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Form 990-PF

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

OMB No 1545-0052 @@**^**

		ent of the T levenue Se		Note. The found	dat <u>ion m</u> ay l	pe able to use a copy of	this return to s	on atisfy state re	porting requirements	2009
Fo	or ca	lendar	year 2009	, or tax year b				, and endin		, 20
G	Che	ck all t	hat apply	Initial re	turn	Initial return	n of a former p	oublic chari	ty	Final return
				Amende	ed return	Addr	ess change		Name change	<u> </u>
			Name of fo	undation				•	A Employeridenti	fication number
(Jse t	he IRS								
	lat	bel.	SHROYE	R SCHOLARS	HIP FUN	ND 000381			35	-6017466
	Othe	rwise,				mail is not delivered to stre	et address)	Room/suit		e page 10 of the instructions)
	•	ınt								.,
		ype.	200 EAS	ST JACKSON	STREET	7			1) _
		pecific ctions		n, state, and ZIP		·		L.,	C If exemption applic	
	iistiu	Ctions] '						pending, check her	► 1 1
			MUNCTE	, IN 47305					D 1 Foreign organiza 2 Foreign organiza	
Н	Che	ck type				(c)(3) exempt private	foundation		85% test, check	here and attach
Ï	1			onexempt charita		Other taxable p		tion	computation •	
Ť				II assets at end		unting method X		rual		in status was terminated
			om Part II, c			ther (specify)	Od311 7100	, au		b)(1)(A), check here .
		▶ \$		012,132.		column (d) must be	on cash basis.		1	(b)(1)(B), check here
				enue and Expe					under accitors 5071	(d) Disbursements
		total o	of amounts ii	n columns (b), (c)	, and (d)	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net	for charitable
				ly equal the amo ge 11 of the inst		books	incon	ne	income	purposes
_	1			s, etc , received (attac			1		1	(cash basis only)
	2	Check I	_ lif the	e foundation is not	required to				,	
	3		attac	ch Sch. B		270	1	270.		STMT 1
	4		=	rest from securiti		31,142		1,142.		STMT 2
	5 a			· · · · · · · · · · · ·			' †	1,172.		JIMI Z
				loss)				-	· · · · · · · · · · · · · · · · · · ·	
						-37,453		-	·	
ue		Gross sa	ales price for a	n sale of assets not ill	5,547.	37,433	<u>' </u>	+		
Revenue	١,		n line 6a						- · · · · · · · · · · · · · · · · · · ·	
Re	7	•	-	ome (from Part I		<u></u>	+	-		
	8			tal gain ns						
	9 10 a		i modificatio iles less return							
			wances • • •				 			
	1		st of goods so	s) (attach schedu						
	l					774	+			STMT 3
	11 12			ch schedule)		-5,267		31,412.		51111 5
-				hrough 11		10,209		7,657.		2,552.
	13 14	Comper	isation of offic	TEMPONE THE STREET	D etc ·	10,203		7,057.		4,334.
Ş			1 1	-		<u> </u>	1			
nse	15 16a	Least	ees Guach s	lovee benefits	mai P	1,100	- 	NONE	NON	E NONE
çpe	Ι.			ttach schedule)	735 1 7 1	800		NONE	NON:	
ш	b	Ornor	illing lees ta	ttacii schedule/	11111		<u>'</u>	NONE	INOIN.	none
<u>ĕ</u> .	4.7	Other p	rolessiona	GDEN SCO	ome) .— I.				·	
<u>tra</u>	17 18	T		e) (see page 14 of the	TMT 6	630	, 			
nist	19			e) (see page 14 of the h schedule) and		030	<u>' </u>			
Ξ	20	•		-		<u> </u>				
Ad	ľ		•			 -				
and Administrative Expenses	21			, and meetings ,		<u> </u>	 			
9	22			ations tach schedule) S		60	 			
Operating	23		•				' +			
era	24			d administrative	=	12 700	. [7 657	NTONT.	3 550
ဝ	25			gh 23		12,799 38,412		7,657.	NON:	
	25		_	, grants paid				7 657	NT/NT	38,412.
_	26			ursements Add line	s 24 and 25	21,411	+	7,657.	NON:	E 40,964.
	27		ct line 26 fro			FC 470	.			
	l .			expenses and disbur		-56,478		775		
	l			come (if negative			 	23,755.		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 9E1410 1 000 JO2436 A541 04/08/2010 14:44:56 000381

