 5 or line 7 (see	rrom 2010 not instructions)	210,473			
9		ributions carryover	·				
,		es 7 and 8 from line		1,333,752			
10	Analysis of		-				
	•	m 2011	255,224				
		m 2012	220,140				
c	Excess from	m 2013	156,745				
d	Excess from	m 2014	226,694				
е	Excess from	m 2015	474,949				

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
	year listed					
b 8	35% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt activities					
e	Qualifying distributions made directly					
•	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	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					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	Information Regarding Foundation Managers: List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 78,800 **b** Approved for future payment

Form 990-PF (2015) Part XVI-A Analysis of Income-Production	cing Activitie	S			Page 12
Enter gross amounts unless otherwise indicated	1	ısıness ıncome	Excluded by section	512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
a PROGRAM SERVICE REVENUE					29,055
b RENTAL OF FACILITY					49,334
c					
d					
e f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					1,316
4 Dividends and interest from securities					1,515
5 Net rental income or (loss) from real estate					
a Debt-financed property			+		
b Not debt-financed property6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a ENTRY FEES & CONCESSIONS			25	117,079	
b <u>utilities</u> rebate			25	9,850	
c					
d e					
12 Subtotal Add columns (b), (d), and (e).				126,929	79,705
13 Total.Add line 12, columns (b), (d), and (e)			1	3	206,634
(See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to			Exempt Purpose		
Line No. Explain below how each activity for wh	ich income is re	ported in column	(e) of Part XVI-A co	ntributed importa	
instructions)					

Part	: XVI	Information Re Noncharitable					nsactio	ons and I	Relationships	With				
		organization directly or i	ndırectly (engage	ın any of t	the following v						V	NI-	
		501(c) of the Code (othe	er than se	ction 50	01(c)(3) c	organizations)	or in se	ction 527,	relating to politic	:al		Yes	No	
_		tions?	dation to			avament arase	.==+.0=	.c						
		s from the reporting four									1a(1)		No	
		erassets								1	1a(1)		No	
` `		ansactions									10(2)		NO	
		es of assets to a noncha	ritable ex	emnt or	nanızatını	n					1h(1)		No	
		chases of assets from a									1b(2)		No	
		tal of facilities, equipme								ŀ	1b(3)		No	
		mbursement arrangemer									1b(4)		No	
		ns or loan guarantees.								1	1b(5)		No	
		rmance of services or m								- 1	1b(6)		No	
		of facilities, equipment,								ŀ			No	
	_	swer to any of the above	_									ue		
ın a	any tr	ods, other assets, or se ansaction or sharing arr (b) Amount involved	angement	, show ı	n column		of the g	oods, other	rassets, or servi	ces receive	d		at c	
(a) Line	e NO	(b) Amount involved	(C) Name	OI HOHCH	аптаріе ехе	inpi organization	' (d) Description	of transfers, transact	lons, and sna	iliy alla	ilgerrier	its	
							-							
des	scribe	undation directly or indicted in section 501(c) of the complete the following (a) Name of organization	ne Code (d schedule		an section		or in sec			otion of relatio	. □Y e	s V	No	
								+						
	_													
Sign	the	der penalties of perjury, e best of my knowledge a ormation of which prepar	nd belief,	ıt ıs tru	e, correct					an taxpayer) is bas	ed on	all	
Here		*****				2016-06-0	³	*****		return with th	ie IRS di: ie prepai			
	ľ	Signature of officer or t	rustee			Date	r	Title		below (see in	str)? 🗸	Yes N	No	
		Print/Type preparer's RANDALL J STOLL	name	Prepa	rer's Sıgn	ature	Date 201	16-06-03	Check if self- employed ►	PTIN PO	12227	'31		
Paid Prep Use			AS LLC				I		Firm's EIN ► 46-3937559					
Only		Firm's address ► 101 EAST WALNUT STREET WASHINGTON, IN 47501							Phone no (812) 254-0682					

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week	(c) Compensation(If not paid, enter	(d) Contributions to	Expense account, (e) other allowances	
	(b) devoted to position	-0-)	employee benefit plans and deferred compensation		
REUBEN P MILLER	SECRETARY	0	0	0	
6773 N 900 E MONTGOMERY,IN 47558	2 00				
MARTIN GRABER	TREASURER	0	0	0	
8243 N 1000 E MONTGOMERY,IN 47558	2 0 0				
STEVE GRABER	PRESIDENT	0	0	0	
3646 N 850 E MONTGOMERY,IN 47558	2 00	_			
GLEN S GRABER	VICE PRESIDE	0	0	0	
11320 E 1475 N ODON,IN 47562	2 00				
MARY JANE GRABER	DIRECTOR	0	0	0	
8243 N 1000 E MONTGOMERY,IN 47558	2 00				
DENISE GRABER	DIRECTOR	0	0	0	
8243 N 1000 E MONTGOMERY,IN 47558	2 00				

