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# 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 <u>www.irs.gov/form990pf</u>.

Open to Public Inspection

| For                | caler           | ıdar year 2015, or tax y  | ear beginning 07-0  | 1-2015                       | , a    | nd ending 0            | 6-30-2016   |  |
|--------------------|-----------------|---|---|------------------------------|--------|------------------------|---|--|
|                    | e of foun       |   |   |                              |        | A Employer Id          | entification numb   | er   |
| UC                 | B CHART         | TABLE FOUNDATION  |   |                              |        | 20-4604858             |   |  |
| Num                | ber and s       | street (or P O box number if mail is r  | not delivered to street address)                            | Room/suite                   |        | <b>B</b> Telephone nur | nber (see instruction   | s)   |
| 92                 | WALNUT          | STREET  |   | ·                            |        | (812) 537-1016         |   |  |
|                    |                 | state or province, country, and ZIP o   | r foreign postal code                                       |                              |        | <b>C</b> If exemption  | application is pendin   | ig, check here   |
|                    |                 |   |   |                              |        |                        |   | ı  |
| <b>G</b> C1        | neck all        | that apply Initial return Final return Address chan   | A mended return   | former public charity        | •      | 2. Foreign or          | ganizations, check h<br>ganizations meeting<br>k here and attach co | the 85%  |
| <b>H</b> C l       | neck typ        | oe of organization <b>√</b> Section   | n 501(c)(3) exempt privat                                   | te foundation                |        |                        | indation status was t<br>n 507(b)(1)(A), chec                       |  |
|                    |                 | 4947(a)(1) nonexempt charita  | •   |                              |        |                        |   | . '  |
| of                 | year <i>(fr</i> | t value of all assets at end  om Part II, col (c),  1,274,950   | JAccounting method Other (specify) (Part I, column (d) must | Vash Accrube on cash basis ) | ıaı    |                        | ition is in a 60-mont<br>n 507(b)(1)(B), chec                       |  |
| Pa                 | rt I            | Analysis of Revenue a<br>(The total of amounts in columns (<br>necessailly equal the amounts in c<br>instructions)) | and Expenses (b), (c), and (d) may not                      | Revenue and expenses per     | (Ь)    | Net investment income  | Adjusted net  | Disbursements<br>for charitable<br>purposes<br>(d) (cash basis only) |
|                    | 1               | Contributions, gifts, grants, e   | tc , received (attach                                       |                              |        |                        |   | ,,,  |
|                    |                 | schedule)   |   |                              |        |                        |   |  |
|                    | 2               | Check ►   | is <b>not</b> required to                                   |                              |        |                        |   |  |
|                    | 3               | Interest on savings and temp  | oorary cash investments                                     |                              |        |                        |   |  |
|                    | 4               | Dividends and interest from s   | 21,447  |                              | 21,447 |                        |   |  |
|                    | 5a              | Gross rents   |   |                              |        |                        |   |  |
| •                  | b               | Net rental income or (loss) _   |   |                              |        |                        |   |  |
| Reverue            | 6a              | Net gain or (loss) from sale o  | fassets not on line 10                                      | -4,047                       |        |                        |   |  |
|                    | b               | Gross sales price for all asse  | ets on line 6a  |                              |        |                        |   |  |
|                    | 7               | Capital gain net income (from   | Part IV, line 2)  |                              |        | 0                      |   |  |
|                    | 8               | Net short-term capital gain   |   |                              |        |                        |   |  |
|                    | 9<br>10a        | Income modifications Gross sales less returns and   | 1   |                              |        |                        |   |  |
|                    | Ь               | allowances<br>Less Cost of goods sold   |   |                              |        |                        |   |  |
|                    | , c             | Gross profit or (loss) (attach  |   |                              |        |                        |   |  |
|                    | 11              | Other income (attach schedu   |   | 8,321                        |        | 0                      |   |  |
|                    | 12              | <b>Total.</b> Add lines 1 through 11  | ,   | 25,721                       |        | 21,447                 |   |  |
|                    | 13              | Compensation of officers, dire  |   | 0                            |        | 0                      |   | 0  |
|                    | 14              | Other employee salaries and   | wages   |                              |        |                        |   |  |
| Ş                  | 15              | Pension plans, employee ben   | efits   |                              |        |                        |   |  |
| nse                | 16a             | Legal fees (attach schedule).   |   | <b>9</b> 1,556               |        | 0                      |   | 1,556  |
| Expenses           | ь               | Accounting fees (attach sche  | edule)  | 2,255                        |        | 1,127                  |   | 1,128  |
|                    | С               | Other professional fees (atta   | ch schedule)  |                              |        |                        |   |  |
| ţĮĶ                | 17              | Interest  |   |                              |        |                        |   |  |
| tra                | 18              | Taxes (attach schedule) (see  | e instructions)   |                              |        |                        |   |  |
| and Administrative | 19              | Depreciation (attach schedul  | e) and depletion  |                              |        |                        |   |  |
| 튭                  | 20              | Occupancy   |   |                              |        |                        |   |  |
| ďΡ                 | 21              | Travel, conferences, and mee  | etings  |                              |        |                        |   |  |
| a                  | 22              | Printing and publications   |   |                              |        |                        |   |  |
| <u>bi</u>          | 23              | Other expenses (attach sche   | edule)  |                              |        |                        |   |  |
| Operating          | 24              | Total operating and administ  | ·   |                              |        |                        |   |  |
| <u>8</u>           |                 | Add lines 13 through 23   |   | 3,811                        |        | 1,127                  |   | 2,684  |
| S                  | 25              | Contributions, gifts, grants pa   | aid   | 107,421                      |        |                        |   | 107,421  |
|                    | 26              | Total expenses and disbursen<br>25  | nents.Add lines 24 and                                      | 111,232                      |        | 1,127                  |   | 110,105  |
|                    | 27              | Subtract line 26 from line 12   |   |                              |        |                        |   |  |
|                    | a .             | Excess of revenue over exper  |   | -85,511                      |        | 20.222                 |   |  |
|                    | b               | Net investment income (if ne  | , ,   |                              |        | 20,320                 |   |  |
|                    | ı C             | Adjusted net income(if negat  | ive, enter -U-)   | İ                            | ı      |                        |   | 1  |

