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Form 990-PF

Department of the Treasury

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

2009

OMB No 1545-0052

Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning and ending G Check all that apply Initial return Initial return of a former public charity Final return Address change Amended return Name change Employer identification number Name of foundation Use the IRS 26-3299645 label. THE OTT FOUNDATION INC Otherwise, Telephone number (see page 10 of the instructions) print Number and street (or P O box number if mail is not delivered to street address) Room/suite or type. 1800 N WABASH ROAD 300 If exemption application is pending, check here See Specific City or town, state, and ZIP code 1. Foreign organizations, check here Instructions. MARION IN 46952 2. Foreign organizations meeting the Check type of organization X Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated unde section 507(b)(1)(A), check here Fair market value of all assets at end J Accounting method. of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 247,796 line 16) ▶ \$ (Part I, column (d) must be on cash basis Part I Analysis of Revenue and Expenses (The (a) Revenue and (d) Disbursements expenses per (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal books income income purposes the amounts in column (a) (see page 11 of the instructions)) Contributions, gifts, grants, etc., received (attach schedule) 126,150 1 2 Check ▶ If the foundation is **not** required to attach Sch B interest on savings and temporary cash investments 3 354 354 354 4 Dividends and interest from securities Gross rents Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a b 0 Capital gain net income (from Part IV, line 2) 7 0 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns & allowances Less: Cost of goods sold Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) 126,504 354 354 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. SCANMED MAY 2 8 2010] | Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits STMT 1 3,148 16a Legal fees (attach schedule) STMT 2 1,550 es (atladh schedule) Other profession 17 es (attach schedule) (see page 44 of her 18 reciation (attach schedule) and Gentletion 19 20 737 21 22 Printing and publications STMT 3 4,393 23 Other expenses (att sch) 24 Total operating and administrative expenses. 0 9,828 Add lines 13 through 23 165,500 165,500 25 Contributions, gifts, grants paid 0 0 26 Total expenses and disbursements. Add lines 24 and 25 175,328 165,500 Subtract line 26 from line 12 27 Excess of revenue over expenses and disbursements -48,824 354 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-) 354

	Part II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	296,620	247,796	247,796
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less. allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
:		disqualified persons (attach schedule) (see page 16 of the			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less allowance for doubtful accounts ▶	_	_	
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
		Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.)	,		,
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach sch.)		n n me en n	
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	296,620	247,796	247,796
	17	Accounts payable and accrued expenses			
' A	18	Grants payable		<u>- </u>	
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			i
iab	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 ▶ X			
Ses		and complete lines 24 through 26 and lines 30 and 31.			i t
Š	24	Unrestricted	296,620	247,796	
<u>a</u>	25	Temporarily restricted			,
ä	26	Permanently restricted			
Assets or Fund Balar		Foundations that do not follow SFAS 117, check here ▶	-		
E		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds			
Š	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
se	29	Retained earnings, accumulated income, endowment, or other funds			
As	30	Total net assets or fund balances (see page 17 of the			
Net		instructions)	296,620	247,796	
ž	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	296,620	247,796	
	Part I	II 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 (mu	st agree with		
		of-year figure reported on prior year's return)		1	296,620
2		amount from Part I, line 27a		2	-48,824
3	Othe	r increases not included in line 2 (itemize)		3	
4		ines 1, 2, and 3		4	247,796
5		eases not included in line 2 (itemize)		5	
E		net assets or fund balances at end of year (line 4 minus line 5)-Part II, column (line 4 minus line 5)-Part II, column (line 4 minus line 5)-Part III, column (line 5 minus line 6 minus li	b), line 30	6	247,796
					Form 990-PF (2009)