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BARR REEVE HIGH SCHOOL 373 N MAIN ST MONTGOMERY,IN 47558			CHARITABLE DONATION	50
BETHEL MENNONITE CHURCH 14670 N 900 E ODON,IN 47562			CHARITABLE CONTRIBUTION	10,100
COMMON GROUND MINISTRIES PO BOX 178 BERLIN,OH 44610			CHARITABLE CONTRIBUTION	6,000
DAVIESS COUNTY 4H 21ST STREET NE WASHINGTON,IN 47501			DONATION	400
DAVIESS COUNTY COMMUNITY FOUNDATION 320 E MAIN ST WASHINGTON,IN 47501			DONATION	100
DAVIESS COUNTY RELAY FOR LIFE 801 NW 11TH ST WASHINGTON,IN 47501			CHARITABLE CONTRIBUTION	120
DOOR OF HOPE PO BO X 321 LYNN,NC 28750			DONATION	7,000
FRANK ROBERTS YOUTH LEAGUE 1226 E 675 N WASHINGTON,IN 47501			DONATION	100
FRIENDS FOR KIDS 108 SOUTHSIDE AVE WASHINGTON,IN 47501			CHARITABLE CONTRIBUTION	100
GOSPEL ECHOES PO BOX 555 GOSHEN,IN 46527			DONATION	120
GREENE COUNTY 4H 4513 HWY 54 BLOOMFIELD, IN 47424			DONATION	50
HABITAT FOR HUMANITY 1831 WABASH AVE TERRE HAUTE,IN 47807			DONATION	7,500
LIGHTHOUSE CENTER 1276 E 250 N WASHINGTON,IN 47501			DONATION	1,135
PLEASANTVIEW SCHOOL 7801 E OLD US 50 MONTGOMERY,IN 47558			DONATION	650
TRAVIS BURKHART FOUNDATION 10274 N 200 E PLAINVILLE,IN 47568			DONATION	450
Total			≯ 3a	78,800

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

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
UNITED WAY 200 E VAN TREES WASHINGTON,IN 47501			DONATION	4,000
AGAPE FLIGHTS 100 AIRPORT AVE E VENICE,FL 34285			DONATION	5,000
ANCHORED IN FAITH MINISTRIES 500 N ST SW LINTON,IN 47441			DONATION	1,200
GREENE COUNTY RELAY FOR LIFE 5644 HWY 54 W SWITZ CITY,IN 47465			DONATION	100
HORSESHOES OF HOME 10416 E US HIGHWAY 40 COATESVILLE,IN 46121			DONATIONA	3,300
JUNIOR ACHIEVEMENT 431 E DIAMOND AVE EVANSVILLE,IN 47711			DONATION	50
NATIONAL KIDNEY FOUNDATION 30 E 33RD ST NEW YORK,NY 10016			DONATION	2,000
ODON MADISON TOWNSHIP FIRE DEPT WELNORA ST ODON,IN 47562			DONATION	25,000
ODON OLD SETTLERS MAIN ST ODON,IN 47562			DONATION	1,000
PANCO YOUTH CENTER 9626 HWY 1482 ONEIDA,KY 40972			DONATION	500
PROVIDENCE MENNONITE CHURCH 4738 E US 50 MONTGOMERY,IN 47558			DONATION	100
ROMANIAN HANDICAPPED MINISTRIES 5910 PRICE ROAD MILFORD,OH 45150			DONATION	100
SAMANTHA E PORTER MEMORIAL SCHOLAR 11655 N US 231 ODON,IN 47562			DONATION	150
SONLIGHT MINISTRIES 2440 S 450 E WASHINGTON,IN 47501			DONATION	2,225
WABASH VALLEY GIRLS SOFTBALL LEAGUE 2601 N 19TH ST TERRE HAUTE,IN 47804			DONATION	100
Total			▶ 3a	78,800

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

		-		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WASHINGTON CATHOLIC SCHOOL 201 NE 2ND ST WASHINGTON,IN 47562			DONATION	100
Total				78,800

TY 2015 Accounting Fees Schedule

Name: GLEN S GRABER FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT ACCOUNTING FEES	2,250		1,280	970

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: GLEN S GRABER FAMILY FOUNDATION INC