| 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 o             |                                 |
|---------------|--------|---|--------------------------|-------------|-------------------|---------------------------------|
|               |        |   | (a) Book Value<br>41,615 | (b) Bool    | k Value<br>70,417 | (c) Fair Market Value<br>70,417 |
|               | 1      | Cash—non-interest-bearing   | 41,015                   |             | /0,41/            | 70,417                          |
|               | 2      | · · · · · · · · · <u>-</u>  |                          |             |                   |                                 |
|               | 3      | Accounts receivable   |                          |             |                   |                                 |
|               | _      | Less allowance for doubtful accounts  |                          |             |                   |                                 |
|               | 4      | Pledges receivable ►  |                          |             |                   |                                 |
|               |        | Less allowance for doubtful accounts ▶  |                          |             |                   |                                 |
|               | 5      | Grants receivable   |                          |             |                   |                                 |
|               | 6      | Receivables due from officers, directors, trustees, and other   |                          |             |                   |                                 |
|               |        | disqualified persons (attach schedule) (see instructions)   |                          |             |                   |                                 |
|               | 7      | Other notes and loans receivable (attach schedule) ▶  |                          |             |                   |                                 |
|               |        | Less allowance for doubtful accounts ▶  |                          |             |                   |                                 |
| 2             | 8      | Inventories for sale or use   |                          |             |                   |                                 |
| <b>4ssets</b> | 9      | Prepaid expenses and deferred charges   |                          |             |                   |                                 |
| As            | 10a    | Investments—U S and state government obligations (attach schedule)  |                          |             |                   |                                 |
|               | b      | Investments—corporate stock (attach schedule)   |                          |             |                   |                                 |
|               | С      | Investments—corporate bonds (attach schedule)   |                          |             |                   |                                 |
|               | 11     | Investments—land, buildings, and equipment basis ▶  |                          |             |                   |                                 |
|               |        | Less accumulated depreciation (attach schedule) ▶   |                          |             |                   |                                 |
|               | 12     | Investments—mortgage loans  |                          |             |                   |                                 |
|               | 13     | Investments—other (attach schedule)   | 1,416,441                | <b>%</b> 3  | 1,302,128         | 1,204,533                       |
|               | 14     | Land, buildings, and equipment basis ▶  |                          |             |                   |                                 |
|               |        | Less accumulated depreciation (attach schedule) ▶   |                          |             |                   |                                 |
|               | 15     | O ther assets (describe ▶)  |                          |             |                   |                                 |
|               | 16     | <b>Total assets</b> (to be completed by all filers—see the  |                          |             |                   |                                 |
|               |        | ınstructions Also, see page 1, item I)  | 1,458,056                |             | 1,372,545         | 1,274,950                       |
|               | 17     | Accounts payable and accrued expenses   |                          |             |                   |                                 |
| _             | 18     | Grants payable  |                          |             |                   |                                 |
| abilities     | 19     | Deferred revenue  |                          |             |                   |                                 |
| ≝             | 20     | Loans from officers, directors, trustees, and other disqualified persons  |                          |             |                   |                                 |
| <u> </u>      | 21     | Mortgages and other notes payable (attach schedule)   |                          |             |                   |                                 |
| _             | 22     | Other liabilities (describe ▶)  |                          |             |                   |                                 |
|               | 23     | Total liabilities(add lines 17 through 22)  | 0                        |             | 0                 |                                 |
| _             |        | Foundations that follow SFAS 117, check here ▶ □  |                          |             |                   |                                 |
| Ses           |        | and complete lines 24 through 26 and lines 30 and 31.   |                          |             |                   |                                 |
| ä             | 24     | Unrestricted  |                          |             |                   |                                 |
| Balance       | 25     | Temporarily restricted  |                          |             |                   |                                 |
|               | 26     | Permanently restricted  |                          |             |                   |                                 |
| Fund          |        | Foundations that do not follow SFAS 117, check here   |                          |             |                   |                                 |
| <u></u>       |        | and complete lines 27 through 31.   |                          |             |                   |                                 |
|               | 27     | Capital stock, trust principal, or current funds  | 0                        |             | 0                 |                                 |
| Assets        | 28     | Paid-in or capital surplus, or land, bldg , and equipment fund  | 0                        |             | 0                 |                                 |
|               | 29     | Retained earnings, accumulated income, endowment, or other funds  | 1,458,056                |             | 1,372,545         |                                 |
| Net           | 30     | Total net assets or fund balances(see instructions)   | 1,458,056                |             | 1,372,545         |                                 |
| _             | 31     | Total liabilities and net assets/fund balances(see instructions)  | 1,458,056                |             | 1,372,545         |                                 |
| Pa            | rt III | Analysis of Changes in Net Assets or Fund Balances  |                          |             |                   |                                 |
| 1             |        | Total net assets or fund balances at beginning of year—Part II, column (  | 'a). line 30 (must a     | aree        |                   |                                 |
| -             |        | with end-of-year figure reported on prior year's return)  | ,                        | -           | 1                 | 1,458,056                       |
| 2             |        | Enter amount from Part I, line 27a  |                          |             | 2                 | -85,511                         |
| 3             |        | ·   |                          |             | 3                 | 03,311                          |
| 4             |        | Add lines 1, 2, and 3   |                          |             | 4                 | 1,372,545                       |
| 5             |        | Decreases not included in line 2 (itemize)  |                          |             | 5                 | 1,3,2,343                       |
| 6             |        | Total net assets or fund balances at end of year (line 4 minus line 5)—Pa   |                          | —<br>ine 30 | 6                 | 1.372.545                       |

