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# Form 990-PF

Department of the Treasury  
Internal Revenue Service

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

Treated as a Private Foundation

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

2009

For calendar year 2009, or tax year beginning , 2009, and ending , 20

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☒ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation MATTHEW 28 18-20 CHARITABLE FOUNDATION 480015015		A Employer identification number 35-1847299
	Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see page 10 of the instructions) (574) 235-2790
	P.O. BOX 1602		C If exemption application is pending, check here <input type="checkbox"/>
	City or town, state, and ZIP code SOUTH BEND, IN 46634		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 2,701,370.		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)				
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	48,828.	48,828.	48,828.	STMT 1
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	22,191.			
b	Gross sales price for all assets on line 6a	48,823.			
7	Capital gain net income (from Part IV, line 2)		22,191.		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)	4,393.			STMT 2
12	Total. Add lines 1 through 11	75,412.	71,019.	48,828.	
13	Compensation of officers, directors, trustees, etc.	6,515.	3,183.		
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)	1,275.	1,275.	NONE	NONE
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see page 14 of the instructions)	1,246.			
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule)				
24	Total operating and administrative expenses. Add lines 13 through 23	9,036.	4,458.	NONE	NONE
25	Contributions, gifts, grants paid	110,323.			110,323.
26	Total expenses and disbursements. Add lines 24 and 25	119,359.	4,458.	NONE	110,323.
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	-43,947.			
b	Net investment income (if negative, enter -0-)		66,561.		
c	Adjusted net income (if negative, enter -0-)			48,828.	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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Form 990-PF (2009)

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing . . . . .				
	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 (attach schedule) ▶ . . . . .				
		Less: allowance for doubtful accounts ▶ . . . . .				
	8	Inventories for sale or use . . . . .				
	9	Prepaid expenses and deferred charges . . . . .				
	10 a	Investments - U S and state government obligations (attach schedule) . . . . .				
	b	Investments - corporate stock (attach schedule) . . . . .				
	c	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) . . . . . STMT 5 . . . . .	2,532,711.	2,507,022.	2,701,370.		
14	Land, buildings, and equipment: basis ▶ . . . . .					
	Less: accumulated depreciation ▶ (attach schedule) . . . . .					
15	Other assets (describe ▶ . . . . .)					
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .	2,532,711.	2,507,022.	2,701,370.		
Liabilities	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 (attach schedule) . . . . .				
	22	Other liabilities (describe ▶ . . . . .)				
23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .					
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.</b>					
	24	Unrestricted . . . . .				
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/></b>					
	27	Capital stock, trust principal, or current funds . . . . .	2,532,711.	2,507,022.		
	28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .				
	29	Retained earnings, accumulated income, endowment, or other funds . . . . .				
	30	<b>Total net assets or fund balances</b> (see page 17 of the instructions) . . . . .	2,532,711.	2,507,022.		
	31	<b>Total liabilities and net assets/fund balances</b> (see page 17 of the instructions) . . . . .	2,532,711.	2,507,022.		

**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 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	2,532,711.
2	Enter amount from Part I, line 27a . . . . .	2	-43,947.
3	Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 6 . . . . .	3	22,401.
4	Add lines 1, 2, and 3 . . . . .	4	2,511,165.
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 7 . . . . .	5	4,143.
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . . .	6	2,507,022.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a SEE PART IV DETAIL</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2 Capital gain net income or (net capital loss) . . . . .</b> { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			<b>2</b>	22,191.	
<b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):</b> If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8. . . . .			<b>3</b>		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? . . . . ☐ Yes ☒ No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries.**

