Form 990-PF

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 separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052 2016

For calendar year 2016 or tax year beginning , and ending Name of foundation A Employer identification number BYRON A. ROOT MEMORIAL TRUST FUND BURKE, COSTANZA & CARBERRY LLP, 31-6192613 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 9191 BROADWAY 219-769-1313 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here MERRILLVILLE, IN 46410 Initial return of a former public charity G Check all that apply: Initial return D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 754,699. (Part I, column (d) must be on cash basis) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income N/A Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch B Interest on savings and temporary cash investments લ્ય 29,708. 29,708 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) -14,218SCANNED 6a Net gain or (loss) from sale of assets not on line 10 STATEMENT 21,499. 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 15,490 29,708 12 Total. Add lines 1 through 11 5.911 1,205 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 2,257 2,257. STMT 3 b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 4 14 14 23 Other expenses 0. Operating 24 Total operating and administrative <u>8,182</u> <u>4,70</u>6. 3,476 expenses. Add lines 13 through 23 31,958 31,958. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 40,140 36,664. Add lines 24 and 25 3,476 27 Subtract line 26 from line 12: -24,650 2 Excess of revenue over expenses and disbursements 26,232. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

BYRON A. ROOT MEMORIAL TRUST FUND

COSTANZA & CARBERRY LLP, TRUSTEE 31-6192613 Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 13,436 24,503. 24,503. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 5 360,608. 324,891. 730,196. 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 349,394. 374,044. 754,699. instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ightharpoonsFoundations that do not follow SFAS 117, check here and complete lines 27 through 31. 363,093 363,093 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 10,951. -13.69929 Retained earnings, accumulated income, endowment, or other funds 374,044. 349,394 30 Total net assets or fund balances 374,044 349,394 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 374,044. (must agree with end-of-year figure reported on prior year's return) -24,650. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 349,394. Form **990-PF** (2016)

| 2-story brick wa | ribe the kind(s) of property sold (e.g trehouse; or common stock, 200 sh | ., real estate, s. MLC Co.) | | 1 . b - l | w acquired Purchase Donation | (mo., d | acquired lay, yr.) | (d) Date sold (mo., day, yr.) | |
|--|--|---|---|---------------------------------------|---|-----------------------|---|--|--|
| 1a AMERICAN CAP S | TRATEGIES | | | | | VARI | OUS | 12/15/16 | |
| <u>b</u> | | | | | | | | | |
| <u>c</u> d | | | | | | | | | |
| e | | | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis xpense of sale | | | | aın or (loss s (f) mınus | | |
| a 21,499. | | <u> </u> | 35,71 | 17. | | | | -14,218 | |
| <u>b</u> | | | | | | | | | |
| <u>C</u> | | | | | | | | | |
| d e | | | · <u> </u> | | | | | | |
| | ng gain in column (h) and owned by | the foundation | on 12/31/69 | | | (I) Gains (C | Col. (h) gain | minus | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Ex | cess of col. (i) col. (j), if any | | | òl. (k), but ı | not less tha (from col. (| n -0-) o r | |
| a | | | | | | | -14,219 | | |
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| <u>d</u> | <u> </u> | | | | | | | | |
| <u>e</u> | L | <u> </u> | | | | | | | |
| 2 Capital gain net income or (net ca | apital loss) $ \begin{cases} \text{ If gain, also enter -0} \\ \text{ If (loss), enter -0} \end{cases} $ | r in Part I, line)- in Part I, line | 7 7 | } | 2 | | | -14,218 | |
| 3 Net short-term capital gain or (los | | nd (6): | | | | | | | |
| If gain, also enter in Part I, line 8, | column (c). | | | | | | N/A | | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification U | Inder Section 4940(a) for | - Dodugod | T | | 3 | | N/A | <u></u> | |
| v . waamidandii u | niuei Section 4340ter ioi | neuuceu | i lax on Ne | t inve | stment II | ıcome | | | |
| | | | | | | come | | | |
| (For optional use by domestic private | e foundations subject to the section | | | | | come | · | | |
| (For optional use by domestic private | e foundations subject to the section | | | | | come | · · · · · · · · · · · · · · · · · · · | | |
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BYRON A. ROOT MEMORIAL TRUST FUND COSTANZA & CARBERRY LLP, BURKE. TRUSTEE 31-6192613 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here land enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 262. of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments: 751. a 2016 estimated tax payments and 2015 overpayment credited to 2016 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 751. Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 489. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2017 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1<u>b</u> If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. X c Did the foundation file Form 1120-POL for this year? 1¢ d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. > \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 X If "Yes." attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b Х 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) IN b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 86 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