the Part VI instructions

How acquired

|              |   |           | l(s) of property sold (e g , re<br>or common stock, 200 shs |                          | How acquire P—Purchase  (b) D—Donation | e   (c)  | Date acquired<br>(mo , day, yr ) | Date sold (d) (mo , day, yr )                 |
|--------------|---|-----------|---|--------------------------|--|----------|----------------------------------|---|
| 1 a          | 7,500 united commu                                | nity ban  | <br>corp  |                          | Р                                      |          |                                  | 2015-12-04                                    |
| b            | <u>'</u>  |           |   |                          |  | +        |                                  |   |
| С .          |   |           |   |                          |  |          |                                  |   |
| d            |   |           |   |                          |  | +        |                                  |   |
| <u>е</u>     |   |           |   |                          |  | +        |                                  |   |
|              |   | T         | Depresuation allows   | d Coo                    | t or other back                        | ᅮ        | Cour                             | or (loss)                                     |
| (е           | ) Gross sales price                               |           | Deprectation allowed (f) (or allowable)                     |                          | st or other basis<br>expense of sale   |          |                                  | or (loss)<br>(f) minus (g)                    |
| а            | 1   | 10,028    |   | (3)                      | 114,0                                  | 75       | . , , , , ,                      | -4,047  |
| ь            |   | •         |   |                          | <u> </u>                               |          |                                  | <u>.</u> _                                    |
| c            |   |           |   |                          |  |          |                                  |   |
| d            |   |           |   |                          |  |          |                                  |   |
| е            |   |           |   |                          |  |          |                                  |   |
|              | mploto only for accets                            | showing   | gain in column (h) and owns                                 | d by the foundation      | n on 13/31/60                          | +        | - (C                             | <u></u>                                       |
|              | implete offig for assets :                        | snowing   | gain in column (h) and owne<br>Adjusted basis               | · ·                      | cess of col (I)                        | $\dashv$ |                                  | (h) gain minus<br>it less than -0-) <b>or</b> |
| (i)          | FMV as of 12/31/69                                |           | (j) as of 12/31/69  |                          | ercol (j), if any                      | (1)      |                                  | from col (h))                                 |
| а            |   |           |   |                          |  |          |                                  | -4,047  |
| b            |   |           |   |                          |  |          |                                  |   |
| С            |   |           |   |                          |  |          |                                  |   |
| d            |   |           |   |                          |  |          |                                  |   |
| e            |   |           |   |                          |  |          |                                  |   |
|              |   |           | 1   | If gaın, also entei      | r ın Part I, line 7                    |          |                                  |   |
| 2            | Capital gain net inco                             | me or (n  |   | If (loss), enter -0      |  | }   ,    | 2                                | -4,047  |
| 3            | Net short-term canit                              | al naın n | r (loss) as defined in section                              | ns 1222(5) and (6        | 5)                                     | ·        | -                                |   |
| ,            | ·   | _         | •   | , , ,                    | •                                      | ,        |                                  |   |
|              | in Part I, line 8 .                               |           | ne 8, column (c) (see ınstru                                |                          | enter -u-<br>• •                       | }  .     | .                                |   |
| Dowl         | ,   | landa (   | Castian 4040(a) fan B                                       | - d                      | - Not Toursetus                        | <u> </u> | 3  <br>5                         |   |
| Part         | Qualification                                     | Jnaer :   | Section 4940(e) for R                                       | educed lax o             | n Net Investm                          | ent 1    | income                           |   |
|              | ional use by domestic p<br>on 4940(d)(2) applies, |           | oundations subject to the se<br>is part blank               | ection 4940(a) tax       | on net investmen                       | t inco   | me )                             |   |
| Was the      | foundation liable for th                          | e sectio  | n 4942 tax on the distributa                                | able amount of any       | vear in the base i                     | period   | 7                                | ┌ Yes 🔽 No                                    |
|              |   |           | y under section 4940(e) Do                                  | •                        | •                                      |          |                                  |   |
| <b>1</b> Ent | cer the appropriate amo                           | unt in ea | ach column for each year, se                                | ee instructions bei      | fore makıng any er                     | itries   |                                  |   |
|              | (a)   |           |   |                          | ,                                      |          | (d)                              |   |
|              | period years Calendar                             | Adju:     | (b) sted qualifying distributions                           | (c<br>Net value of nonch |  |          | Distributio<br>(col (b) divided  | n ratio                                       |
| year (C      | or tax year beginning in) 2014                    |           | 87,678  |                          | 1,194,285                              |          | (cor (b) divided                 | 0 073415                                      |
|              | 2013  |           | 109,047   |                          | 1,130,625                              |          |                                  | 0 096448                                      |
|              | 2012  |           | 83,494  |                          | 1,100,153                              |          |                                  | 0 075893                                      |
|              | 2011  |           | 55,462  |                          | 1,001,992                              |          |                                  | 0 055352                                      |
|              | 2010  |           | 82,599  |                          | 1,221,573                              |          |                                  | 0 067617                                      |
| 2            | <b>Total</b> of line 1, columi                    | n (d)     |   |                          |  | 2        |                                  | 0 368725                                      |
| 3            | _   |           | the 5-year base period—div<br>dation has been in existence  |                          | ' ' '                                  | 3        |                                  | 0 073745                                      |
| 4            | •   |           | ritable-use assets for 2015                                 | •                        | F                                      | 4        |                                  | 1,318,750                                     |
| 5            | Multiply line 4 by line                           | e 3       |   |                          |  | 5        |                                  | 97,251  |
| 6            | Enter 1% of net inve                              | stment II | ncome (1% of Part I, line 2)                                | 7b)                      |  | 6        |                                  | 203   |
| 7            |   |           |   |                          | F                                      | 7        |                                  | 97,454  |
| 8            |   |           | from Part XII, line 4                                       |                          |  | 8        |                                  | 110,105                                       |
| -            |   |           | than line 7, check the box i                                |                          | L                                      |          | using a 1% ta                    |   |

| Pai        | t VII-A Statements Regarding Activities (continued)   |         |       |        |
|------------|---|---------|-------|--------|
| 11         | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the   |         |       |        |
|            | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)   | 11      |       | No     |
| 12         | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had   |         |       |        |
|            | advisory privileges? If "Yes," attach statement (see instructions)  | 12      |       | No     |
| 13         | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13      | Yes   |        |
|            | Website address ►N/A  |         |       |        |
| 14         | The books are in care of ▶benjamin turner Telephone no ▶(812  | !) 537- | 4822  |        |
|            | Located at ▶92 WALNUT STREET LAWRENCEBURG IN ZIP+4 ▶47025   |         |       |        |
| 15         | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here  |         | ▶ ┌   | -      |
|            | 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 over  |         | 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   |         |       | 1      |
|            | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.   |         | Yes   | No     |
| 1a         | During the year did the foundation (either directly or indirectly)  |         |       |        |
|            | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes Vo  |         | <br>  | <br>   |
|            | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)   |         |       |        |
|            | a disqualified person?  | 1       | <br>  | <br>   |
|            | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes Vo  |         | <br>  | ]<br>[ |
|            | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes Vo   |         | <br>  | <br>   |
|            | (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)?   | 1       | <br>  | <br>   |
|            | (6) Agree to pay money or property to a government official? (Exception. Check "No"  If the foundation agreed to make a grant to or to employ the official for a period       |         |       |        |
|            | after termination of government service, if terminating within 90 days ) Yes Vo   |         |       |        |
| b          | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations   | i       | !<br> | i<br>İ |
| _          | 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  |         |       |        |
|            | Γ   |         |       |        |
| 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      |       | No     |
| 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, 20, 20   | İ       | İ     | Ì      |
| b          | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)   |         |       |        |
|            | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)   |         |       |        |
|            | to <b>all</b> years listed, answer "No" and attach statement—see instructions )   | 2b      |       |        |
| c          | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here  |         |       |        |
| 2-         | ▶ 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?  |         |       |        |
| h          | any time during the year?   |         | !<br> | !<br>  |
| ,          | or disqualified persons after May 26, 1969, <b>(2)</b> 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  |         |       |        |
|            | ıf the foundation had excess business holdings in 2015 )  | 3b      |       |        |
| <b>4</b> a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a      |       | No     |
| b          | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its  |         |       |        |
|            | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?  | 4b      | DE :  | No     |

Form **990-PF** (2015)

1

5

1

2a

3

4

5

6

7

2

5

Part XII

Part XI

1.261.883

1,338,832

1,338,832

20,082

203 65,735

8,321

n

74.056

74.056

110,105

110,105

109,902

Form **990-PF** (2015)

203

76,949

### Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,

purposes

Fair market value of all other assets (see instructions). . . . . . . . . . . . .

Reduction claimed for blockage or other factors reported on lines 1a and 1e

2 3

check here ► and do not complete this part.)

Tax on investment income for 2015 from Part VI, line 5. . . . . .

**Qualifying Distributions** (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Income tax for 2015 (This does not include the tax from Part VI). . .