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
HOUSE & BUILDINGS (BROWNIE)	2003-12-31	76,677	21,166	S/L	27 5000	1,917			
LAND 2 338 ACRES (BROWNIE)	2003-12-31	6,350							
LAND 16 ACRES	2003-12-31	61,153							
BUILDING, FIELD LIGHTS & PARKING	2003-11-01	1,085,202	301,822	S/L	39 0000	27,130			
MOWER	2003-04-14	2,331	2,331	S/L	7 0000				
2 WATER SOFTENERS	2003-05-23	4,000	4,000	S/L	7 0000				
KUBOTA MOWER	2003-08-20	8,500	8,500	S/L	7 0000				
3 ELECTRIC SCOREBOARDS	2003-08-25	11,505	6,615	S/L	20 0000	576			
POPCORN MACH, BROILER, COFFEE MACH	2003-09-19	3,406	3,406	S/L	7 0000				
MULE	2003-10-01	7,000	7,000	S/L	7 0000				
FOLDING CHAIRS	2003-10-31	6,607	3,799	S/L	20 0000	330			
CHAIR CADDY	2004-01-23	2,568	2,568	200DB	7 0000				
BUILDING IMPROVEMENTS	2004-03-31	62,372	17,259	S/L	39 0000	1,599			
FLOORING-BASKETBALL GYM	2004-03-31	3,264	2,397	150DB	15 0000	192			
FOLDING TABLES	2004-11-05	2,931	2,931	200DB	7 0000				
COAT RACKS	2004-11-11	860	860	200DB	7 0000				
MOWER	2005-07-20	3,392	3,392	200DB	5 0000				
POLE BUILDING	2005-08-08	4,005	2,129	150DB	20 0000	179			
REWIRE BALL DIAMONDS	2005-08-25	43,494	29,369	150DB	15 0000	2,568			
HOUSE	2006-12-23	225,000	65,795	S/L	27 5000	8,182			

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
HANDICAP PARKING	2006-08-03	8,254	7,016	S/L	10 0000	825			
FITNESS EQUIPMENT	2006-06-19	6,749	6,749	S/L	7 0000				
WASHER/DRYER	2006-04-19	1,050	1,050	S/L	5 0000				
SIGNS	2006-03-16	1,985	1,985	S/L	7 0000				
SOUND BOARD	2006-01-16	1,368	1,368	S/L	7 0000				
FLOOR SCRUBBER	2007-01-02	7,483	7,483	200DB	7 0000				
4 POWER HAND DRYERS	2007-06-22	1,800	1,800	200DB	7 0000				
WEED EATER	2007-08-29	530	530	200DB	5 0000				
TV	2007-09-15	934	934	200DB	5 0000				
SECURITY CAMERAS	2007-10-03	8,871	8,871	200DB	7 0000				
PLAYGROUND EQUIPMENT	2009-02-17	5,828	5,048	200DB	7 0000	520			
TRACTOR FOR BALL FIELD	2009-05-19	13,632	11,807	200DB	7 0000	1,217			
BASES FOR BALL FIELD	2009-05-26	720	624	200DB	7 0000	64			
VOLLEYBALL NET	2009-01-12	863	747	200DB	7 0000	77			
POWER WASHER	2009-07-30	750	650	200DB	7 0000	67			
PLAYGROUND EQUIPMENT	2010-08-15	3,309	2,540	200DB	7 0000	292			
VOLLEYBALL NETS (2)	2010-09-30	4,821	3,701	200DB	7 0000	427			
GYM FLOOR COVERING	2010-12-04	7,679	5,751	200DB	7 0000	671			
NUWAVE WIDE AREA VACUUM	2010-08-24	2,096	1,609	200DB	7 0000	185			
NETTING FOR PLAYGROUND	2010-10-25	1,865	1,397	200DB	7 0000	162			

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
SOUND SYSTEM CASSETTE RECORDER	2010-08-19	3,180	2,441	200DB	7 0000	281			
PLAYGROUND RUBBER FLOOR	2010-10-16	16,919	12,672	200DB	7 0000	1,477			
LAWN MOWER	2010-06-04	8,668	6,842	200DB	7 0000	769			
GYM FLOOR COVERING	2011-01-03	8,921	6,134	200DB	7 0000	796			
FOLDING TABLES (25)	2011-02-10	1,821	1,252	200DB	7 0000	162			
STAGE	2011-05-04	8,584	5,902	200DB	7 0000	766			
FREEZER	2011-05-11	640	440	200DB	7 0000	57			
DONUT HILL PROPERTY	2012-08-16	201,419	12,266	S/L	39 0000	5,164			
DONUT HILL LAND	2012-08-16	25,000							
LAWN MOWER	2013-06-03	10,022	6,954	200DB	7 0000	877			
DONUT HILL REPAIRS	2013-12-15	63,264	6,326	S/L	15 0000	4,218			
DONUT HILL FLOORING	2013-12-03	17,453	1,745	S/L	15 0000	1,164			
DONUT HILL REPAIRS	2014-04-01	78,960	2,632	S/L	15 0000	5,264			
REWIRE DIAMOND LIGHTS	2014-08-06	12,039	602	150DB	15 0000	1,144			
LIGHTS IN MAIN BUILDING	2014-12-11	2,000	100	150DB	15 0000	190			
HOTDOG ROASTER	2014-01-23	894	128	200DB	7 0000	219			
BASKETBALL GOALS	2014-01-23	814	116	200DB	7 0000	200			
ICE CREAM MACHINE	2014-06-16	7,000	1,000	200DB	7 0000	1,714	_		
ICE CREAM MACHINE	2014-06-16	7,000	1,000	200DB	7 0000	1,714			
BUILDING REPAIRS	2014-11-03	44,430	142	S/L	39 0000	1,140			