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	147,393.	2,716,199.	0.05426443350
2007	66,000.	2,917,222.	0.02262426377
2006	78,000.	2,598,892.	0.03001279007
2005	61,500.	2,364,935.	0.02600494305
2004	65,500.	2,132,829.	0.03071038513
<b>2 Total of line 1, column (d) . . . . .</b>			<b>2</b> 0.16361681552
<b>3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .</b>			<b>3</b> 0.03272336310
<b>4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 . . . . .</b>			<b>4</b> 2,532,560.
<b>5 Multiply line 4 by line 3 . . . . .</b>			<b>5</b> 82,874.
<b>6 Enter 1% of net investment income (1% of Part I, line 27b) . . . . .</b>			<b>6</b> 666.
<b>7 Add lines 5 and 6 . . . . .</b>			<b>7</b> 83,540.
<b>8 Enter qualifying distributions from Part XII, line 4 . . . . .</b> If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.			<b>8</b> 110,323.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . .			
Date of ruling or determination letter: _____ (attach copy of ruling letter if necessary - see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	666.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . . . .		2	
3 Add lines 1 and 2 . . . . .		3	666.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .		4	NONE
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	666.
6 Credits/Payments:			
a 2009 estimated tax payments and 2008 overpayment credited to 2009 . . . . .	6a	1,000.	
b Exempt foreign organizations-tax withheld at source . . . . .	6b	NONE	
c Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	NONE	
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d . . . . .	7	1,000.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .	10	334.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax <input checked="" type="checkbox"/> 334. Refunded <input checked="" type="checkbox"/>	11		

**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 any political campaign? . . . . .		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .		X
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.		
c Did the foundation file Form 1120-POL for this year? . . . . .		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input checked="" type="checkbox"/> \$ _____ (2) On foundation managers <input checked="" type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .		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 . . . . .		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .		X
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? . . . . .	X	
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. . . . .	X	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input checked="" type="checkbox"/> STMT 8		
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 . . . . .	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 . . . . .		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		X

Form 990-PF (2009)

**Part 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		X
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 application? . . . . .	13	X	
Website address <input type="checkbox"/> N/A				
14 The books are in care of <input type="checkbox"/> Telephone no <input type="checkbox"/>				
Located at <input type="checkbox"/> ZIP + 4 <input type="checkbox"/>				
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <input type="checkbox"/> 15				

**Part 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 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? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 termination of government service, if terminating within 90 days) . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . . .	1b	
Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>		
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 2009? . . . . .	1c	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)):		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If "Yes," list the years <input type="checkbox"/>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 20 of the instructions) . . . . .	2b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <input type="checkbox"/>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 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 2009.) . . . . .	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a	X
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 2009? . . . . .	4b	X

Form 990-PF (2009)

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

- 5a** During the year did the foundation pay or incur any amount to:
- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (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 instructions) ☐ Yes ☒ 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 ☒ No
- b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? ☐ Yes ☒ No  
Organizations relying on a current notice regarding disaster assistance check here ☐
- c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No  
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 pay premiums on a personal benefit contract? ☐ Yes ☒ No
- b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No  
If "Yes" to 6b, file Form 8870.
- 7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No
- b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

5b

6b

7b

X

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(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 deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 9		6,515.	-0-	-0-

**2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, 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		NONE	NONE	NONE

Total number of other employees paid over \$50,000 ☐ NONE

Form 990-PF (2009)

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services** (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE

Total number of others receiving over \$50,000 for professional services . . . . . **NONE****Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NONE	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3 . . . . .	

Form 990-PF (2009)



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	2,571,127.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	NONE
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions) . . . . .	<b>1c</b>	NONE
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	2,571,127.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	NONE
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	2,571,127.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions) . . . . .	<b>4</b>	38,567.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	2,532,560.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	126,628.

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	126,628.
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5 . . . . .	<b>2a</b>	666.
<b>b</b>	Income tax for 2009. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	666.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	125,962.
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	NONE
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	125,962.
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions) . . . . .	<b>6</b>	NONE
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	125,962.