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Distributable Amount

Distributable amount before adjustments Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2a

2b

4 5

203

2c

3 4

5

6

7

1a

1h

2

3а

3b

4

5

1a

1b

1c 1d

> 2 3

1,318,750 65,938 (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations 1 65,938

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, qifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

| Р | art XIII Undistributed Income (see insti   | ructions) (a) | (b)                 | (c)  | (d)                     |
|---|--|---------------|---------------------|------|-------------------------|
|   |  | Corpus        | Years prior to 2014 | 2014 | 2015                    |
| 1 | Distributable amount for 2015 from Part XI, line 7   |               |                     |      | 74,056                  |
| 2 | Undistributed income, if any, as of the end of 2015  |               |                     |      |                         |
| а | Enter amount for 2014 only   |               |                     | 0    |                         |
| b | Total for prior years 20 , 20 , 20   |               | 0                   |      |                         |
| 3 | Excess distributions carryover, if any, to 2015  |               |                     |      |                         |
| а | From 2010  |               |                     |      |                         |
| b | From 2011 6,732  |               |                     |      |                         |
| c | From 2012  |               |                     |      |                         |
| d | From 2013 53,004   |               |                     |      |                         |
| е | From 2014  |               |                     |      |                         |
| f | <b>Total</b> of lines 3a through e   | 140,482       |                     |      |                         |
| 4 | Qualifying distributions for 2015 from Part  |               |                     |      |                         |
|   | XII, line 4 🕨 \$ 110,105   |               |                     |      |                         |
| а | Applied to 2014, but not more than line 2a   |               |                     | 0    |                         |
| b | Applied to undistributed income of prior years   |               | 0                   |      |                         |
|   | (Election required—see instructions)   |               |                     |      |                         |
| c | Treated as distributions out of corpus (Election   | 0             |                     |      |                         |
|   | required—see instructions)   |               |                     |      |                         |
| d | Applied to 2015 distributable amount   |               |                     |      | 74,056                  |
| е | Remaining amount distributed out of corpus   | 36,049        |                     |      |                         |
| 5 | Excess distributions carryover applied to 2015   | 0             |                     |      | (                       |
|   | (If an amount appears in column (d), the   |               |                     |      |                         |
|   | same amount must be shown in column (a) )  |               |                     |      |                         |
| 6 | Enter the net total of each column as indicated below:                                     |               |                     |      |                         |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 176,531       |                     |      |                         |
|   | Prior years' undistributed income Subtract   |               |                     |      |                         |
|   | line 4b from line 2b   |               | 0                   |      |                         |
| c | Enter the amount of prior years' undistributed   |               |                     |      |                         |
|   | income for which a notice of deficiency has  |               |                     |      |                         |
|   | been issued, or on which the section 4942(a)   |               | 0                   |      |                         |
|   | tax has been previously assessed   |               | -                   |      |                         |
| a | Subtract line 6c from line 6b Taxable amount —see instructions                             |               | 0                   |      |                         |
| ۵ | Undistributed income for 2014 Subtract line  |               |                     |      |                         |
| _ | 4a from line 2a Taxable amount—see   |               |                     |      |                         |
|   | instructions   |               |                     | 0    |                         |
| f | Undistributed income for 2016 Subtract   |               |                     |      |                         |
|   | lines 4d and 5 from line 1 This amount must  |               |                     |      | ſ                       |
| _ | be distributed in 2015   |               |                     |      |                         |
| ′ | A mounts treated as distributions out of   |               |                     |      |                         |
|   | corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may |               |                     |      |                         |
|   | be required - see instructions)  | 0             |                     |      |                         |
| 8 | Excess distributions carryover from 2010 not   | 22.004        |                     |      |                         |
|   | applied on line 5 or line 7 (see instructions)   | 22,884        |                     |      |                         |
| 9 | Excess distributions carryover to 2016.  | 150 647       |                     |      |                         |
|   | Subtract lines 7 and 8 from line 6a  | 153,647       |                     |      |                         |
|   | Analysis of line 9   |               |                     |      |                         |
|   | Excess from 2011 6,732   | 1             |                     |      |                         |
|   | Excess from 2012   |               |                     |      |                         |
|   | Excess from 2013 53,004  |               |                     |      |                         |
|   | Excess from 2014   |               |                     |      |                         |
| е | Excess from 2015   |               |                     |      | 000 57                  |
|   |  |               |                     | Fo   | rm <b>990-PF</b> (2015) |

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

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

501(C)(3) CHARITIES, NO FUNDING TO POLITICAL OR FRATERNAL ORGANIZATIONS OR INDIVIDUALS

ONE TO TWO PAGE LETTER

c Any submission deadlines

NONE

factors

Form 990-PF (2015)

Part XV Supplementary Information(continued)

| 3 Grants and Contributions Paid                  | During the Year or App                                  | roved for F             | uture Payment       |         |
|--|---|-------------------------|---------------------|---------|
| Recipient  | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or | A mount |
| Name and address (home or business)              | any foundation manager<br>or substantial contributor    | recipient               | contribution        |         |
| a Paid during the year See Additional Data Table | any foundation manager or substantial contributor       |                         | Contribution        |         |
|  |   |                         |                     |         |
| Total  |   |                         | ▶ 3a                | 107,421 |
| <b>b</b> Approved for future payment  Total      |   |                         |                     | 0       |

| c. g.033          | s amounts unless otherwise indicated   | Unrelated bu         | siness income         | Excluded by section   | 512, 513, or 514 | <b>(e)</b><br>Related or exemp           |
|-------------------|--|----------------------|-----------------------|-----------------------|------------------|--|
| <b>1</b> Program  | n service revenue  | (a)<br>Business code | <b>(b)</b><br>A mount | (c)<br>Exclusion code | (d)<br>A mount   | function income<br>(See<br>instructions) |
| a                 |  |                      |                       |                       |                  | macraeciona y                            |
|                   |  |                      |                       |                       |                  |  |
|                   |  |                      |                       |                       |                  |  |
|                   |  |                      |                       |                       |                  |  |
| f                 |  |                      |                       |                       |                  |  |
| g Fees<br>2 Membe | and contracts from government agencies rship dues and assessments st on savings and temporary cash |                      |                       |                       |                  |  |
|                   | ments  |                      |                       | 14                    | 21.447           |  |
|                   | nds and interest from securities   |                      |                       | 14                    | 21,447           |  |
|                   | financed property  |                      |                       |                       |                  |  |
|                   | ebt-financed property  |                      |                       |                       |                  |  |
| proper            | ntal income or (loss) from personal<br>ty  |                      |                       |                       |                  |  |
| 8 Gain or         | nvestment income   |                      |                       | 18                    | -4,047           |  |
|                   | ome or (loss) from special events  |                      |                       | 10                    | 1,017            |  |
|                   | profit or (loss) from sales of inventory   |                      |                       |                       |                  |  |
|                   | revenue <b>a</b> refunded grant  |                      |                       |                       |                  | 8,32                                     |
|                   |  |                      |                       |                       |                  |  |
|                   |  |                      |                       |                       |                  |  |
|                   | al Add columns (b), (d), and (e).  |                      | 0                     |                       | 17,400           | 8,32                                     |
| .3 Total.A        | dd line 12, columns (b), (d), and (e)  |                      |                       |                       | 13               | 25,721                                   |
| (See w            | orksheet in line 13 instructions to verify   | calculations)        | lichmont of E         | vomnt Burnoc          | 0.5              |  |
| Lairva            | Polationship of Activities to  |                      |                       | xempt Purpos          | <b>C</b> 3       |  |
| Line No.          | Explain below how each activity for wh   | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
|                   |  | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh the accomplishment of the foundation's                      | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.          | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |
| Line No.<br>▼     | Explain below how each activity for wh<br>the accomplishment of the foundation's<br>instructions ) | ıch ıncome ıs rep    | oorted in column (    |                       |                  |  |