Part IV Capital Gains a	nd Losses for Tax on Investn	nent Inc	ome	· -	,		
(a) List and descril 2-story brick ward	be the kind(s) of property sold (e.g., real estate ehouse, or common stock, 200 shs MLC Co	te,)		(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1a N/A							
b							
С							
d					<u> </u>		
_e				<u> </u>	ļ		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			n or (loss) f) minus (g)
а							
b				- <u>-</u>	<u> </u>		
<u>c</u>							
<u>d</u>							
е							
Complete only for assets showing	ng gain in column (h) and owned by the	foundation	on 12/31/6	69	(1)	Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		. ,	s of col (i) (j), if any	col (t less than -0-) or rom col (h))
_a		<u> </u>		 	<u> </u>		······
<u>b</u>							
_ c					ļ		
<u>d</u>							
_ e	<u></u>				<u> </u>		
2 Capital gain net income or (net d	capital loss) If gain, also enter If (loss), enter -0-				2		
3 Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and	(6).					
If gain, also enter in Part I, line 8	3, column (c) (see pages 13 and 17 of t	the instruct	ions).				
If (loss), enter -0- in Part I, line 8		1 * 1 4	<u>, </u>		3		
Part V Qualification U	nder Section 4940(e) for Redu	uced Tax	on Net	Investment inco	ome		
(For optional use by domestic private	e foundations subject to the section 49-	40(a) tax o	n net invest	tment income)			
If section 4940(d)(2) applies, leave t	his part blank.						
	•				. 🖼		
	ction 4942 tax on the distributable amount			base period? Y	es 🚹 No)	
	alify under section 4940(e). Do not com						
	each column for each year, see page	18 of the in	structions t	pefore making any ei	ntries.		
(a) Base period years Calendar year (or tax year beginning	g in) Adjusted qualifying distribut	tions	Net value	(c) of noncharitable-use as	ssets		(d) tribution ratio divided by col (c))
2008	15	4,000					
2007							
2006							
2005							
2004						_	
						İ	
2 Total of line 1, column (d)					2		
3 Average distribution ratio for the	5-year base period—divide the total oi	n line 2 by	5, or by the				
number of years the foundation	has been in existence if less than 5 year	ars			3	-	
						ł	_
4 Enter the net value of noncharita	able-use assets for 2009 from Part X, I	ine 5			4		
						1	
5 Multiply line 4 by line 3					5	1	
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)				6		4
7 Add lines 5 and 6					7		4
8 Enter qualifying distributions from	m Part XII, line 4			_	8		165,500
If line 8 is equal to or greater that	an line 7, check the box in Part VI, line	1b, and co	mplete that	part using a 1% tax	rate See t	he	
Part VI instructions on page 18.							

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	s)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and 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			4
	here ▶ X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
•	Part I, line 12, col. (b)			
2				0
	, , , , , , , , , , , , , , , , , , , ,			- 4
3		_	-	-
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			4
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6	Credits/Payments:			1
а	2009 estimated tax payments and 2008 overpayment credited to 2009			f
b	Exempt foreign organizations—tax withheld at source			
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			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			4
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11	· · · · · · · · · · · · · · · · · · ·	-	
	art VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a	1.00	x
h		10	t	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	1,6	İ	x
	of the instructions for definition)?	1b	 	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		ł	li
	published or distributed by the foundation in connection with the activities		-	
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			i
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			İ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			,
	on foundation managers 🕨 \$		1	i '
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.	ŀ	1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		ŀ	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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		1	
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	x	
-		7	x	\vdash
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 page 19 of the			1
	instructions) IN		1	
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	8b	X_	├─-
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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		l	
	names and addresses	10	<u> </u>	<u> </u>
		Form 99	0-PF	(2009)