JSA

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000381

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35-6017466 _____ Page **2**

Attached schedules and amounts in the Beginning of year End of year Part II Balance Sheets description column should be for end-of-year amounts only (See instructions) (a) Book Value (b) Book Value (c) Fair Market Value 52,064. 95,312. 95,312 2 Savings and temporary cash investments 3 Accounts receivable Less allowance for doubtful accounts Pledges receivable Less allowance for doubtful accounts ▶ Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions) Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts ▶ 9 10 a Investments - U S and state government obligations (attach schedule) . 484,831. 387,815 411,739 b Investments - corporate stock (attach schedule) c Investments - corporate bonds (attach schedule). 488,234. 487,727 505,081 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 12 13 Investments - other (attach schedule) Land, buildings, and Less accumulated depreciation (attach schedule) 15 Other assets (describe) 16 Total assets (to be completed by all filers - see the 1,025,129. 970,854. 1,012,132. 17 Accounts payable and accrued expenses 18 Grants payable 19 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) Other liabilities (describe 22 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31. Balances 24 25 26 Fund Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ X Capital stock, trust principal, or current funds 1,025,129. ō 970,854 27 28 Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds . . Total net assets or fund balances (see page 17 of the 30 Vet 1,025,129. 970,854 Total liabilities and net assets/fund balances (see page 17 1,025,129. 970,854 Part III Analysis of Changes in Net Assets or Fund Balances 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) 1,025,129. 1 2 Enter amount from Part I, line 27a 2 -56,478. 3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 8 2,203. 3 970,854 4 5 Decreases not included in line 2 (itemize) ▶__

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970,854.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . .

Page 3

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
	describe the kind(s) of property sold (e		(b) How acquired	(c) Date acquired	(d) Date sold
	ck warehouse; or common stock, 200	shs MLC Co.)	P-Purchase D-Donation	(mo , day, yr.)	(mo., day, yr)
1a SEE PART IV DETA	[L				
_b					
<u>c</u>			_		
<u>d</u>	-				
<u>e</u>	(6) Daniel de la Blanca	(g) Cost or other basis		(h) Core on (le	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					
<u>b</u>			<u> </u>		-
d	···				
e					
	wing gain in column (h) and owner	d by the foundation on 12/31/69		C-: (C-1 /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		Gains (Col. (h) ga (k), but not less to Losses (from co	than -0-) or
a					
b					
C			-		
d					
e					
2 Capital gain net income or (gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-37,453.
3 Net short-term capital gain o	or (loss) as defined in sections 122	22(5) and (6)			
If gain, also enter in Part I, li	ne 8, column (c) (see pages 13 ar	nd 17 of the instructions).			
	ne 8		3		
		section 4940(a) tax on net investment			
		: utable amount of any year in the b Do not complete this part.	ase perio	d?	Yes X No
1 Enter the appropriate amou	unt in each column for each year;	see page 18 of the instructions bef	fore maki	ng any entries.	
(a) Base period years	(b)	(c)		(d) Distribution ra	
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	
2008	59,534.	1,119,244.			319126124
2007	60,955.	1,249,010.	_		380265170
2006	67,804.	1,194,356.	ļ		577034318
2005	84,279.	1,178,286.			152677703
2004	86,295.	1,185,739.	 	0.07	277739874
2 Total of line 1, column (d)			2	0.30	306843189
_	or the 5-year base period - divide a ation has been in existence if less	the total on line 2 by 5, or by the than 5 years	3	0.06	061368638
4 Enter the net value of nonc	charitable-use assets for 2009 from	n Part X, line 5	4		953,289.
5 Multiply line 4 by line 3			5		57,782.
			6		238.
			7		
					58,020.
8 Enter qualifying distribution If line 8 is equal to or gre Part VI instructions on page	ater than line 7, check the box i	n Part VI, line 1b, and complete t	hat part	using a 1% ta	40,964. x rate. See the

8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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

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X

Х

X

8b

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?