| Part XVI                | Information Re<br>Noncharitable  |                         |                                      |   | actions and I                          | Relationships With   |                              |                    |                  |
|-------------------------|--|-------------------------|--------------------------------------|---|--|--|------------------------------|--------------------|------------------|
|                         | organization directly or i   | ndirectly e             | engage in any of                     | the following wit                             |  |  |                              | Yes                | No               |
| organizat               | tions?   |                         |                                      |   |  |  |                              |                    |                  |
|                         | s from the reporting four  |                         |                                      |   |  |  |                              |                    |                  |
| ` '                     | h  |                         |                                      |   |  |  | 1a(1)                        |                    | No               |
| ` '                     | erassets   |                         |                                      |   |  |  | 1a(2)                        |                    | No               |
| <b>b</b> Other tra      |  |                         |                                      |   |  |  |                              |                    |                  |
|                         | es of assets to a noncha   |                         |                                      |   |  |  | 1b(1)                        |                    | No               |
| ` '                     | chases of assets from a  |                         | . 3                                  |   |  |  | 1b(2)                        |                    | No               |
|                         | tal of facilities , equipme  |                         |                                      |   |  |  | 1b(3)                        |                    | No               |
|                         | nbursement arrangemer  |                         |                                      |   |  |  | 1b(4)                        |                    | No               |
|                         | ns or loan guarantees.   |                         |                                      |   |  |  | 1b(5)                        |                    | No               |
|                         |  |                         |                                      |   |  |  | 1b(6)                        |                    | No               |
| _                       |  | _                       | ·                                    |   |  |  | 1c                           | <u> </u>           | No               |
| of the go<br>in any tra | ods, other assets, or se<br>ansaction or sharing arm   | rvices giv<br>angement  | en by the report<br>, show in column | ing foundation I<br>i <b>(d)</b> the value of | f the foundation r<br>the goods, other | ould always show the fair m<br>eceived less than fair mark<br>assets, or services receiv | et value<br>ed               | <b>:</b>           |                  |
| (a) Line No             | (b) Amount involved  | (c) Name                | of noncharitable ex                  | empt organization                             | (d) Description                        | of transfers, transactions, and sh   | arıng arra                   | ngemen             | ıts              |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
| describe<br><b>√</b> No | undation directly or indidin section 501(c) of the complete the following (a) Name of organization | ne Code (d<br>schedule  | other than sectio                    | •   | in section 527?.                       | organizations  |                              | es                 |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
|                         |  |                         |                                      |   |  |  |                              |                    |                  |
| the                     |  | nd belief,<br>er has an | ıt ıs true, correc                   |   |  | retur<br>with<br>below   | the IRS di<br>n<br>the prepa | sed on<br>scuss th | all<br>nis<br>vn |
|                         | J  |                         | r                                    | -   |  |  | ınstr )?                     | Yes N              | 10               |
|                         | Print/Type preparer's<br>Maxwell M Sullivan  |                         | Preparer's Sıgr                      | nature  | Date<br>2017-03-06                     | Check if selfemployed ▶ ☐ F  | 016790                       | 066                |                  |
| Paid<br>Preparer<br>Use | Firm's name  CLARK SCHAEFER H.  Firm's address   | ACKETT 8                | & CO                                 |   |  | Firm's EIN ▶ 31-08000  | 5 3                          |                    |                  |
| Only                    | 1 East 4th Street Cind   | cinnati, O              | H 45202                              |   |  | Phone no (513) 241-31  | 11                           |                    |                  |

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 (b) devoted to position | (c) Compensation(If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | Expense account, (e) other allowances |
|---|---|--|---|---------------------------------------|
| WILLIAM F RITZMANN                        | DIRECTOR  | 0  | 0   | 0                                     |
| 92 WALNUT STREET<br>LAWRENCEBURG,IN 47025 | 0 00  |  |   |                                       |
| ELMER G MCLAUGHLIN                        | DIRECTOR  | 0  | 0   | 0                                     |
| 92 WALNUT STREET<br>LAWRENCEBURG,IN 47025 | 0 00  |  |   |                                       |
| ROBERT J EWBANK                           | DIRECTOR  | 0  | 0   | 0                                     |
| 92 WALNUT STREET<br>LAWRENCEBURG,IN 47025 | 0 00  |  |   |                                       |
| JERRY W HACKER                            | DIRECTOR  | 0  | 0   | 0                                     |
| 92 WALNUT STREET<br>LAWRENCEBURG,IN 47025 | 0 00  |  |   |                                       |
| FREDERICK L MCCARTER                      | DIRECTOR  | 0  | 0   | 0                                     |
| 92 WALNUT STREET                          | 0 00  |  |   |                                       |

LAWRENCEBURG, IN 47025

Recipient If recipient is an individual, Foundation Purpose of grant or A mount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor

| a Paid during the year                            |      |                         |                           |     |
|---|------|-------------------------|---------------------------|-----|
| All Saints Parish 25743 SR1<br>Guilford, IN 47022 | none | Qualified<br>public cha | unrestricted contribution | 500 |

| Alzheimer's Support Groups of SEI PO BO X 3692 Lawrenceburg, IN 47025 Qualified public cha unrestricted contribution 500 | All Saints Parish 25743 SR1<br>Guilford, IN 47022 | none | Qualified<br>public cha | unrestricted contribution | 500 |
|--|---|------|-------------------------|---------------------------|-----|
|  | PO BOX 3692                                       | None | `                       | unrestricted contribution | 500 |

| Alzheimer's Support Groups of SEI<br>PO BOX 3692<br>Lawrenceburg,IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 500 |
|---|------|-------------------------|---------------------------|-----|
| Aurora Elementary School<br>6098 Squire PI<br>Aurora IN 47001             | None | Qualified<br>public cha | unrestricted contribution | 840 |

| PO BOX 3692<br>Lawrenceburg,IN 47025                          |      | public cha              |                           |     |
|---|------|-------------------------|---------------------------|-----|
| Aurora Elementary School<br>6098 Squire Pl<br>Aurora,IN 47001 | None | Qualified<br>public cha | unrestricted contribution | 840 |
| Auxiliary of Dearborn County Hospital                         | None | Q ualified              | unrestricted contribution | 300 |

| Aurora Elementary School<br>6098 Squire Pl<br>Aurora,IN 47001                          | None | Qualified<br>public cha | unrestricted contribution | 840 |
|--|------|-------------------------|---------------------------|-----|
| Auxiliary of Dearborn County Hospital<br>600 Wilson Creek Dr<br>Lawrenceburg, IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 300 |