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<u>_Pa</u>	rt 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 page 20 of the instructions)			11		<u>x</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	ation?		13	X	
	Website address ► N/A					_
14		ohone no I	▶ 765-6	64-	54 0	0
	1800 N WABASH RD SUITE 300			_		
	Located at ► MARION, IN	ZIP+4	► 46952	2		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	1	ı			▶
	and enter the amount of tax-exempt interest received or accrued during the year	>	15			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a						
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?	Yes	X No X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		i	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐ Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	П.,	₩			
	the benefit or use of a disqualified person)?	∐ Yes	X No			
	(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	П у	X No			
_	termination of government service, if terminating within 90 days)	∐ Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regula	tions	N/A	45		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		▶ □	1b		
_	Organizations relying on a current notice regarding disaster assistance check here					
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		N/A	1c		
	were not corrected before the first day of the tax year beginning in 2009?		*4/ 11			
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)). At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and					
а		Yes	X No			
	6e, Part XIII) for tax year(s) beginning before 2009? If "Yes," list the years ▶ 20 , 20 , 20 , 20					[
h	If "Yes," list the years ► 20 , 20 , 20 , 20 . Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
IJ	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	ı]
	all years listed, answer "No" and attach statement—see page 20 of the instructions)		N/A	2b		Ì
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
•	► 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					}
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or	_	_			
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	f				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the					1
	foundation had excess business holdings in 2009)		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpos	es?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize in					
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in	2009?		4b		X_
			F	orm 99	0-PF	(2009

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<u>. Ра</u>	art VII-B Statements Regarding Activities for Which Form 4	720 May Be R	equired (co	ntinue	<u>ed)</u>			
5a	During the year did the foundation pay or incur any amount to:							
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?	📙	Yes	X No		l I	
	(2) Influence the outcome of any specific public election (see section 4955); or to	carry on,						
	directly or indirectly, any voter registration drive?		Ц	Yes	X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes	X No		ı İ	•
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in						
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instr	uctions)		Yes	X No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational						
	purposes, or for the prevention of cruelty to children or animals?			Yes	X No		. 1	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unde	r the exceptions de	escribed in					
	Regulations section 53 4945 or in a current notice regarding disaster assistance	(see page 22 of th	e instructions)?		N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check he		•	•			. !	,
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro	m the tax						
	because it maintained expenditure responsibility for the grant?		N/A 📗	Yes	∐ No		. [1
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)							!
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	y premiums						,
	on a personal benefit contract?		\sqcup	Yes	X No		1	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal benefit contr	act?			6b	\vdash	<u> </u>
	If "Yes" to 6b, file Form 8870.		Г-1					<u> </u>
7a	· · · · · · · · · · · · · · · · · · ·		_	Yes	X No			
<u> </u>	If yes, did the foundation receive any proceeds or have any net income attributation				N/A	7b		
Pá	art VIII Information About Officers, Directors, Trustees, For	undation Mana	agers, Highi	y Paid	ı ⊨mpioy	ees,		
	and Contractors	lan (ann nama 22	-6 4b - 14	1				
1 1	List all officers, directors, trustees, foundation managers and their compensat	ion (see page 22	or the instruction	1	0	т		
	(a) None and address	(b) Title, and average	(c) Compensation	1 ` 60	Contributions to apployee benefit	(e) E	pense acc	count,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	pla	ns and deferred ompensation		er allowan	
	TO COLUMN F			+-	ompensation	 		
SI	E STATEMENT 5	,				1		
	······································			+		 		
		-		+		\vdash		
		,						
				+		†		
	•							
	Compensation of five highest-paid employees (other than those included on	line 1—see nage	23 of the instru	ıctione	`	L		
_	If none, enter "NONE."				,,			
		(b) Title, and average		(d)	Contributions to	Γ		
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation		nployee benefit ns and deferred		opense acc er allowan	
		devoted to position			ompensation	Ourie	ii allowani	ices
N	ONE							
	·	•						
						<u> </u>		
	., -,					1		
				\perp		 		
	James of other employees and over \$50,000	L						
<u>ı ota</u>	I number of other employees paid over \$50,000					_		

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Total. Add lines 1 through 3