**Part XII Qualifying Distributions** (see page 25 of the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	110,323.
<b>b</b>	Program-related investments - total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	NONE
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	NONE
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	NONE
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	110,323.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions) . . . . .	<b>5</b>	666.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	109,657.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7 . . . . .				125,962.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only . . . . .			110,323.	
b Total for prior years: 20____, 20____, 20____		NONE		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 . . . . .	NONE			
b From 2005 . . . . .	NONE			
c From 2006 . . . . .	NONE			
d From 2007 . . . . .	NONE			
e From 2008 . . . . .	NONE			
f Total of lines 3a through e . . . . .	NONE			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 110,323.				
a Applied to 2008, but not more than line 2a . . .			110,323.	
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions) . . . . .				
c Treated as distributions out of corpus (Election required - see page 26 of the instructions) . . . . .	NONE			
d Applied to 2009 distributable amount . . . . .				NONE
e Remaining amount distributed out of corpus . . .	NONE			
5 Excess distributions carryover applied to 2009 . (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		NONE		
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 . . . . .		NONE		
d Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions . . . . .		NONE		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see page 27 of the instructions . . . . .				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010. . . . .				125,962.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .	NONE			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .	NONE			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a . . . . .	NONE			
10 Analysis of line 9:				
a Excess from 2005 . . .	NONE			
b Excess from 2006 . . .	NONE			
c Excess from 2007 . . .	NONE			
d Excess from 2008 . . .	NONE			
e Excess from 2009 . . .	NONE			

Form 990-PF (2009)

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9) **NOT APPLICABLE**

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling . . . . .

**b** Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test - enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i). . . . .					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test - enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> Gross investment income . . . . .					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

N/A

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number of the person to whom applications should be addressed.

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

**c** Any submission deadlines:

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

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> Paid during the year  SEE STATEMENT 22				
<b>Total</b> . . . . .			<b>3a</b>	110,323.
<b>b</b> Approved for future payment				
<b>Total</b> . . . . .			<b>3b</b>	



## Part XVII

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash . . . . .		<b>1a(1)</b>	<b>X</b>
(2) Other assets . . . . .		<b>1a(2)</b>	<b>X</b>
<b>b</b> Other transactions:			
(1) Sales of assets to a noncharitable exempt organization . . . . .		<b>1b(1)</b>	<b>X</b>
(2) Purchases of assets from a noncharitable exempt organization . . . . .		<b>1b(2)</b>	<b>X</b>
(3) Rental of facilities, equipment, or other assets . . . . .		<b>1b(3)</b>	<b>X</b>
(4) Reimbursement arrangements . . . . .		<b>1b(4)</b>	<b>X</b>
(5) Loans or loan guarantees . . . . .		<b>1b(5)</b>	<b>X</b>
(6) Performance of services or membership or fundraising solicitations . . . . .		<b>1b(6)</b>	<b>X</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .		<b>1c</b>	<b>X</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received			

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b If "Yes," complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<p>Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge</p>			
<p><b>Sign Here</b></p>		<p><b>Preparer's Use Only</b></p>	
<p>Signature of officer or trustee <b>Regan Adams, ACP</b></p>		<p>Date <b>12/1/10</b></p>	
<p>Title <b>ACP</b></p>		<p>Preparer's identifying number (See <b>Signature</b> on page 30 of the instructions)</p>	
<p>Preparer's signature <b>[Signature]</b></p>		<p>Check if self-employed <input type="checkbox"/></p>	
<p>Date</p>		<p>Firm's name (or yours if self-employed), address, and ZIP code</p>	
<p><b>1ST SOURCE BANK</b></p>		<p><b>EIN 35-0309575</b></p>	
<p><b>P O BOX 1602</b></p>		<p><b>46634</b></p>	
<p><b>SOUTH BEND, IN</b></p>		<p><b>Phone no 574-235-2790</b></p>	