| Aurora, İN 47001   |      | '                       |                           |     |
|--|------|-------------------------|---------------------------|-----|
| Auxiliary of Dearborn County Hospital<br>600 Wilson Creek Dr<br>Lawrenceburg, IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 300 |
| Batesville Area Resource Center  | None | Qualified               | unrestricted contribution | 500 |

| Auxiliary of Dearborn County Hospital<br>600 Wilson Creek Dr<br>Lawrenceburg, IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 300 |
|--|------|-------------------------|---------------------------|-----|
| Batesville Area Resource Center  | None | Qualified               | unrestricted contribution | 500 |

| 600 Wilson Creek Dr<br>Lawrenceburg, IN 47025           |      | public cha              |                           |     |
|---|------|-------------------------|---------------------------|-----|
| Batesville Area Resource Center<br>PO Box 55 Batesville | None | Qualified<br>public cha | unrestricted contribution | 500 |

| Batesville Area Resource Center<br>PO Box 55 Batesville<br>Batesville,IN 47006 | None | Qualified<br>public cha | unrestricted contribution | 500 |  |
|--|------|-------------------------|---------------------------|-----|--|
| Total  |      |                         |                           |     |  |

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 show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor a Paid during the year Big Brothers Big Sisters of Greater None Oualified unrestricted contribution 1,700 Cincinnati public cha 2412 Picnic Woods Lawrenceburg, IN 47025 Bright Elementary School PTO None Oualified unrestricted contribution 500 22593 Stateline Rd public cha Lawrenceburg, IN 47025 Bright Volunteer Fire Co Inc None Qualified unrestricted contribution 500 23759 Brightwood Dr public cha Lawrenceburg, IN 47025 CGA PARENTS CLUB None Qualified Unrestricted contribution 1,000 3635 woodridge blvd public cha fairfield, OH 45014 Character Council PO Box 33144 None Qualified unrestricted contribution 500 cincinnati, OH 45233 public cha

107,421

Total . .

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 show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor a Paid during the year Children's Advocacy Center of None Oualified unrestricted contribution 3,000 Southeastern Indiana public cha 12211 Rullman Dr Dillsboro, IN 47018 Cincinnati Reds Community Fund None Oualified unrestricted contribution 300 1513 Madison Ave public cha cincinnati, OH 45231 CITY OF GREENDALE None GOV Unrestricted contribution 2,500 811 tanner ave greendale, IN 470251467 City of Lawrenceburg 349 Walnut St None GOV unrestricted contribution 2,500 Lawrenceburg, IN 47025

qualified

public cha

unrestricted contribution

community mental health center inc

285 bielby road

Total . .

lawrenceburg, IN 47025

none

150

107,421

| Recipient   | If recipient is an individual,   |                         | Purpose of grant or       | A mount |
|---|--|-------------------------|---------------------------|---------|
| Name and address (home or business)   | show any relationship to<br>any foundation manager<br>or substantial contributor | status of<br>recipient  | contribution              |         |
| <b>a</b> Paid during the year   |  |                         |                           |         |
| Dearborn Adult Center<br>311 w tate street<br>lawrenceburg,IN 470251978                           | none   | qualified<br>public cha | unrestricted contribution | 3,600   |
| DEARBORN COMMUNITY<br>FOUNDATION INC<br>322 walnut street<br>lawrenceburg,IN 47025                | None   | Qualified<br>public cha | Unrestricted contribution | 3,050   |
| Dearborn County 4-H<br>233 main street<br>aurora,IN 47001   | none   | qualified<br>public cha | unrestricted contribution | 6,775   |
| Dearborn County Citizens Against<br>Substance Abuse<br>423 Walnut St<br>lawrenceburg, IN 47025    | None   | Qualified<br>public cha | unrestricted contribution | 1,400   |
| Dearborn County Clearinghouse for<br>Emergency Aid<br>215 Fourth St PO Box 478<br>Aurora,IN 47001 | None   | Qualified<br>public cha | unrestricted contribution | 2,500   |

| If recipient is an individual,   |  | Purpose of grant or  | A mount  |
|--|--|--|--|
| show any relationship to<br>any foundation manager<br>or substantial contributor | status of<br>recipient   | contribution   |  |
|  |  |  |  |
| . None   | Qualified<br>public cha  | Unrestricted contribution  | 1,000  |
| None   | Qualified public cha   | unrestricted contribution  | 1,000  |
| None   | Qualified public cha   | unrestricted contribution  | 3,415  |
| None   | Qualified public cha   | unrestricted contribution  | 2,000  |
| None   | Qualified public cha   | unrestricted contribution  | 110  |
|  | show any relationship to any foundation manager or substantial contributor  None  None  None | show any relationship to any foundation manager or substantial contributor  None  Qualified public cha  None  Qualified public cha  None  Qualified public cha  None  Qualified public cha  Qualified public cha  Qualified public cha  Qualified public cha | show any relationship to any foundation manager or substantial contributor  None  Qualified public cha  None  Qualified public cha  Qualified public cha  None  Qualified public cha  None  Qualified public cha  None  Qualified public cha  None  Qualified public cha  None  Qualified public cha  None  Qualified public cha  None  Qualified unrestricted contribution  Qualified public cha  None  Qualified unrestricted contribution |

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 show any relationship to contribution status of Name and address (home or any foundation manager recipient business) or substantial contributor a Paid during the year Franklin County 4-H PO Box 10 None Oualified unrestricted contribution 475 Bath, IN 47010 public cha Franklin County Community None Oualified unrestricted contribution 225 Foundation public cha 527 Main St Brookville, IN 47012 Friends of the Lawrenceburg Public None Oualified unrestricted contribution 550 Library District public cha 150 Mary St Lawrenceburg, IN 47025 Great Parks Foundation None Qualified unrestricted contribution 150 10245 Winton Rd public cha cincinnati, OH 45231 Greendale Middle School None Oualified unrestricted contribution 700 200 Tiger Blvd public cha Lawrenceburg, IN 47025 Total . . 107,421

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 show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor. a Paid during the year Hillforest Historical Foundation qualified unrestricted contribution 4.770 none 4696 veraestau In public cha aurora, IN 47001 Historic Hoosier Hills R.C. & D. Inc. None Qualified unrestricted contribution 250 800 Fifth Street public cha Rising Sun, IN 47040 Indiana Landmarks None Qualified unrestricted contribution 2,500 4696 Veraestau Lane public cha Aurora, IN 47001 INDIANA SPECIAL OLYMPICS qualified unrestricted contribution 1,500 none 429 Manchester St public cha Aurora, IN 47001 Ivy Tech Foundation Inc 500 None Qualified unrestricted contribution 590 Ivy Tech Dr public cha