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

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<u>5</u>

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Pa	rt XIII Undistributed Income	(see page 26 of	the instructions)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part	χı	Corpus	Years prior to 2008	2008	2009
•	line 7	^`''		· · · · · · · · · · · · · · · · · · ·		-4
2	Undistributed income, if any, as of the er	nd of 2000-				
	•	ld 01 2003.				i I
a	Enter amount for 2008 only	00				
b 2	Total for prior years: 20 , 20					
3	Excess distributions carryover, if any, to	2009: 				,
a	From 2004					
b	From 2005					E
С	From 2006					
a	From 2007					
e	From 2008					1
f	Total of lines 3a through e					
4	Qualifying distributions for 2009 from Pa	rt XII,				
	line 4: ▶ \$165,500					ì
	Applied to 2008, but not more than line 2					
b	Applied to undistributed income of prior y					
	(Election required—see page 26 of the in	· ·				
С	Treated as distributions out of corpus (E					i E
	required—see page 26 of the instruction	s)				
d	Applied to 2009 distributable amount	ļ				
е	Remaining amount distributed out of con	pus	165,504			
5	Excess distributions carryover applied to	2009				
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a))					į Į
6	Enter the net total of each column as					,
	indicated below:		* m			,
а	Corpus Add lines 3f, 4c, and 4e Subtra-	,	165,504			
b	Prior years' undistributed income. Subtra	ıct				
	line 4b from line 2b					
C	Enter the amount of prior years' undistrib	outed				
	income for which a notice of deficiency h	as				Į.
	been issued, or on which the section 494	12(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b. Taxable		i			,
	amount—see page 27 of the instructions		· · · · · · · · · · · · · · · · · · ·			
е	Undistributed income for 2008. Subtract	line				į
	4a from line 2a. Taxable amount—see p	age		;		
	27 of the instructions					
f	Undistributed income for 2009. Subtract	lines				
	4d and 5 from line 1. This amount must l	be				
	distributed in 2010	ļ				0
7	Amounts treated as distributions out of o	orpus				
	to satisfy requirements imposed by secti	on				
	170(b)(1)(F) or 4942(g)(3) (see page 27	of the				
	instructions) ,					
8	Excess distributions carryover from 2004	Inot			1	
	applied on line 5 or line 7 (see page 27 of	of the				,
	instructions)	. [
9	Excess distributions carryover to 2010).				
	Subtract lines 7 and 8 from line 6a		165,504			
10	Analysis of line 9	. [
а	Excess from 2005					
b	Excess from 2006					
c	Excess from 2007					
d	Excess from 2008					
<u>e</u>	Excess from 2009	165,504				

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

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

N/A

N/A

Any submission deadlines:

	Managaran and Maria		· · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE STATEMENT 7				165,500
Total			▶ 3a	165,500
 Approved for future payment N/A 				

Part XVI-A Enter gross amo	Analysis of Income-Producing Actions unless otherwise indicated		business income	Excluded	d by section 512, 513, or 514	(e)
4. December 200		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
•	vice revenue.			-		and mandations /
				- 	-	
		·		 		
		·				
1						
g Fees an	d contracts from government agencies					
	dues and assessments					
	avings and temporary cash investments					·
4 Dividends ar	nd interest from securities			14	354	
5 Net rental in	come or (loss) from real estate					
a Debt-fina	anced property					
	t-financed property					<u> </u>
6 Net rental in	come or (loss) from personal property					<u> </u>
	ment income					
	s) from sales of assets other than inventory					
	or (loss) from special events	_				
•	or (loss) from sales of inventory	-				
	ue: a					
		-		-		
		-		+		
e	Id columns (b) (d) and (s)	·		0	354	0
	d columns (b), (d), and (e)			V _I		
	ne 12, columns (b), (d), and (e)	one)			¹³ —	354
(See worksheet	in line 13 instructions on page 28 to verify calculat		ent of Exempt	Purpose		354
	Relationship of Activities to the A Explain below how each activity for which incom	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
(See worksheet Part XVI-B	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
(See worksheet Part XVI-B Line No.	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
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See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
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See worksheet Part XVI-B Line No. ▼	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)
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(See worksheet Part XVI-B Line No.	n line 13 instructions on page 28 to verify calculat Relationship of Activities to the A Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ccomplishme is reported in c	olumn (e) of Part XV	/I-A contrib	es outed importantly to the)