| | for the benefit or use of a disqualified person)? | Yes LA No | 1 1 | 1 |
|----|--|------------------|----------------|----|
| | (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 X No | | |
| b | o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | 1 1 | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | N/A | 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 2016? | | 10 | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | n | | |
| a | At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beging before 2016? | ning Yes X No | | |
| | MBA - Blackbarrows - | TES LAL NO | 1 | 1 |
| | If "Yes," list the years \(\), , , , , , , , , . , . , , , . , . , . | not | | |
| D | | | | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and atta | | 0. | l |
| | statement - see instructions.) | N/A | 2b | |
| C | if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| 3a | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | 1 1 | |
| | during the year? | Yes X No | | |
| b | b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons | after | 1 | |
| | 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 2016.) | N/A | 3ь | |
| 4a | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | 4a | Х |
| b | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purp | ose that | | |
| _ | had not been removed from jeopardy before the first day of the tax year beginning in 2016? | | 46 | x |
| _ | | Fc | rm 990- | |
| | | | | , |

| BYRON A. ROOT MEMORIAL T orm 990-PF (2016) BURKE, COSTANZA & CARBER | RY LLP, TRUST | EE . | <u>31-61926:</u> | 13 Page 6 |
|---|---|---|---|---------------------------------------|
| Part VII-B Statements Regarding Activities for Which F | orm 4720 May Be F | Required (continu | ued) | |
| 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any appearing public platters (see section (OEE)); or | • • • • | | s X No | |
| (2) Influence the outcome of any specific public election (see section 4955); o any voter registration drive?(3) Provide a grant to an individual for travel, study, or other similar purposes' | • , , | Ye | s X No | |
| (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) | | | s X No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? | | ☐ Ye | s X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h | ctions)? | n Regulations | N/A 5 | b |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for | om the tax because it mainta | | | |
| expenditure responsibility for the grant? | | [/A | s L No | 1 1 |
| If "Yes," attach the statement required by Regulations section 53.4945 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? | | Ye | s X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870 | ersonal benefit contract? | | _6 | ib X |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | | Ye | s X No N/A 7 | 'b |
| Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors | | nagers, Highly | | <u></u> |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | | | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans and deterred compensation | (e) Expense account, other allowances |
| BURKE, COSTANZA & CARBERRY LLP 9191 BROADWAY | TRUSTEE | | | |
| MERRILLVILLE, IN 46410 | 2.00 | 5,911. | 0. | 0. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | | enter "NONE." | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of other employees paid over \$50 000 | | | ▶ 1 | ß |

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623561 11-23-16

Total. Add lines 1 through 3

Page 8

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fo | undations, se | e instructions.) |
|--------|--|----------------|------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | T | |
| а | Average monthly fair market value of securities | 1a | 748,554. |
| b | Average of monthly cash balances | 1b | 25,569. |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 10 | 774,123. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 774,123. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 11,612. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 762,511. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 38,126. |
| Р | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here and do not complete this part.) | and certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 38,126. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 | | |
| b | Income tax for 2016. (This does not include the tax from Part VI.) |] | |
| C | Add lines 2a and 2b | 2c | 262. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 37,864. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 37,864. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7_ | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 37,864. |
| P | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| ١. | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 10 | 36,664. |
| | Program-related investments - total from Part IX-B | 1a 1b | 30,004. |
| ь 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | 0.1111.1111.1111 | 3a | |
| a 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 | 36,664. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | 1-1- | 30,004. |
| J | income. Enter 1% of Part I, line 27b | 5 | 262. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 36,402. |
| U | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | <u> </u> | |
| | 4940(e) reduction of tax in those years. | . quamus IVI I | no occitori |