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
CABINETS IN CONCESSION STAND	2014-06-23	6,685	93	S/L	39 0000	171			

TY 2015 Land, Etc. Schedule

Name: GLEN S GRABER FAMILY FOUNDATION INC

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
	2,134,411	700,454	1,433,957	
	92,503		92,503	

TY 2015 Other Expenses Schedule

Name: GLEN S GRABER FAMILY FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
ADVERTISEMENT	112			112
CONCESSION SUPPLIES	33,294			33,294
DUES	334			334
INSURANCE	199,662			199,662
OFFICE SUPPLIES	217			217
PRIZES	3,663			3,663
SPECIAL EVENTS	17,520			17,520
SUPPLIES	20,193			20,193
TELEPHONE	2,230			2,230
UMPIRE FEES	40,227			40,227

TY 2015 Other Income Schedule

Name: GLEN S GRABER FAMILY FOUNDATION INC

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PROGRAM SERVICE REVENUE	29,055		29,055
RENTAL OF FACILITY	49,334		49,334
ENTRY FEES & CONCESSIONS	117,079		117,079
UTILITIES REBATE	9,850		9,850

TY 2015 Taxes Schedule

Name: GLEN S GRABER FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SALES TAXES	2,800			2,800
OTHER	41			41

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GLEN S GRABER FAMILY FOUNDATION INC

As Filed Data -

DLN: 93491159006076

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2015

Employer identification number

	83-0352635
Organization type (check of	one)
Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	√ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
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
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or nany one contributor Complete Parts I and II See instructions for determining a contributor's total contributions
Special Rules	
under sections 509(a received from any or	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations i)(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 is contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Form 990-EZ, line 1 Complete Parts I and II
during the year, total	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or cruelty to children or animals. Complete Parts I, II, and III
during the year, cont this box is checked, purpose Do not com	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, ributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of 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

Name of organization
GLEN S GRABER FAMILY FOUNDATION INC

Employer identification number 83-0352635

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 cont	tribution
1			Person	ᅜ
	GLEN S GRABER 7716 N 900 E	\$ 265,000	Payroll	Г
	MONTGOMERY, IN 47558		Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Г
		<u> </u>	Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Г
		\$	Payroll	Γ
			Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
			Person	Γ
		\$	Payroll	Г
	-		Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution
	_		Person	Γ
		\$	Payroll	Г
	-		Noncash	Γ
			(Complete Part II f contributions)	or noncash

Name of organization GLEN S GRABER FAMILY FOUNDATION INC		Employer identification number		
LEN S GRABER F	AMILY FOUNDATION INC	83-0352635		
	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	
-		s		
(a) lo.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	

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

nedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page 4	
ne of organization	ition FAMILY FOUNDATION INC		Employer identification number	
N 5 OKABEKTAN	ILI TOUNDATION INC		83-0352635	
total more line entry. of \$1,000 o	than \$1,000 for the year from any o	ne contributor. Complete co III, enter the total of <i>exclusive</i> mation once. See instruction	ibed in section 501(c)(7), (8), or (10) that lumns (a) through (e) and the following ely religious, charitable, etc., contributions is.) • \$	
(a) .from Part I	(a) rom Part I (b) Purpose of gift		(d) Description of how gift is held	
		(a) Transfer of gif	•	
_	Transferee's name, address, and	(e) Transfer of gif	Relationship of transferor to transferee	
(a) ofrom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
_	Transferee's name, address, and	(e) Transfer of gif d ZIP4	t Relationship of transferor to transferee	
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
- -				
_	Transferee's name, address, and	(e) Transfer of gif	t Relationship of transferor to transferee	
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gif	t Relationship of transferor to transferee	
-				