**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL SHORT-TERM COMMON TRUST FUND AND PARTNERSHIP, S CORPORATION, AND OTHER ESTATES OR TRUST GAIN OR LOSS					-761.	
		TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS					481.	
		TOTAL LONG-TERM COMMON TRUST FUND AND PARTNERSHIP, S CORPORATION, AND OTHER ESTATES OR TRUST GAIN OR LOSS					-3,624.	
25,000.00		25000. MERRILL LYNCH & CO 4.75% DUE 11/2 PROPERTY TYPE: SECURITIES 26,625.00					03/25/2004 -1,625.00	11/20/2009
7.00		.4 PFIZER INC PROPERTY TYPE: SECURITIES 7.00					08/02/1993	10/26/2009
27,720.00		840. WYETH PROPERTY TYPE: SECURITIES					05/27/1993 27,720.00	10/19/2009
TOTAL GAIN(LOSS) .....		.....					----- 22,191. =====	

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
-----	-----	-----	-----
FMA SMALL COMPANY PORT-IN	191.	191.	191.
BANK OF AMERICA CORP 5.125% DUE 11/15/20	-57.	-57.	-57.
COCA COLA CO	2,460.	2,460.	2,460.
WASATCH - 1ST SOURCE INCOME EQ FD	104.	104.	104.
DODGE & COX INTERNATIONAL STOCK FD	2,185.	2,185.	2,185.
FEDERAL HOME LOAN BANK 3.875% DUE 02/12/	969.	969.	969.
FIDELITY CONTRA FUND #022	1,105.	1,105.	1,105.
GOLDMAN SACHS FS TREASURY OBLIGATION	349.	349.	349.
MCDONALDS CORP	4,100.	4,100.	4,100.
MERRILL LYNCH & CO 4.75% DUE 11/20/2009	1,188.	1,188.	1,188.
PFIZER INC	132.	132.	132.
PROCTER & GAMBLE CO	1,410.	1,410.	1,410.
WASATCH - 1ST SOURCE INCOME EQ FD	8,578.	8,578.	8,578.
WYETH	756.	756.	756.
UNITS IN INCOME FUND OF 1ST SOURCE BANK	19,643.	19,643.	19,643.
UNITS IN SHORT TERM INCOME FUND OF 1ST S	5,715.	5,715.	5,715.
TOTAL	48,828.	48,828.	48,828.
	=====	=====	=====



FORM 990PF, PART I - OTHER INCOME  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
2008 REFUND	3,393.
2008 REFUND APLLIED	1,000.
	-----
TOTALS	4,393.
	=====

FORM 990PF, PART I - ACCOUNTING FEES  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
TAX PREPARATION FEES	1,275.	1,275.		
TOTALS	1,275.	1,275.	NONE	NONE
	=====	=====	=====	=====

FORM 990PF, PART I - TAXES  
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
2008 REFUND APPLIED	1,000.
DODGE & COX INTERTL	246.
	-----
TOTALS	1,246.
	=====



FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
BOOK TO TAX TIMING ADJUSTMENT	2,485.
NW MUTUAL COST ADJUSTMENT	17,415.
2008 RETURNED GRANT FROM IMPACT MINISTRI	2,500.
ROUNDING DIFFERENCE	1.
	-----
TOTAL	22,401.
	=====

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
BOOK TO TAX TIMING ADJUSTMENT	1,643.
PAID TO MICHIANA CHRISTIAN SERVICE	
CAMP ON 6/9/2009 FOR 2008	2,500.
	-----
TOTAL	4,143.
	=====

-----  
STATE(S) WHERE THE FOUNDATION IS REGISTERED  
=====

IN

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:

1ST SOURCE BANK

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION ..... 6,515.

TOTAL COMPENSATION: 6,515.