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2015 | (c) 2015 | (d) 2016 |
|---|---------------|----------------------------|-------------|---------------------------------------|
| 1 Distributable amount for 2016 from Part XI, line 7 | | | | 37,864. |
| 2 Undistributed income, if any, as of the end of 2016 | | | | 31,004. |
| a Enter amount for 2015 only | | | 35,708. | |
| b Total for prior years: | | 0. | 33,700. | |
| 3 Excess distributions carryover, if any, to 2016: | | | | |
| a From 2011 | | | | |
| b From 2012 | | | | |
| c From 2013 | | | | |
| d From 2014 | | | | |
| e From 2015 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2016 from | | | | |
| Part XII, line 4: ► \$ 36,664. | 1 | | | |
| a Applied to 2015, but not more than line 2a | 1 | | 35,708. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | 1 | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2016 distributable amount | | | | 956. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount | 0. | | | 0. |
| must be shown in column (a)) 6 Enter the net total of each column as indicated below: | | | | |
| | 0. | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0.1 | | |
| c Enter the amount of prior years' | | | | · · · · · · · · · · · · · · · · · · · |
| undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | - | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2015. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2016. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2017 | | | | 36,908. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | 1 | · | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | Í | • | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2011 | | | | |
| not applied on line 5 or line 7 | 0. | | , | |
| 9 Excess distributions carryover to 2017. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | , | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2012 | | | | |
| b Excess from 2013 | į | | ļ | |
| c Excess from 2014 | į | | [| |
| d Excess from 2015 | ł | | | |
| e Excess from 2016 | l | | [| |
| | | | | Form 990-PF (2016) |

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: Form 990-PF (2016) 2016.04030 BYRON A. ROOT MEMORIAL TRUS 421

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c Any submission deadlines:

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| Part XV Sun | olementary In | formation (a | | (d) | | |
|-------------------|---------------|--------------|------------|----------|-------|---------|
| orm 990-PF (2016) | BURKE, | COSTANZ | A & | CARBERRY | LLP, | TRUSTEE |
| | DIKON . | A. KOOI | 1,11,1,1,1 | NYTYN IV | DI TO | MD |

| 3 Grants and Contributions Paid During the Yo | ear or Approved for Future | Payment | | |
|---|--|---------------------|----------------------------------|-------------|
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | status of recipient | Purpose of grant or contribution | Amount |
| a Paid during the year | | | | |
| INDIANA UNIVERSITY FOUNDATION | N/A | ₽C | | 1 |
| 1500 STATE ROAD 46 BYPASS | | | | |
| BLOOMINGTON, IN 47408 | | | | |
| | | | | |
| | | | FUNDING OF ROOT | 31,958, |
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| | | | | |
| Total | | ·——— | ▶ 3a | 31,958, |
| b Approved for future payment | | | | 31,330. |
| ., | | | | |
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| NONE | | | | |
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| Tabl | L | L | L | |
| <u>Total</u> | | | <u>▶ 3b</u> | 0. |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless o | otherwice indicated | Unrelated | business income | Exclud | ted by section 512, 513, or 514 | |
|---|--|--------------------|-----------------|--------|---------------------------------|--------------------------|
| enter gross amounts unless t | otnerwise indicated. | (a) | (b) | (c) | (d) | (e) Related or exempt |
| 1 Program service revenue: | | Business code | Amount | sion | Amount | function income |
| • | | | | 1-1 | | |
| | | | | | | |
| _ | | 1 1 | | | | |
| | | 1 1 | | | | |
| _ | | 1 | | | | |
| f | | | | | | |
| g Fees and contracts from | m government agencies | | | | | |
| 2 Membership dues and ass | sessments | | | | | |
| 3 Interest on savings and te | mporary cash | | | | | |
| investments | | | | | | |
| 4 Dividends and interest from | m securities | | | 14 | 29,708. | |
| 5 Net rental income or (loss |) from real estate: | | | 1 - 1 | | |
| a Debt-financed property | J | | | | | |
| b Not debt-financed prop | perty | | | | | |
| 6 Net rental income or (loss |) from personal | | | | | |
| property | | | | | | |
| 7 Other investment income | | | | | | |
| 8 Gain or (loss) from sales of | of assets other | | | | | |
| than inventory | | | | 14 | -14,218. | · |
| 9 Net income or (loss) from | | | | | | |
| O Gross profit or (loss) from | n sales of inventory | | | | | |
| 1 Other revenue: | | 1 | | | | |
| a | | | | | | |
| b | | · | | - | | |
| c | | | | | | |
| d | | · | | | | |
| | | | | l l | | |
| e | | · | | | | |
| 12 Subtotal. Add columns (b | | | 0 | | 15,490. | |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column | ns (b), (d), and (e) | | 0 | , | 15,490. 13_ | |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst | ns (b), (d), and (e) tructions to verify calculations.) | | | | 13 | 15,490 |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column (See worksheet in line 13 inst | ns (b), (d), and (e) | to the Accor | | | 13 | 15,490 |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities t | | nplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities t | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column (See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column (See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 3 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 3 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column (See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 13 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 2 Subtotal. Add columns (b 3 Total. Add line 12, column See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column (See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column (See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |
| 12 Subtotal. Add columns (b 13 Total. Add line 12, column (See worksheet in line 13 inst Part XVI-B Rela Line No. Explain below | ns (b), (d), and (e) tructions to verify calculations.) ationship of Activities to whow each activity for which income | ome is reported in | mplishment of l | Exempl | 13 t Purposes | 15,490 |