DAA

•	41.6 7.7 11	Exempt Organiza			340110110		ompo with	.01101141	itabic		
1				e in any of the following w	ith any othe	r organization des	scribed			Yes	No
				n 501(c)(3) organizations)							
	organization	ns?									,
а	Transfers fro	om the reporting found	ation to a no	ncharitable exempt organi	zation of:]
	(1) Cash			•					1a(1)		<u>x</u>
	(2) Other as	ssets							1a(2)		X
b	Other transa	actions									-1
	(1) Sales of	f assets to a noncharita	able exempt	organization					1b(1)		X
	(2) Purchas	ses of assets from a no	ncharitable (exempt organization					1b(2)	ļ	X
		of facilities, equipment,		ets					1b(3)		X
		rsement arrangements							1b(4)		X
		r loan guarantees							1b(5)		X
			•	fundraising solicitations					1b(6)		X
	-		-	ther assets, or paid emplo	-	//-> - - - - - - -	alaa Alaa da	_ 4 _4	1c		X
a		=		plete the following schedu							
			_	ven by the reporting found							
	value in any (a) Line no	(b) Amount involved		nt, show in column (d) the of noncharitable exempt organ			transfers, transac		harino arrandi	ements	
N/	 	(b) Amount involved	(b) Hame (or nononamable exempt organ	24.10.1	(u) Doscription o	Tanoloro, tranogo	ilono, and o	namy arrang	om om o	
/									-		
								-			
											
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							=				
_		ļ									
		l	L								
28		•	-	with, or related to, one or than section 501(c)(3)) or			IS		Y	es 🗓	No
b	If "Yes," cor	mplete the following sci	hedule.								
		Name of organization	·····	(b) Type of organizati	on		(c) Description of	f relationsh	ıp		
	N/A										
											
											
											
	Under penalti belief, it is tru	ies of perjury, I declare that ie. correct.end complete [t I have exami Declaration of a	ned this return, including according according to the return to the return that the return to the re	npanying sche or (iduciary) is	edules and statemer based on all informa	its, and to the best ition of which prepa	of my know irer has any	ledge and knowledge		
		_/	11			-2010	DIRECT		ŭ		
6 \	Signature	e of office or trastee	- (Date		Title	<u>UR</u>			
ē	Joignatur	e or ornices or dastee			Date		1		Preparer's identi	fvina	
Ĭ		ranavaria N 💋 A	. ^	(/)		Date	Check if		number (see Sig	nature	
Sign Here	ا ا ا آ ا ا ا ا	reparer's A	10,44	Haerin		1571911	self-employed	¹►∐	page 30 of the in		
S	Pair Pair	1.000	REA LO	GAN & CO., L	LC, CP	A'S					-
		irm's name (or yours if elf-employed), address,	_	WASHINGTON S	-		Ì	EIN ▶	26-119	460	2
		nd ZIP code	MARIC						765-66		
	·	<u> </u>		, 10004				, none no	Form 90		_

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** THE OWN POINTANTON THE 26-3200645

THE OTT FOUND	ATION INC	20-3299645
Organization type (check or	e)·	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as	a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a p	rivate foundation
	501(c)(3) taxable private foundation	
•	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the Ge	neral Rule and a Special Rule See
General Rule		
_	iling Form 990, 990-EZ, or 990-PF that received, during the ne contributor. Complete Parts I and II.	year, \$5,000 or more (in money or
Special Rules		
sections 509(a)(1) ai	3) organization filing Form 990 or 990-EZ that met the 33 1/nd 170(b)(1)(A)(vi), and received from any one contributor, d% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form	uring the year, a contribution of the greater
the year, aggregate	(7), (8), or (10) organization filing Form 990 or 990-EZ that recontributions of more than \$1,000 for use exclusively for religion, or the prevention of cruelty to children or animals. Comple	gious, charitable, scientific, literary, or
the year, contribution aggregate to more the year for an exclusive	(7), (8), or (10) organization filing Form 990 or 990-EZ that resist for use exclusively for religious, charitable, etc., purposes an \$1,000. If this box is checked, enter here the total contribly religious, charitable, etc., purpose Do not complete any cation because it received nonexclusively religious, charitable.	, but these contributions did not putions that were received during the of the parts unless the General Rule
990-EZ, or 990-PF), but it me	t is not covered by the General Rule and/or the Special Rule ust answer "No" on Part IV, line 2 of its Form 990, or check rm 990-PF, to certify that it does not meet the filing requirem	the box in the heading of its Form