107,421

Madison, IN 47250

| 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)                                      |   | recipient            |                                  |         |
| <b>a</b> Paid during the year  |   |                      |                                  |         |
| jac-cen-del high school<br>4586 N US HIGHWAY 421<br>OSGOOD,IN 47037      | None  | Qualified public cha | unrestricted contribution        | 2,500   |
| JCD Scholarship Foundation<br>4544 N US Highway 421<br>OSGOOD,IN 47037   | None  | Qualified public cha | unrestricted contribution        | 1,500   |
| Laurens Fight for Cure<br>352 Schnebelt St<br>Lawrenceburg, IN 47025     | None  | Qualified public cha | unrestricted contribution        | 500     |
| Lawrenceburg Activities<br>100 tiger blvd<br>lawrenceburg, IN 470251694  | None  | Qualified public cha | unrestricted contribution        | 935     |
| LAWRENCEBURG HIGH SCHOOL<br>100 tiger blvd<br>lawrenceburg, IN 470251694 | None  | Qualified public cha | Unrestricted contribution        | 3,718   |
| Total  |   |                      | ▶ 3a                             | 107,421 |

Recipient If recipient is an individual, Foundation Purpose of grant or A mount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor a Paid during the year Oughted. l Nana Lawrenceburg Main Street Inc 1,000 118 Walnut St Lawrenceburg, IN 47025

| 5           | None | public cha              | unrestricted contribution |
|-------------|------|-------------------------|---------------------------|
| main street | none | qualified<br>public cha | unrestricted contribution |

| 0.   |      |                         |                           | 1      |
|--|------|-------------------------|---------------------------|--------|
| Main Street Aurora 231 main street aurora,IN 47001                   | none | qualified<br>public cha | unrestricted contribution | 11,100 |
| Margaret Mary Health Foundation<br>PO BOX 226<br>Batesville IN 47006 | None | Qualified<br>public cha | Unrestricted contribution | 1,000  |

| aurora,IN 47001  |      | public cha              |                           |       |
|--|------|-------------------------|---------------------------|-------|
| Margaret Mary Health Foundation<br>PO BOX 226<br>Batesville,IN 47006 | None | Qualified<br>public cha | Unrestricted contribution | 1,000 |
| Melodic Connections Inc  | None | Q ualified              | unrestricted contribution | 1,000 |

| PO BOX 226<br>Batesville, IN 47006                                      | None | public cha               | omestricted contribution  | 1,000 |
|---|------|--------------------------|---------------------------|-------|
| Melodic Connections Inc<br>407 Vine St Suite 112<br>cincinnati,OH 45202 | None | Q ualified<br>public cha | unrestricted contribution | 1,000 |

| ,   |      |                         |                           |       |
|---|------|-------------------------|---------------------------|-------|
| Melodic Connections Inc<br>407 Vine St Suite 112<br>cincinnati,OH 45202 | None | Qualified<br>public cha | unrestricted contribution | 1,000 |
| Milan Community Dollars for Scholars                                    | None | Q ualified              | unrestricted contribution | 1,500 |

| 407 Vine St Suite 112<br>cincinnati, OH 45202            | None | public cha              | unestreed contribution    | 1,000 |
|--|------|-------------------------|---------------------------|-------|
| Milan Community Dollars for Scholars<br>609 N Warpath Dr | None | Qualified<br>public cha | unrestricted contribution | 1,500 |

| Cilicililati, Ori 43202  |      |                         |                           |       |
|--|------|-------------------------|---------------------------|-------|
| Milan Community Dollars for Scholars<br>609 N Warpath Dr<br>MILAN,IN 47031 | None | Qualified<br>public cha | unrestricted contribution | 1,500 |
|  |      |                         |                           |       |

Total . .

107,421

Recipient If recipient is an individual, Foundation Purpose of grant or A mount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor a Paid during the year Milan Community Emergency Relief None Qualified unrestricted contribution 500 PO Box 457 public cha

| MILAN,IN 4/031   |                         |                           |
|--|-------------------------|---------------------------|
| Mılan Elementary School<br>418 E Carr St<br>MILAN,IN 47031 | Qualified<br>public cha | unrestricted contribution |
|  |                         |                           |

| Milan Elementary School<br>418 E Carr St<br>MILAN,IN 47031 | None | Qualified<br>public cha | unrestricted contribution | 2,500 |
|--|------|-------------------------|---------------------------|-------|
| Mılan Hıgh School 609 N Warpath Dr<br>MILAN,IN 47031       | None | Qualified<br>public cha | unrestricted contribution | 3,250 |

| · · · · · · · · · · · · · · · · · · ·                     |      |                         |                           |      |
|---|------|-------------------------|---------------------------|------|
| Milan High School 609 N Warpath Dr<br>MILAN,IN 47031      | None | Qualified<br>public cha | unrestricted contribution | 3,25 |
| National Eating Disorders Asso<br>165 W 46th St Suite 402 | None | Qualified<br>public cha | unrestricted contribution | 25   |

| MILAN,IN 47031  |      | public cha              |                           |     |
|---|------|-------------------------|---------------------------|-----|
| National Eating Disorders Asso<br>165 W 46th St Suite 402<br>New york, NY 10036 | None | Qualified<br>public cha | unrestricted contribution | 250 |
| Name I I amanana Dahah datatan Tara   | N    | 0                       |                           | 135 |

| National Eating Disorders Asso<br>165 W 46th St Suite 402<br>New york,NY 10036 | None | Qualified<br>public cha | unrestricted contribution | 250 |
|--|------|-------------------------|---------------------------|-----|
| New Horizons Rehabilitation Inc  | None | Q ualified              | unrestricted contribution | 125 |

| New york, NY 10036                           |      | ривне сна               |                           |     |
|--|------|-------------------------|---------------------------|-----|
| New Horizons Rehabilitation Inc<br>PO Box 98 | None | Qualified<br>public cha | unrestricted contribution | 125 |
| Batesville, IN 47006                         |      |                         |                           |     |

| PO Box 98<br>Batesville,IN 47006 | public cha |      |         |
|----------------------------------|------------|------|---------|
| Total                            | <br>       | ▶ 3a | 107,421 |