Form 990-PF (2016) BURKE, COSTANZA & CARBERRY LLP, TRUSTEE 31-6192613

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 31-6192613 Page 13

| | | | | | | | _ | | | |
|-----|-------------------|--|---------------------------|-------------------|------------------------------------|---|---|----------------|-----------------------|-------------|
| | Did the o | rganization directly or indire | ectly engage in any c | of the following | g with any other organization | on described in secti | on 501(c) of | | Yes | No |
| | the Code | (other than section 501(c) | (3) organizations) or | in section 52 | 7, relating to political organ | ızatıons? | | | | |
| a | Transfers | s from the reporting founda | ition to a noncharitab | le exempt org | ianization of: | | | | | ĺ |
| | (1) Cash | • • | | | | | | 1a(1) | 1 | X |
| | (2) Othe | | | | | | | 1a(2) | | X |
| b | | nsactions: | | | | | | IG(Z) | | |
| υ | - | | ala avamet arganizati | •• | | | | 4.74 |] | 37 |
| | | s of assets to a noncharitat | | | | | | 1b(1) | | X |
| | ٠. | chases of assets from a nor | | rganization | | | | 1b(2) | | X X X |
| | | tal of facilities, equipment, o | or other assets | | | | | 1b(3) | | <u>X</u> |
| | | nbursement arrangements | | | | | | 1b(4) | | <u>X</u> |
| | (5) Loar | ns or loan guarantees | | | | | | 1b(5) | | X |
| | (6) Perf | ormance of services or mer | mbership or fundrais | ıng solicitatioi | ns | | | 1b(6) | | X |
| C | Sharing (| of facilities, equipment, mai | ling lists, other asset | s, or paid emp | ployees | | | _1c | | X |
| d | If the ans | swer to any of the above is ' | "Yes," complete the fo | ollowing sche | dule. Column (b) should alv | ways show the fair m | arket value of the goods, ot | her ass | ets, | |
| | or service | es given by the reporting fo | oundation. If the foun | dation receive | ed less than fair market valu | ie in any transaction | or sharing arrangement, shi | ow in | | |
| | column (| d) the value of the goods, o | other assets, or servi | ces received. | | | | | | |
|) L | ine no | (b) Amount involved | (c) Name of | noncharitable | exempt organization | (d) Description | of transfers, transactions, and sh | aring an | rangeme | nts |
| ÷- | | ··· | `` | N/A | | `` | | | | |
| | | | | 11/21 | | | | | | — |
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| | | | | | - | | | | | |
| 'a | | - | • | | or more tax-exempt organi | zations described | | - | r | 7 |
| | | n 501(c) of the Code (other | | (3)) or in sect | ion 527? | | L_ | Yes | LX | No |
| b | If "Yes," (| complete the following sche | | | | | | | | |
| | | (a) Name of org | anization | | (b) Type of organization | | c) Description of relationshi | ρ | | |
| | | N/A | | | | | | | | |
| | | | | | | | | | | |
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| _ | | | | | | | | | | |
| _ | | | | | · | | | | | |
| _ | Unde | er penalties of perjury, I declare t | that Linave examined this | return, includin | g accompanying schedules and | statements, and to the | best of my knowledge | | | |
| Si | gn and I | belief, it is true, forrect, and con | aplete Declaration of pre | parer (other than | n taxpayer) is based on all inform | nation of which preparer | return | with th | discuss t e prepar | er |
| 16 | ere | ~ 100 | luch | | 11/14/2017 | Partne | | n below Yes | (see ins | 7'. I |
| | | nature of officer of trustee | | | | · | | 」 tes | | J No |
| | | <u></u> | | Droparer's a | Date | Title | Check I If PTIN | | | |
| | | Print/Type preparer's na | inte - | Preparer's si | uyature / | Date | - I I I I I I I I I I I I I I I I I I I | | | |
| _ | | | | $ \mathcal{N} $ | In Lusten | 11-10-17 | self- employed | | | |
| | aid | MARK T. RO | | | () m) | | P00 | | | |
| | reparer | | LEY & COM | PANY L | LP | | Firm's EIN ► 35-18 | 667 | 09 | |
| Ų: | se Only | <i>(</i> | | | | | | | | |
| | | Firm's address ► 40 | 9 WEST KI | EFFER | ROAD | | | | | |
| | | | CHIGAN CI | | | | Phone no. 219-87 | 4 – 1 | 437 | |
| _ | | | | | | | | | | (2016) |
| | | | | | | | FUI | | | 120101 |