=====



RECIPIENT NAME:  
MICHIANA CHRISTIAN SERVICE CAMP  
ADDRESS:  
1619 STEINBAUER ROAD  
NILES, MI 49120  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE

RECIPIENT NAME:  
AMERICAN FAMILY ASSOCIATION  
ADDRESS:  
107 PARKGATE, P O BOX 2440  
TUPELO, MS 38803  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
CENTRAL BRAZIL CHRISTIAN MISSION  
ADDRESS:  
12595 N. US HWY 231  
ROACHDALE, IN 46172  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

=====

RECIPIENT NAME:

CENTRAL JAPAN CHRISTIAN MISSION

ADDRESS:

9699 2ND STREET NORTH  
ST. PETERSBURG, FL 33702

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

CHRISTIAN RESTORATION ASSOCIATION

ADDRESS:

5664 CHVIOT ROAD  
CINCINNATI, OH 45247

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

OUTREACH INTERNATIONAL  
C/O JERRY VANARSDALL

ADDRESS:

1360 HINEYSUCKLE LANE  
NILES, MI 49120

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 4,000.

RECIPIENT NAME:  
CINCINNATI CHRISTIAN UNIVERSITY  
ADDRESS:  
2700 GLENNA AVENUE  
CINCINNATI, OH 45201  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
COOKSON HILLS CHRISTIAN MINISTRIES  
ADDRESS:  
RR #3, BOX 200  
KANSAS, OK 74347  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
DOES GOD EXIST?  
C/O JOHN CLAYTON  
ADDRESS:  
P O BOX 2704  
SOUTH BEND, IN 46680-2704  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

ELOKU MEA NUI MINISTRIES  
C/O KAU DENNIS SALLAS

ADDRESS:

41160 NOLU STREET  
WEIMANALO, HI 96795

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

EXTENDED HAND MINISTRIES

ADDRESS:

1700 W. SMITH VALLEY ROAD, STE A-3  
GREENWOOD, IN 46142

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

COLUMBIA CHRISTIAN MISSION

ADDRESS:

6 HERITAGE LANE  
RITTMAN, OH 44270

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

=====

RECIPIENT NAME:

GREAT LAKES CHRISTIAN COLLEGE

ADDRESS:

5211 WEST WILLOW HIGHWAY

LANSING, MI 48917

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

HEARING & RECEIVING CHRIST MINISTRY

C/O MARK & HELE BEGARLY

ADDRESS:

506 DAVIS HOLLOIW ROAD

KNOXVILLE, TN 37865

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

HOPE RESCUE MISSION

ADDRESS:

52 SOUTH MICHIGAN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
IMPACT MINISTRIES INTERNATIONAL  
C/O DEAN TRUNE, EXC. DIRECTOR  
ADDRESS:  
P O BOX 17620  
TAMPA, FL 33682  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
FAME MINISTRIES  
ADDRESS:  
P O BOX 688  
COLUMBUS, OH 47202  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
KENTUCKY CHRISTIAN UNIVERSITY  
ADDRESS:  
100 ACADEMIC PARKWAY  
GRAYSON, KY 41143  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

=====

## RECIPIENT NAME:

KIAMICHI MOUNTAINS CHRISTIAN  
MISSION

## ADDRESS:

P O BOX 67  
HONOBIA, OK 74549

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

## RECIPIENT NAME:

LIFE LINE CHRISTIAN MISSION

## ADDRESS:

184 OLD COUNTRY LANE  
WESTVILLE, OH 43081

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

## RECIPIENT NAME:

MATABELE LAND CHRISTIAN MISSION

## ADDRESS:

R R #2, BOX 72  
FARINA, IL 62838

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

=====

RECIPIENT NAME:

JC'S VILLAGE

ADDRESS:

P O BOX 3354

LA CROSS, WI 54602

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

PURDUE CHRISTIAN CAMPUS HOUSE

ADDRESS:

1000 STATE STRRET

WEST LAFAYETTE, IN 47906

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

SOUTHWEST INDIA MISSION

ADDRESS:

6533 VISITATION DRIVE

CINCINNATI, OH 45248

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.