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) Page 1 of 1 of Part I Employer identification number .Name of organization 26-3299645 THE OTT FOUNDATION INC Part I Contributors (see instructions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 GARY & CONNIE OTT Person 606 VAL LANE Payroll 80,000 Noncash IN 46952 MARION (Complete Part II if there is a noncash contribution) (d) (b) (c) (a) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution 2 TLC MANAGEMENT INC Person 1800 N WABASH AVE Payroll 10,000 Noncash IN 46952 MARION (Complete Part II if there is a noncash contribution) (b) (c) (d) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. 3 RYAN & AMIE OTT Person 1050 LONG BRANCH COURT Payroll 35,000 Noncash IN 46933 GAS CITY (Complete Part II if there is a noncash contribution) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Type of contribution Name, address, and ZIP + 4 **Aggregate contributions** No. Person **Pavroll** \$ Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person **Payroll**

\$

(Complete Part II if there is a noncash contribution)

Noncash

26-3299645		Federal S	Federal Statements		
	Statement 1		- Form 990-PF, Part I, Line 16a - Legal Fees	Fees	
Description		Total 3 148	Net Investment	Adjusted Net	Charitable Purpose
TOTAL		-1 -1	0		
	Statement 2 - For	m 990-PF,	Part I, Line 16b - Accounting Fees	ing Fees	
Description		Total	Net Investment	Adjusted Net	Charitable Purpose
INDIRECT ACCOUNTING FEES TOTAL	BES S	1,550	\$	\$	0 % %
	Statement 3	3 - Form 990-PF, Part I,	Part I, Line 23 - Other Expenses	benses	
Description		Total	Net Investment	Adjusted Net	Charitable Purpose
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		\$	\$	\$
EXPENSES INTERNET DOMAIN MINISTRY TRAVEL		98 4,295			
TOTAL	_{.v} ,	4,393	v.	v.	O O
	Statement 4 - Form 990	n 990-PF, Part VII	-PF, Part VII-A, Line 10 - Substantial Contributors	Contributors	
Name					
	Add	Address		City, State, Zip	
	606 VAL LANE		MARION IN 46952	52	
NIAN & AMLE OII	1050 LONG BRANCH COURT	COURT	GAS CITY IN 4	46933	
					1-4

Federal Statements

Etc.
Trustees,
Directors,
of Officers,
1 - List o
I, Line
Part VII
990-PF.
- Form
Statement 5

,	0	0	0	0	0	0	0	0
Expenses								
Benefits	0	0	0	0	0	0	0	0
Compensation	0	0	0	0	0	0	0	0
Average Hours	0.00	00.00	00.00	00.00	00.00	0.00	0.00	0.00
Title	PRESIDENT	TREASURER	V-PRESIDENT	DIRECTOR	DIRECTOR	DIRECTOR	DIRECTOR	DIRECTOR
Name and Address	GARY OTT 606 VAL LANE MARION IN 46952	CONNIE OTT 606 VAL LANE MARION IN 46952	BRADLEY OTT 992 QUIET BAY CIRCLE CICERO IN 46034	SARAH OTT 992 QUIET BAY CIRCLE CICERO IN 46034	RYAN OTT 1050 LONG BRANCH COURT GAS CITY IN 46933	AMIE OTT 1050 LONG BRANCH COURT GAS CITY IN 46933	DANIEL SHOWALTER 16739 BURKET DRIVE WESTFIELD IN 46074	JENNIFER SHOWALTER 16739 BURKET DRIVE WESTFIELD IN 46074