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

X

Organizations relying on a current notice regarding disaster assistance check here. c If the answer is "Yes" to question 58(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). ia Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 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? Information About Officers, Directors, Trustees, Foundation Managers, and Contractors 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 proved the position of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (c) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per weak devoted to position (c) Compensation (d) Compensation (e) Expense account other allowances of each employee paid more than \$50,000 (b) Title, and average hours per weak devoted to position (c) Compensation (d) Compensation (e) Expense account other allowances (e) Expense account of the ransaction of the page 23 of the instructions). Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per weak devoted to position (c) Compensation (c) Compensation (c) Expense account othe	rm 990-PF (<u>35-60</u>			Page
(1) Carry on propagands, or otherwise attempt to influence legislation (section 495(e))?	art VII-B	Statements Regarding Activities for	Which Form 47	20 May Be Requ	ired (continued)		
(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)? Isee page 22 of the instructions). (5) Provide for any purpose other than religious, charitable, scentific, literary, or ducational purposes, or for the prevention of cruelty to children or animals? (b) If any gaswers in "Sree" to Salf (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)? (c) Use a subject of the section of the secti	(1) Ca (2) Int	rry on propaganda, or otherwise attempt to influence luence the outcome of any specific public election (ectly or indirectly, any voter registration drive?	ce legislation (section (see section 4955); or	r to carry on,	Yes X No		
purposes, or for the prevention of cruelty to children or animals? b fl any answer is "Yes" to 58(1)-(5), did any of the transactions fall 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)? Organizations relying on a current notice regarding disaster assistance check here.	(4) Pr se	ovide a grant to an organization other than a charita ction 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	ble, etc , organization ee page 22 of the ins	described in			
Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. If yes in a current notice regarding disaster assistance check here. If yes in					. Yes X No		
because it maintained expenditure responsibility for the grant? If 'Yes," statch the statement required by Regulations section 53 4945-5(d). Both the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If 'Yes' to 8b, the form 8870 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation and attributable to the transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation any net income attributable to the transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation any net income attributable to the transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? At	Regula	ations section 53.4945 or in a current notice regard	ing disaster assistanc	e (see page 22 of the	instructions)?	<u>5b</u>	2
on a personal benefit contract?	becaus	se it maintained expenditure responsibility for the gi	rant ⁷		. Yes No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 8b, file Form 8870 Yes X No Tak At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? The X No			•	• •	. Yes X No		
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 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 of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (c) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (d) Contributions to employee benefit plans and deferred compensation other allowances and deferred compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position plans and deferred compensation other allowances (c) Compensation plans and deferred compensation other allowances (e) STATEMENT 10 NONE NONE NONE	b Did the	e foundation, during the year, pay premiums, directling to 6b, file Form 8870	y or indirectly, on a p	ersonal benefit contrac	zt?		}
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average foundation managers and their compensation (see page 22 of the instructions). (c) Compensation (d) Compensation of the instructions					• — —		
List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average devoted to position (c) Compensation (d) Compensation (le) Complexe benefit plans and deferred compensation of the instructions). (e) Expense account other allowances 10, 20900- 10, 20900- Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (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 of the instructions). (e) Expense account other allowances NONE NONE NONE NONE NONE NONE	725 4 4 4						
(a) Name and address (b) Title, and average devoted to position (c) Compensation (If not per veek devoted to position (d) Contributions to employee benefit plans and deferred compensation of the highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (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 of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (e) Expense account of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation NONE NONE NONE NONE NONE		and Contractors		_	• .	_	
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 other allowances (e) Expense account other allowance	List all		(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Expen	
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 complementation (e) Expense account other allowances NONE NONE NONE NONE NONE	EE STA		governon				-0-
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				;			
(a) Name and address of each employee paid more than \$50,000 (b) Ittle, and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation other allowances NONE NONE NONE NONE			er than those incl	uded on line 1 - see	page 23 of the instr	ructions).	
	(a) Name	and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		
	EE STA	TEMENT 10		NONE	NONE	N	<u>ION</u> E
				· · · · · · · · · · · · · · · · · · ·			
							► NON!

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploannd Contractors (continued)	yees,
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
SEE STATEMENT 11	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
1NONE	
2	
3	
4	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	
1 NONE	Amount
INOME.	
2	
All other program-related investments. See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3	
Total. Add lines 1 through 3	- 000.05

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions.)	gn foundatio	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	NONE
b	Average of monthly cash balances	1b	58.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	967,748.
d	Total (add lines 1a, b, and c)	1d	967,806.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	967,806.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	14,517.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	953,289.
6	Minimum investment return. Enter 5% of line 5	6	47,664.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priva foundations and certain foreign organizations check here ☐ and do not complete this j	te operating part.)	
1	Minimum investment return from Part X, line 6	1	47,664.
2 a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.) 2b	1	
C	Add lines 2a and 2b	2c	475.
3	Distributable amount before adjustments. Subtract line 2c from line 1		47,189.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	47,189.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	47,189.
Pa	Cualifying Distributions (see page 25 of the instructions)	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	 	
ı a			40.064
a b	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	40,964.
	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	
2			
2	purposes	2	NONE_
3	Amounts set aside for specific charitable projects that satisfy the:	1 _ 1	
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	40,964.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	1 _ 1	/-
_	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	40,964.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating will qualifies for the section 4940(e) reduction of tax in those years	hether the fou	ndation