=====

RECIPIENT NAME:

SPANISH AMERICAN EVANGELISM  
MINISTRIES

ADDRESS:

650 LINWOOD DRIVE  
HORIZON CITY, TX 79928

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

WHITE FIELDS OVERSEAS EVANGELISM

ADDRESS:

BOX 1089  
JOPLIN, MO 64802

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

MEXICAN MISSIONARY ORGANIZATION

ADDRESS:

81 STONEHGE  
MATTOO, IL 61938

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

=====

RECIPIENT NAME:

MISSIONS ALIVE

ADDRESS:

1980 STATE ROAD 14

MORSEVILLE, IN 46158

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

NEW CHURCHES OF CHRIST EVANGELIST

ADDRESS:

1205 EAST SAGINAW

LANSING, MI 48906

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

ORCHARD GROUP INC

ADDRESS:

P O BOX 9

EAST ISLIP, NY 11730

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

=====

RECIPIENT NAME:

PARENTS TELEVISION COUNCIL

ADDRESS:

707 WILSHIRE BLVD

LOS ANGELES, CA 90017

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

WINSTON SALEM CHRISTIAN COLLEGE

ADDRESS:

4117 NORTH HAMPTON DR, P O BOX 777

WINSTON SALEM, NC 27105

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

WOODBURN CHRISTIAN CHILDRENS HOME

ADDRESS:

24902 NOTESTINE ROAD, RR #1

WOODBURN, IN 46797

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
WORLD HELP  
ADDRESS:  
P O BOX 501  
FOREST, VA 24551  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
WORLD BIBLE SCHOOL  
ADDRESS:  
P O BOX 501  
FOREST, VA 24551  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
SALVATION ARMY  
ADDRESS:  
540 CARROLL ST  
SOUTH BEND, IN 46601  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
DEER RUN CHURCH OF CHRIST  
ADDRESS:  
2730 SOUTH IRONWOOD  
SOUTH BEND, IN 46614  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:  
MICHIANA CHRISTIAN SCHOOL  
ADDRESS:  
2730 S. IRONWOOD DRIVE  
SOUTH BEND, IN 46614  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTION  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:  
SALVATION ARMY  
ADDRESS:  
540 CARROLL  
SOUTH BEND, IN 46601  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTIONNONE  
AMOUNT OF GRANT PAID ..... 323.

TOTAL GRANTS PAID: 110,323.  
=====

**SCHEDULE D**  
**(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

► **Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).**

OMB No 1545-0092

**2009**

Name of estate or trust

**MATTHEW 28 18-20 CHARITABLE FOUNDATION**

Employer identification number

**35-1847299**

**Note:** Form 5227 filers need to complete **only Parts I and II.**

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>1a</b>					
<b>b</b> Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b . . . . .				<b>1b</b>	
<b>2</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . .				<b>2</b>	
<b>3</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .				<b>3</b>	<b>-761.</b>
<b>4</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet . . . . .				<b>4</b>	<b>( )</b>
<b>5</b> <b>Net short-term gain or (loss).</b> Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back . . . . .				<b>5</b>	<b>-761.</b>

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>6a</b>					
<b>LONG-TERM CAPITAL GAIN DIVIDENDS</b>		<b>STMT 1</b>			<b>481.</b>
<b>b</b> Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b . . . . .				<b>6b</b>	<b>26,095.</b>
<b>7</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . .				<b>7</b>	
<b>8</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .				<b>8</b>	<b>-3,624.</b>
<b>9</b> Capital gain distributions . . . . .				<b>9</b>	
<b>10</b> Gain from Form 4797, Part I . . . . .				<b>10</b>	
<b>11</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss Carryover Worksheet . . . . .				<b>11</b>	<b>( )</b>
<b>12</b> <b>Net long-term gain or (loss).</b> Combine lines 6a through 11 in column (f). Enter here and on line 14a, column (3) on the back . . . . .				<b>12</b>	<b>22,952.</b>

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

<b>Part III Summary of Parts I and II</b>		(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
<b>Caution: Read the instructions before completing this part.</b>				
<b>13</b>	<b>Net short-term gain or (loss)</b> . . . . .	<b>13</b>		-761.
<b>14</b>	<b>Net long-term gain or (loss):</b>			
a	Total for year . . . . .	<b>14a</b>		22,952.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.) . . . . .	<b>14b</b>		
c	28% rate gain . . . . .	<b>14c</b>		
<b>15</b>	<b>Total net gain or (loss).</b> Combine lines 13 and 14a . . . . . ▶	<b>15</b>		22,191.