Recipient If recipient is an individual, Foundation Purpose of grant or A mount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor **a** Paid during the year

| Ohio County Fair Board PO Box 2<br>Rising Sun,IN 47040                   | None | Qualified<br>public cha | unrestricted contribution | 100   |
|--|------|-------------------------|---------------------------|-------|
| Ohio County Youth Development Inc<br>412 Main St<br>Rising Sun, IN 47040 | None | Qualified<br>public cha | unrestricted contribution | 1,350 |

|   |      | •                       |                           |       |
|---|------|-------------------------|---------------------------|-------|
| Ohio County Youth Development Inc<br>412 Main St<br>Rising Sun, IN 47040                                      | None | Qualified<br>public cha | unrestricted contribution | 1,350 |
| Partners for Animal Welfare Society of<br>Dearborn Co Inc<br>200 Charles A Liddle Dr<br>Lawrenceburg IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 500   |

| 412 Main St<br>Rising Sun, IN 47040   |      | public cha              |                           |       |
|---|------|-------------------------|---------------------------|-------|
| Partners for Animal Welfare Society of<br>Dearborn Co Inc<br>200 Charles A Liddle Dr<br>Lawrenceburg,IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 500   |
| Doonlo Holping Doonlo 900 AED Dr  | None | Qualified               | uprostricted contribution | 3.5.0 |

| Dearborn Co Inc<br>200 Charles A Liddle Dr<br>Lawrenceburg,IN 47025 |      | public cha              |                           |     |
|---|------|-------------------------|---------------------------|-----|
| People Helping People 800 AEP Dr<br>Lawrenceburg, IN 47025          | None | Qualified<br>public cha | unrestricted contribution | 250 |

| Lawrenceburg, IN 4/025                                     |      |                         |                           |       |
|--|------|-------------------------|---------------------------|-------|
| People Helping People 800 AEP Dr<br>Lawrenceburg, IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 250   |
| Pregnancy Care Center                                      | None | Qualified               | unrestricted contribution | 1,000 |

| People Helping People 800 AEP Dr<br>Lawrenceburg, IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 250   |
|--|------|-------------------------|---------------------------|-------|
| Pregnancy Care Center                                      | None | Qualified<br>public cha | unrestricted contribution | 1,000 |

| Lawrenceburg, IN 47025                    |      | public cha              |                           |       |
|---|------|-------------------------|---------------------------|-------|
| Pregnancy Care Center<br>23272 Gavin Lane | None | Qualified<br>public cha | unrestricted contribution | 1,000 |
| Lawrenceburg, IN 47025                    |      | ľ                       |                           |       |

Total . .

107,421

Recipient If recipient is an individual, Foundation Purpose of grant or A mount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor. a Paid during the year Qualified Ripley Co 4H 525 W Beech St None unrestricted contribution 5,034

| Osgood,IN 47037   |      | public cha              |                           |       |
|---|------|-------------------------|---------------------------|-------|
| ripley co community foundation inc<br>4 S PARK SUITE 210<br>BATEsville,IN 47006 | None | Qualified<br>public cha | unrestricted contribution | 2,500 |
| Ripley County Drug Awareness  | None | Qualified               | unrestricted contribution | 2,484 |

Coalition public cha PO Box 236 Versailles, IN 47042 RISING SUn high schoool

Total.

Qualified Unrestricted contribution

107,421

l None 1.500

| 110 henrietta st<br>rising sun,IN 47040            |      | public cha              |                           | ,     |
|--|------|-------------------------|---------------------------|-------|
| Safe Passage Inc PO Box 235<br>Batesville,IN 47006 | None | Qualified<br>public cha | unrestricted contribution | 1,350 |

Recipient If recipient is an individual, Foundation Purpose of grant or A mount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor Paid during the year

| a raid dufflig the year   |      |                         |                           |       |
|---|------|-------------------------|---------------------------|-------|
| SOUTH DEARBORN high school<br>5770 highlander dr<br>aurora,IN 47001 | None | Qualified<br>public cha | Unrestricted contribution | 1,500 |
| south ripley high school  | None | Qualified               | unrestricted contribution | 1,500 |

| aurora,IN 47001   |      | public cild             |                           |       |
|---|------|-------------------------|---------------------------|-------|
| south ripley high school<br>1589 S BENHAM RD<br>VERSAILLES,IN 47042 | None | Qualified<br>public cha | unrestricted contribution | 1,500 |
| Southeastern Indiana Arts Guild                                     | None | Qualified               | unrestricted contribution | 1,000 |

| south ripley high school<br>1589 S BENHAM RD<br>VERSAILLES,IN 47042      | None | Qualified<br>public cha | unrestricted contribution | 1,500 |
|--|------|-------------------------|---------------------------|-------|
| Southeastern Indiana Arts Guild<br>603 Sheldon St<br>Greendale, IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 1,000 |

| VERSAILLES,IN 47042   |      |                         |                           |       |
|---|------|-------------------------|---------------------------|-------|
| Southeastern Indiana Arts Guild<br>603 Sheldon St<br>Greendale,IN 47025 | None | Qualified<br>public cha | unrestricted contribution | 1,000 |
|   |      |                         |                           |       |

| 603 Sheldon St<br>Greendale, IN 47025 | None | public cha | unrestricted contribution | 1,000 |
|---------------------------------------|------|------------|---------------------------|-------|
| southeastern indiana ymca inc         | none | qualified  | unrestricted contribution | 1,000 |

| Greendale, I                 | N 47025 |      | '                       |                           |       |
|------------------------------|---------|------|-------------------------|---------------------------|-------|
| southeasteri<br>30 state roa |         | none | qualified<br>public cha | unrestricted contribution | 1,000 |

| St Lawrence school 524 walnut st            | none | gualified  | unrestricted contribution | 250   |
|---|------|------------|---------------------------|-------|
| 30 state road 129 south batesville,IN 47006 |      | public cha |                           |       |
| southeastern indiana ymca inc               | none | qualified  | unrestricted contribution | 1,000 |

lawrenceburg, IN 47025

Total.

public cha

107,421

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 show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor. a Paid during the year Static Flite Faston, 3018 Robina Ln. None Qualified unrestricted contribution 200 Hamilton, OH 45013 public cha Tyson Community Advancement None Qualified unrestricted contribution 475 Foundation public cha 378 E County Road 300 S VERSAILLES, IN 47042 USNSCC Flying Tigers Squadron None Oualified unrestricted contribution 250 1794 N State Road 101 public cha MILAN, IN 47031 voices of indiana IIc 211 Fourth St. None Qualified unrestricted contribution 1,500 Lawrenceburg, IN 47025 public cha Youth Encouragement Services Inc None Qualified unrestricted contribution 540 11636 County Farm Rd public cha Aurora, IN 47001

107,421

Total . .

| <b>EIN:</b> 20-4604858 |        |                          |                        |   |
|------------------------|--------|--------------------------|------------------------|---|
| Category               | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
| accounting fees        | 2,255  | 1,127                    |                        | 1,128                                       |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |            | DLN: 93491069005017 |
|--------------------------------------|-----------------|------------|---------------------|
| TY 2015 Investments - Other S        | Schedule        |            |                     |
| Name:                                | UCB CHARITABLE  | FOUNDATION |                     |
| EIN:                                 | 20-4604858      |            |                     |

1,204,533

1,302,128

| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair<br>Market Value |
|----------------|-----------------------|------------|----------------------------------|
|                |                       |            |                                  |

united community bancorp stock

AT COST

Name: UCB CHARITABLE FOUNDATION

20-4604858

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

legal fees

| 20 1001030 |        |                          |                        |   |  |
|------------|--------|--------------------------|------------------------|---|--|
| Category   | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>Charitable<br>Purposes |  |

1,556

sements for aritable

1,556

DLN: 93491069005017

DLN: 93491069005017

8,321

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

refunded grant

| <b>EIN:</b> 20-4604858 |                                   |                          |                     |
|------------------------|-----------------------------------|--------------------------|---------------------|
| Description            | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net Income |

8,321

~~ 4604050