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1 Distributable amount for 2008 from Part XI,	Pai	Undistributed Income (see page	26 of the instruction	ns)		
1			(a)	(b)	(c)	(d)
line 7	1	Distributable amount for 2009 from Part XI.	* *	• • •		• •
2		· F				47,189.
Enter amount for 2008 only Distal for pronyears 20 07 , 20	2					
Secretary continues Company Co					NONE	
3 Excess distributions carryover, if any, to 2009 From 2005				NONE		
### From 2004 NONE						
b From 2005		1		}		
6 From 2006						
From 2007		• • • • • • • • • • • • • • • • • • • •				
e From 2008	ď	370375				
f Total of lines 3s through e						
4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 40,964. A Applied to 2008, but not more than line 2a A Applied to 2008, but not more than line 2a A polled to undistributed income of prior years (Election required - see page 26 of the instructions). A Applied to 2009 distributions out of corpus (Election required - see page 26 of the instructions). A Applied to 2009 distributions out of corpus (Election required - see page 26 of the instructions). Excess distributions carryover applied to 2009. If an amount appears in column (a), line same and the seed of the th			8 205			
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				t it is a private opera	iting	
	foundation, and the ruling				. ▶└	
þ	Check box to indicate whe	ether the foundation is a	private operating founda	tion described in section	4942(j)	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2009	(ь) 2008	(c) 2007	(d) 2006	(0) Total
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
c	Qualifying distributions from Part					
٠	XII, line 4 for each year listed .					
d	Amounts included in line 2c not					
	used directly for active conduct					
e	of exempt activities					
•	directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c Complete 3a, b, or c for the			 	<u></u>	
	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets				<u></u> -	· · · · · ·
	(2) Value of assets qualifying under section					
L	4942(j)(3)(B)(i).					
b	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter					1
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities					
	loans (section 512(a)(5)), or royalties)			Ì		
	(2) Support from general	,				
	public and 5 or more exempt organizations as					
	provided in section 4942					İ
	(3) Largest amount of sup-				-	
						1
	port from an exempt					1
	port from an exempt organization					
Par	port from an exempt organization	ary Information (C	omplete this part	only if the founda	ation had \$5.000	or more in asset
Par	port from an exempt organization			only if the founda	ation had \$5,000	or more in assets
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1	port from an exempt organization	during the year - se Foundation Manage	e page 28 of the in	structions.)		· · · · · · · · · · · · · · · · · · ·
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b b	port from an exempt organization	furing the year - set Foundation Manage the foundation who have the foundation who have the foundation who ship or other entity) of Contribution, Grant, he foundation only for funds. If the foundations, complete conditions, complete telephone number of lications should be sumes:	e page 28 of the in rs: have contributed more hey have contributed in own 10% or more of which the foundation. Gift, Loan, Scholarsh makes contributions idation makes gifts, gete items 2a, b, c, and of the person to whom bmitted and information.	e than 2% of the totamore than \$5,000). (Some stock of a corpore has a 10% or greater to preselected charugrants, etc. (see page d. applications should be on and materials they see that the see that they see that they see that they see that they see that the see that they see that	I contributions receive ee section 507(d)(2).) pration (or an equally interest. Table organizations at 28 of the instruction endorsed: should include:	ed by the foundation large portion of the nd does not accept this) to individuals of
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Form	990-PF (2009) Supplementary Information (co	antinuad)			Page 11
3	Grants and Contributions Paid Durin	ontinued)	aved for F	intura Payment	
	Recipient	If recipient is an individual,	Foundation	D. C. S. C.	<u> </u>
	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
a	Paid during the year	Or Substantial Contributor	,	 	
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	Total			▶ 3a	
b	Approved for future payment				
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ter gross amounts unless otherwise indicated.	Unrelate	d business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
I Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a					the manucions j
b					
c			-		
d					
e					
f	_				
g Fees and contracts from government agencies			1		
Membership dues and assessments					
Interest on savings and temporary cash investments			14	270.	
Dividends and interest from securities			14	31,142.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory	1 1		18	-37,453.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a					
ь <u>TAX REFUND</u>	<u> </u>				774
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d					
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions on page 28 to	o verify calcula	tions)			774 -5,267
Subtotal. Add columns (b), (d), and (e)	o verify calcula to the Accordity for which	tions) omplishment of E	Exempt Purpo	oses (e) of Part XVI-A cont	-5,26°
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions on page 28 to art-XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	o verify calcula to the Accordity for which	tions) omplishment of E	Exempt Purpo	oses (e) of Part XVI-A cont	-5,26°
Subtotal. Add columns (b), (d), and (e)	o verify calcula to the Accordity for which	tions) omplishment of E	Exempt Purpo	oses (e) of Part XVI-A cont	-5,26°
Subtotal. Add columns (b), (d), and (e)	o verify calcula to the Accordity for which	tions) omplishment of E	Exempt Purpo	oses (e) of Part XVI-A cont	-5,26°
Subtotal. Add columns (b), (d), and (e)	o verify calcula to the Accordity for which	tions) omplishment of E	Exempt Purpo	oses (e) of Part XVI-A cont	-5,26°
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions on page 28 to art-XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	o verify calcula to the Accordity for which	tions) omplishment of E	Exempt Purpe ed in column (other than b	oses (e) of Part XVI-A cont	-5,26°
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions on page 28 to art-XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	o verify calcula to the Accordity for which	tions) complishment of E income is report exempt purposes	Exempt Purpe ed in column (other than b	oses (e) of Part XVI-A cont	-5,26°
Subtotal. Add columns (b), (d), and (e)	o verify calcula to the Accordity for which	tions) complishment of E income is report exempt purposes	Exempt Purpe ed in column (other than b	oses (e) of Part XVI-A cont	-5,26°
Subtotal. Add columns (b), (d), and (e)	o verify calcula to the Accordity for which	tions) complishment of E income is report exempt purposes	Exempt Purpe ed in column (other than b	oses (e) of Part XVI-A cont	-5,267
Subtotal. Add columns (b), (d), and (e)	o verify calcula to the Accordity for which	tions) complishment of E income is report exempt purposes	Exempt Purpe ed in column (other than b	oses (e) of Part XVI-A cont	-5,267