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

<b>Part IV Capital Loss Limitation</b>	
<b>16</b>	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000 . . . . .
<b>16</b>	( )

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** on page 7 of the instructions to figure your capital loss carryover.

### **Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part **only** if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

**Caution:** Skip this part and complete the worksheet on page 8 of the instructions if:

- Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

**Form 990-T trusts.** Complete this part **only** if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

<b>17</b>	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . . . .	<b>17</b>	
<b>18</b>	Enter the smaller of line 14a or 15 in column (2) but not less than zero . . . . .	<b>18</b>	
<b>19</b>	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . . .	<b>19</b>	
<b>20</b>	Add lines 18 and 19 . . . . .	<b>20</b>	
<b>21</b>	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . . . ▶	<b>21</b>	
<b>22</b>	Subtract line 21 from line 20. If zero or less, enter -0- . . . . .	<b>22</b>	
<b>23</b>	Subtract line 22 from line 17. If zero or less, enter -0- . . . . .	<b>23</b>	
<b>24</b>	Enter the smaller of the amount on line 17 or \$2,300 . . . . .	<b>24</b>	
<b>25</b>	Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. <input type="checkbox"/> No. Enter the amount from line 23 . . . . .	<b>25</b>	
<b>26</b>	Subtract line 25 from line 24 . . . . .	<b>26</b>	
<b>27</b>	Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> No. Enter the smaller of line 17 or line 22 . . . . .	<b>27</b>	
<b>28</b>	Enter the amount from line 26 (If line 26 is blank, enter -0-) . . . . .	<b>28</b>	
<b>29</b>	Subtract line 28 from line 27 . . . . .	<b>29</b>	
<b>30</b>	Multiply line 29 by 15% (.15) . . . . .	<b>30</b>	
<b>31</b>	Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>31</b>	
<b>32</b>	Add lines 30 and 31 . . . . .	<b>32</b>	
<b>33</b>	Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>33</b>	
<b>34</b>	<b>Tax on all taxable income.</b> Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) . . . . .	<b>34</b>	

Schedule D (Form 1041) 2009

Employer identification number

35-1847299

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example: 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
<b>6a</b> 25000. MERRILL LYNCH & CO 4.75% DUE 11/20/2009	03/25/2004	11/20/2009	25,000.00	26,625.00	-1,625.00
.4 PFIZER INC	08/02/1993	10/26/2009	7.00	7.00	
840. WYETH	05/27/1993	10/19/2009	27,720.00		27,720.00
<b>6b Total.</b> Combine the amounts in column (f). Enter here and on Schedule D, line 6b . . . . .					26,095.00



FEDERAL CAPITAL GAIN DIVIDENDS

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LONG-TERM CAPITAL GAIN DIVIDENDS

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15% RATE CAPITAL GAIN DIVIDENDS

ENRON CLASS ACTION SETTLEMENT	17.00
GILAT SATELLITE NETWORK CLASS ACTION	76.00
MOTOROLA CLASS ACTION 02/03/00 - 05/14/01	23.00
NASH FINCH LITIGATION	32.00
OMNIVISION CLASS ACTION SETTLEMENT	284.00
SEC VS AIG FAIR FUND GLASS ACTION	12.00
TYCO CLASS ACTION	36.00

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TOTAL 15% RATE CAPITAL GAIN DIVIDENDS

481.00

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TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS

481.00

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GAINS AND LOSSES FROM PASS-THRU ENTITIES  
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NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS  
AND OTHER FIDUCIARIES

COMMON TRUST FUNDS	-761.00
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TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

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-761.00  
=====

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS  
AND OTHER FIDUCIARIES

COMMON TRUST FUNDS	-3,624.00
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TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

-----  
-3,624.00  
=====