| FORM 990-PF | DIVIDENDS | AND INTEREST | FROM SECUR | ITIES ST | 'ATEMENT 1 |
|---|-----------------|-------------------------------|-----------------------------|----------------------|------------|
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | (A) REVENUE PER BOOKS | EVENUE NET INVEST- A | |
| DIVIDENDS - AT&T DIVIDENDS - INC SIMON PROP GROUP | 2,210. | 0. | 2,210. | 2,210. | |
| COMMON DIVIDENDS - KINDER | 8,533. | 0. | 8,533. | 8,533. | |
| MORGAN DIVIDENDS - ONEOK | 520. | 0. | 520. | 520. | |
| PARTNERS DIVIDENDS - | 6,320. | 0. | 6,320. | 6,320. | |
| VECTREN DIVIDENDS - WASHINGTON PRIME | 9,150. | 0. | 9,150. | 9,150. | |
| GRP DIVIDENDS - WP | 161. | 0. | 161. | 161. | |
| GLIMCHER INC INTEREST - 5% | 322. | 0. | 322. | 322. | |
| NEXTERA NOTE INTEREST - 7% GMAC | 2,492. | 0. | 2,492. | 2,492. | |
| NOTE INTEREST - GEN | 0. | 0. | 0. | 0. | |
| ELEC 6% NOTE | 0. | 0. | 0. | 0. | |
| TO PART I, LINE 4 | 29,708. | 0. | 29,708. | 29,708. | |

| FORM 990 | -PF G | AIN OF | (LOSS) | FROI | M SALE | OF | ASSETS | | STA' | PEMENT | 2 |
|----------|-----------------------------|--------|-------------------------|------|-----------------------|-----|---------------------------------|--------------------|---------------|--------------------------|------|
| DESCRIPT | (A) TON OF PROPERTY | | | | | | MANNER ACQUIRED | | ATE UIRED | DATE S | SOLD |
| AMERICAN | CAP STRATEGIES | _ | | | | | | VAR | ious | 12/15 | 5/16 |
| | (B) GROSS SALES PRICE | COS | C) ST OR BASIS | E | (D) XPENSE SALE | OF | (E) DEPREC | • | GAIN | (F) OR LOS | SS |
| _ | 21,499. | | 35,717 | • | | 0. | | 0. | | -14,2 | 218. |
| DESCRIPT | (A) ION OF PROPERTY | _ | | | | | MANNER ACQUIRED PURCHASED | | ATE UIRED | DATE S | SOLD |
| | (B) GROSS SALES PRICE | COS | C) ST OR BASIS | E | (D) XPENSE SALE | OF | (E) DEPREC | • | GAIN | (F) | ss |
| | 0. | | 0 | • | | 0. | , | 0. | | | 0. |
| NET GAIN | OR LOSS FROM S | ALE OF | ASSETS | | | | | | | -14,2 | 218. |
| CAPITAL | GAINS DIVIDENDS | FROM | PART IV | | | | | | | | 0. |
| TOTAL TO |) FORM 990-PF, P. | ART I, | LINE 62 | A | | | | | | -14,2 | 218. |
| FORM 990 |)-PF | · | ACCO | UNTI | NG FEE | S | | | STA | TEMENT | 3 |
| DESCRIPT | CION | | (A) EXPENS PER BO | ES | NET II MENT | | T- ADJ | C) USTE INCC | | (D) CHARITA PURPOS | |
| ACCOUNTI | ING FEES - RCO | | 2, | 257. | | 2,2 | 257. | | | | 0. |
| TO FORM | 990-PF, PG 1, L | N 16B | 2, | 257. | | 2,2 | 257. | | | | 0. |
| | | = | | | | | | | = | | |

| FORM 990-PF | OTHER I | EXPENSES | | | STATEMENT | 4 |
|-----------------------------|---------------|--------------------|------------------------------|----------|-------------|----|
| DESCRIPTION | | | (C) ADJUSTED NET INCOM | | | |
| MISCELLANEOUS FEES | 14. | | 14. | | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 14. 14. | | | 0 | | |
| FORM 990-PF | OTHER IN | /ESTMENTS | | | STATEMENT | 5 |
| DESCRIPTION | | ALUATION METHOD | вос | OK VALUE | FAIR MARKET | י |
| INVESTMENTS | - | COST | | 324,891. | 730,19 | 36 |
| THARDIMENTO | | | | | | , |