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

	in secongani Transf (1) Ca (2) Ot Other (1) Sa	the organization directly ction 501(c) of the Cozations? ers from the reporting fourth for the cozations? the cozations correctly correc	ide (other than indation to a nor	section 501(c)(3) icharitable exempt of	organizations	or in s	ection 527,	relating to po	1a(1) 1a(2) 1b(1)	Yes	X X
		irchases of assets from a									<u>X</u>
		ental of facilities, equipme									<u>X</u>
		eimbursement arrangeme									<u>X</u>
		ans or loan guarantees									<u>X</u>
		erformance of services or									<u>X</u>
		g of facilities, equipment,								£0.2 2	
a		answer to any of t of the goods, other									
		in any transaction or									
	70.00	in any transaction of	siturning unions	,0	, , , , , , , , , , , , , , , , , , ,	110 10100	or the good	3, 04101 4550	13, 01 301110		orvea.
(a) L	ne no	(b) Amount involved	(c) Name of r	oncharitable exempt or	ganization	(d) Desc	cription of transfe	ers, transactions,	and sharing arra	ngeme	nts
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2a	Is the	foundation directly or	indirectly affilia	ted with, or related	to, one or i	more tax-e	xempt organiz	zations describ	ed in		7
		n 501(c) of the Code (oth		i01(c)(3)) or in sectio	n 527 ⁷				🔛 Yı	es Z	∐ No
b	If "Yes	," complete the following									
		(a) Name of organization)	(b) Type of	organization			c) Description of	relationship		
											
											
	_										
$\neg \top$	Under	penalties of perjury, I decla	re that I have ex	amined this return, inc	luding accompa	inying sched	dules and stater	nents, and to the	e best of my k	nowled	ge and
	belief,	it is true, correct, and comp	olete Declaration of	of preparer (other than	taxpayer or fid	uciary) us ba	ased on all infor	mation of which	preparer has a	ny kno	wledge
9	Sı	gnature of officer or trustee	· · · · · · · · · · · · · · · · · · ·			Date		Title			
Sign Here	Paid Preparer's Use Only	Preparer's signature	du V Raje	0,0	Date	110	Check if self-employe	. — I nur	parer's identifi nber (See Sign e 30 of the instr	ature o	
3)	Paid epare se Or	Firm's name (or yours if	FIDIC	TAX SER	VICES, L	ile -		EIN ▶ 35-	0830434		
	కై ప	self-employed), address,	400 S	WALNUT STREE		UITE 20	00		<u> </u>		
		and ZIP code	MUNCIE				305	Phone no. 7	65-288-3	651	
		 						•	Form 9 9		(2009)

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

Kind of Pi		INS AND LO		ription		or Or	Date acquired	Date sold
Gross sale price less expenses of sale	Deprectation 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 CAPIT	TAL GAIN DI	VIDENDS		19.	
		TOTAL SHORT-PARTNERSHIP, ESTATES OR TOTAL LONG-TOTAL	S CORPORA TRUST GAIN	ATION, AND (OR LOSS	OTHER		-117.	
		PARTNERSHIP, ESTATES OR T	S CORPORA	ATION, AND			15,645.	
		1106.668 GRO			L TRUST		06/01/2001	03/01/200
16,000.00		30,531.00	E. SECORI.	ITES			-14,531.00	
		501.601 GROW			TRUST A		06/01/2001	04/01/200
7,750.00		13,838.00					-6,088.00	
		533.989 GROW			TRUST A		08/01/2001	04/01/200
8,250.00		14,177.00					-5,927.00	
		968.446 GROV PROPERTY TY			TRUST A		08/01/2001	05/01/200
16,000.00		25,711.00					-9,711.00	
		928.738 GROV PROPERTY TY			TRUST A		08/01/2001	06/01/200
16,000.00		24,818.00					-8,818.00	
		164.947 GROWN PROPERTY TY			TRUST A		08/01/2001	07/01/200
2,842.00		4,408.00					-1,566.00	
		448.295 GROV PROPERTY TY			TRUST A		03/01/2005	07/01/200
7,723.00		11,504.00					-3,781.00	
		315.459 GROV			TRUST A		02/01/2005	07/01/200
5,435.00		8,013.00					-2,578.00	
				i				