26-3299645 Federa	I Statements
Statement 6 - Form 990-PF, Part IX-A, L	ine 1 - Summary of Direct Charitable Activities
Description	
RELIEF FOR THE POOR, DISTRESSED OR UND ADVANCEMENT OF EDUCATION WHICH INCLUDE EDUCATIONAL INSTITUTIONS FOR THE SUPPOOF THE EDUCATIONAL INSTITUTION OR REWASCHOLARSHIPS. SUPPORT OF RELIGIOUS OR	CONTRIBUTING TO ORT AND FURTHERANCE ARDING OF
Form 990-PF, Part XV, Line 1a - Mai	nagers Who Contributed Over 2% or \$5,000
Name of Manager	Amount
GARY & CONNIE OTT TOTAL	\$ \$ <u>0</u>

-3299645
26

Federal Statements

latement 7 - Form 990-PF, Part XV, Line 3a - Gra Year
--

Name	Address			•
Address	Relationship	Status	Purpose	Amount
KINGDOM BUILDING MINIST. AURORA OH 80014	14485 E EVANS AVE NONE	CHARITY	MINISTRY OUTREACH & STAFF SUPPORT	111,000
TAYLOR UNIVERSITY	236 W READE AVE	EDUCATIONAL	FOOTBALL GRANT	10,500
INDIANA WESLEYAN UNIV.	4201 S WASHINGTON ST		ANNIJAI, FUND	10,000
GRANT CO. RESCUE MISSION	423 S GALLATIN ST	VIII OKINO	CENEDAL MINISTER NEEDS	000
THE SOLD PROJECT	3037-T HOPYARD ROAD	CDAKLLI	GENERAL MINICINI NEEDS	
	NONE TAMES SOI	CHARITY	OPERATIONS & EDUCATION FOR CHILDREN	4,000
	NONE	CHARITY	SUPPORT HOMELESS & NEEDY	4,000
GLUBAL PARINERS INDIANAPOLIS IN 46250	FO BOX 50434 NONE	CHARITY	MISSIONARY SUPPORT	4,000
WYCLIFF BIBLE TRANSLATORS	PO BOX 628200	SHIGKHO	MISSIONADV SIIDDODIII	000 8
NEIGHBOR HOPE MINISTRIES	MMS ST.,	UNIT O	MESSICIATIVE SOFFORT	
LITTLETON CO 80127	NONE	CHARITY	PROJECT ABRAHAM	3,000
COLLEGE WESLEYAN CHURCH	200 E 38TH STREET	אשדמגווס	THE CHOME	000 6
MAKION IN 46953 GINGHAMSBURG CHURCH	NONE 6759 S CR 25A	CHAKLII	FELLOWSHIP FOND	7
TIPP CITY OH 45371	NONE	CHARITY	SUDAN PROJECT	2,000
DREW PEARSON MEMORIAL FORT WAYNE IN 46825	720 E DUPONT ROAD NONE	CHARITY	MEMORIAL	1,000
GILEAD MINISTRIES	PO BOX 134			
JONESBORO IN 46938		CHARITY	GENERAL MINISTRY NEEDS	1,000
LAMP LIGHTER MINISTRIES FISHERS IN 46038	PO BOX 365 NONE	CHARITY	GENERAL MINISTRY NEEDS	1,000
LOVING ACCURATELY MINIST. INDIANAPOLIS IN 46250	PO BOX 30795 NONE	CHARITY	SOUTH AFRICA MINISTRY	1,000
YOUTH FOR CHRIST BLUFFTON IN 46714	1515 SUTTON CIRCLE I NONE	DRIVE CHARITY	GENERAL MINISTRY NEEDS	1,000
HOUSE OF PRAISE	PO BOX 234	1		7
BARKSDALE TX /8828 CFC - NFW LTFF CHIRCH	NONE PO ROX 213	CHAKLTY	MISSIONS	T,000
BARRE MA 0	NONE	CHARITY	WORK IN BELARUS	1,000

:	,		165, 500	
\$	Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)	•		
Federal Statements	Part XV, Line 3a - Grants and Year (continued)		Signo	
	ent 7 - Form 990-PF, F	Address	Helationship	
26-3299645	Stateme	Name	TOTAL	