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

Kind of P			Descr			or	Date acquired	Date sold
Gross sale	i i	Cost or	FMV		Evene of	P	acquired Gain	
price less	Depreciation allowed/	other	as of	Adj basis as of	Excess of FMV over		or	
price less expenses of sale	allowable	basis	12/31/69	as of 12/31/69	FMV over adj basis	Ш	or (loss)	
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TAL GAIN(LO	oss)					.	-37,453.	
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STATEMENT

INVESTMENTS	
CASH	
TEMPORARY	
NO	
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TN	270.
NET INVESTMENT INCOME	270.
REVENUE AND EXPENSES PER BOOKS	270.
	TOTAL
DESCRIPTION	TCM

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SECURITIES	111111111111111111111111111111111111111
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		AND EXPENSES	NET INVESTMENT	
DESCRIPTION		PER BOOKS	INCOME	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		! ! ! ! !	1 1 1 1 1	
INT/DIV		31,142.	31,142.	
	TOTAL	31,142.	31,142.	

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FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

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774.

TOTALS

774.

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CHARITABLE PURPOSES	NONE
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	1,100.
	TOTALS
DESCRIPTION	LEGAL FEES

CTATEMENT

- ACCOUNTING FEES	
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SHROYER SCHOLARSHIP FUND 000381

CHARITABLE PURPOSES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
ADJUSTED NET INCOME	1 1 1 5 1 1			
NET INVESTMENT INCOME	1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NONE	
REVENUE AND EXPENSES PER BOOKS		800.	800.	H H H H H H H H H
			TOTALS	
DESCRIPTION	 	ACCOUNTING FEE		

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STATEMENT

FORM 990PF, PART I - TAXES

REVENUE
AND
EXPENSES
PER BOOKS

DESCRIPTION

TAXES

630.

TOTALS

630.

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> REVENUE AND EXPENSES PER BOOKS

> > -----

DESCRIPTION

OTHER EXPENSE

60.

TOTALS

60.

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

DESCRIPTION AMOUNT

RETURN OF SCHOLARSHIPS 2,203.

> TOTAL 2,203. ============

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

OFFICER NAME:

FIRST MERCHANTS TRUST COMPANY

ADDRESS:

200 EAST JACKSON STREET

MUNCIE, INDIANA 47305,

TITLE:

TRUSTEE

TOTAL COMPENSATION:

10,209.

990PF, PART VIII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

EMPLOYEE NAME: NONE

10

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

NAME: NONE

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust

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

Employer identification number

2009

SHROYER SCHOLARSHIP FUND 000381 35-6017466 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the the entire year (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) Subtract (e) from (d) instructions) 1a SHORT-TERM CAPITAL GAIN DIVIDENDS STMT 1 b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts -117. 3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, -98 Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (e) Cost or other basis (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the the entire year (Example: 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) Subtract (e) from (d) instructions) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b........... -53,000. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 15,645. 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, -37,355 For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2009

• Sched	ule D (Form 1041) 2009						Page 2
Part	Summary of Parts I and II		(1) Bene	ficiaries'	(2) Est	ate's	<u> </u>
	Caution: Read the instructions before completing this	part.	(see p		or tru		(3) Total
13	Net short-term gain or (loss)	13					-98.
14	Net long-term gain or (loss):				-		
а	Total for year	14a					-37,355.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	14b					
C	28% rate gain	14c					
	Total net gain or (loss). Combine lines 13 and 14a						-37,453.
Vote o Pa	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or For t V, and do not complete Part IV If line 15, column (3), is a net loss, complete P	rm 990 Part IV	P-T, Part I, lin and the Capi	e 4a) If line tal Loss Car	s 14a and 1 ryover Work	5, colui sheet, a	mn (2), are net gains, go as necessary.
Part	IV Capital Loss Limitation						
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Page 1041).						
а	The loss on line 15, column (3) or b \$3,000					16	(3,000)
arry	over Worksheet on page 7 of the instructions to figure your capital loss carryove	er.	ne 22 (or Fo	m 990-T, li	ne 34), is a	loss, co	emplete the Capital Loss
	Tax Computation Using Maximum Capital Gains Rate 1041 filers. Complete this part only if both lines 14a and 15 in colu						
Caut En Bo Form of Fo	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than serious skip this part and complete the worksheet on page 8 of the instruction line 14b, col. (2) or line 14c, col. (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. If 990-T trusts. Complete this part only if both lines 14a and 15 are form 990-T, and Form 990-T, line 34, is more than zero. Skip this part line 14b, col. (2) or line 14c, col. (2) is more than zero.	ctions e gair	<i>if:</i> ns, or qual				
17			17			Т	
18	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3 Enter the smaller of line 14a or 15 in column (2)	34) .	• • • • • • • • • • • • • • • • • • • •			1 1	
10			}			1	
10							
19	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)		1 1				
20	dividends included in income in Part I of Form 990-T)						
21	If the estate or trust is filing Form 4952, enter the		─ ┤				
- 1	amount from line 4g; otherwise, enter -0 > 21						
22	Subtract line 21 from line 20. If zero or less, enter -0-		22				
23	Subtract line 22 from line 17. If zero or less, enter -0-		23			1 1	
	Subtract line 22 from time 17. ii 2010 of 1033, Gitter 0			<u></u>		1 1	
24	Enter the smaller of the amount on line 17 or \$2,300		24				
- · 25	is the amount on line 23 equal to or more than the amount on line 24	 47				1	
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box						
	No. Enter the amount from line 23		25				
26	Subtract line 25 from line 24					1	
27	Are the amounts on lines 22 and 26 the same?		· · = •		_	1	
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27				
	TOTAL COMP INTO ST. MILE 17 OF IN			_		1 1	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
						1	
29	Subtract line 28 from line 27		29]	
30	Multiply line 29 by 15% (.15)	•	• •			30	
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rat				nd Trusts		
	(see the Schedule G instructions in the instructions for Form 1041).					31	
		•	• •	·	·		
32	Add lines 30 and 31					32	
33	Figure the tax on the amount on line 17. Use the 2009 Tax Rat				nd Trusts		
	(see the Schedule G instructions in the instructions for Form 1041).					33	
	- " ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			4046	أ المالية الم		

Schedule D (Form 1041) 2009

G, line 1a (or Form 990-T, line 36)

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number SHROYER SCHOLARSHIP FUND 000381 35-6017466 Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (see page 4 of the instructions) (b) Date (e) Cost or other basis (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (f) Gain or (loss) Subtract (e) from (d) (see page 4 of the instructions) acquired (mo, day, yr) (mo, day, yr) 6a 1106.668 GROWTH FUND FOR PERSONAL TRUST ACCOUNTS 06/01/2001 03/01/2009 16,000.00 30,531.00 -14,531.00 501.601 GROWTH FUND FOR PERSONAL TRUST ACCOUNTS 04/01/2009 06/01/2001 7,750.00 13,838.00 -6,088.00 533.989 GROWTH FUND FOR PERSONAL TRUST ACCOUNTS 08/01/2001 04/01/2009 8,250.00 14,177.00 <u>-5,927.00</u> 968.446 GROWTH FUND FOR PERSONAL TRUST ACCOUNTS 08/01/2001 05/01/2009 16,000.00 25,711.00 -9,711.00 928.738 GROWTH FUND FOR 06/01/2009 PERSONAL TRUST ACCOUNTS 08/01/2001 -8,818.00 16,000.00 24,818.00 164.947 GROWTH FUND FOR PERSONAL TRUST ACCOUNTS 08/01/2001 07/01/2009 2,842.00 4,408.00 -1,566.00 448.295 GROWTH FUND FOR PERSONAL TRUST ACCOUNTS 03/01/2005 07/01/2009 7,723.00 11,504.00 -3,781.00 315.459 GROWTH FUND FOR PERSONAL TRUST ACCOUNTS 02/01/2005 07/01/2009 5,435.00 8,013.00 -2,578.00 6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b -53,000.00

FEDERAL CAPITAL GAIN DIVIDENDS

SHORT-TERM CAPITAL GAIN DIVIDENDS

T.ROWE PRICE MID-CAP GROWTH FUND

19.00

TOTAL SHORT-TERM CAPITAL GAIN DIVIDENDS

19.00

=========

STATEMENT 1

GAINS AND LOSSES FROM PASS-THRU ENTITIES

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

COMMON TRUST FUNDS

-117.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-117.00

=========

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

COMMON TRUST FUNDS

15,645.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

15,645.00

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5HRUYER SCHOLARSHIP FUND 000381 35-601/466	
FORM 990PF, PART XV. LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID	
	\$956.72
RECIPIENT NAME:	
COREY BUCHANAN	
ADDRESS:	
2213 S WEST ST	
YORKTOWN IN 47396	
RELATIONSHIP:	
NONE	
PURPOSE OF GRANT.	
GENERAL SCHOLARSHIP	
FOUNDATION STATUS OF RECIPIENT.	
N/A	
AMOUNT OF GRANT PAID	
	\$478.36
RECIPIENT NAME	
LINDSEY BUCHANAN	
ADDRESS:	
3009 W JACKSON ST APT 14	
MUNCIE, IN 47304-4431	
RELATIONSHIP	
NONE	
PURPOSE OF GRANT:	
GENERAL SCHOLARSHIP	
FOUNDATION STATUS OF RECIPIENT:	
N/A	
AMOUNT OF GRANT PAID	
RECIPIENT NAME	\$478 36
NATALIE BUCHANAN	\$476.30
ADDRESS.	
2213 S WEST ST	
YORKTOWN, IN 47396	
RELATIONSHIP:	
NONE	
PURPOSE OF GRANT.	
GENERAL SCHOLARSHIP	
FOUNDATION STATUS OF RECIPIENT.	
N/A	
AMOUNT OF GRANT PAID	

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS. GIFTS. GRANTS PAID RECIPIENT NAME. ADAM CAMPBELL \$956.72 ADDRESS: 5100 N WEIR DR MUNCIE, IN 47304 **RELATIONSHIP:** NONE PURPOSE OF GRANT. GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT N/A AMOUNT OF GRANT PAID RECIPIENT NAME: JOSHUA DANIEL CANAN \$956.72 ADDRESS. 4510 N GISHLER DR MUNCIE, IN 47304 **RELATIONSHIP: NONE** PURPOSE OF GRANT GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT. AMOUNT OF GRANT PΛID RECIPIENT NAME: KRISTA CARRIER JOHNS \$1,435.08 ADDRESS: 524 E NORTH ST DUNKIRK, IN 47336 **RELATIONSHIP: NONE** PURPOSE OF GRANT.

AMOUNT OF GRANT PAID

GENERAL SCHOLARSHIP

N/A

FOUNDATION STATUS OF RECIPIENT

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS. GIFTS. GRANTS PAID RECIPIENT NAME: **BRIDGET CONNORS** \$765.38 ADDRESS: 11518 LAKESHORE DR W CARMEL, IN 46033 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID RECIPIENT NAME: **EMILY CONNORS** \$765.38 ADDRESS: 11518 LAKESHORE DR W CARMEL, IN 46033 RELATIONSHIP. NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID _____ RECIPIENT NAME: KRISTA B DAVIS \$956 72 ADDRESS: 3195 E 450 N ANDERSON, IN 46012 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID

PURPOSE OF GRANT.

N/A

GENERAL SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV. LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: **CALEB DUNN** \$956.72 **ADDRESS** 8301 W WELLER ST YORKTOWN, IN 47396 **RELATIONSHIP:** NONE PURPOSE OF GRANT. GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID RECIPIENT NAME. TIFFANY DOWD CANTRELL \$956.72 ADDRESS. 319 TENNESSEE ST PARKER CITY, IN 47368 RELATIONSHIP: NONE PURPOSE OF GRANT GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID RECIPIENT NAME: SHAWN R GOEBEL \$95672 ADDRESS: 3860 E CR 650 S MUNCIE, IN 47302 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID

PURPOSE OF GRANT:

N/A

GENERAL SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: **TYLER HAGUE** \$956.72 ADDRESS: 8308 N COSTA MESA RD MUNCIE, IN 47303 **RELATIONSHIP:** NONE PURPOSE OF GRANT GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID **RECIPIENT NAME:** \$956.72 KATIE K HARGIS ADDRESS: 126 S 950 W FARMLAND, IN 47340 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT RECIPIENT NAME: SARA N HART \$1,148.06 ADDRESS: 11333 N CR 200 W MUNCIE, IN 47303 RELATIONSHIP NONE

AMOUNT OF GRANT PAID

PURPOSE OF GRANT:

N/A

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF. PART XV, LINE 3 - CONTRIBUTIONS. GIFTS, GRANTS PAID RECIPIENT NAME **BREANA INGRAM** \$1,435.08 ADDRESS: 2100 E GRACE CT MUNCIE, IN 47302 RELATIONSHIP. NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT. N/A AMOUNT OF GRANT PAID RECIPIENT NAME: LAUREN JOBE \$1,148.06 ADDRESS: 8600 N COUNTY RD 25 W MUNCIE, IN 47303 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID RECIPIENT NAME: ANDREA JOBE \$956.72 ADDRESS: 8600 N CO RD 25 W MUNCIE, IN 47303 RELATIONSHIP NONE

AMOUNT OF GRANT PAID

PURPOSE OF GRANT:

N/A

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NATHANIEL D KEIHN \$956.72 ADDRESS: 9205 W SOUTHFIELD DR YORKTOWN, IN 47396 RELATIONSHIP NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID RECIPIENT NAME: **MORGAN N LACEY** \$956.72 ADDRESS. 9301 W WINDSOR RD FARMLAND, IN 47340 RELATIONSHIP: NONE PURPOSE OF GRANT. GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT. N/A RECIPIENT NAME. RYAN A LACEY \$956 72 ADDRESS: 9301 W WINDSOR RD FARMLAND, IN 47340 RELATIONSHIP: NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV. LINE 3 - CONTRIBUTIONS, GIFTS. GRANTS PAID RECIPIENT NAME: JENNIFER J LOCK \$717.54 ADDRESS: 306 N TYRONE DR MUNCIE, IN 47304 RELATIONSHIP. NONE PURPOSE OF GRANT: **GENERAL SCHOLARSHIP** FOUNDATION STATUS OF RECIPIENT N/A AMOUNT OF GRANT PAID RECIPIENT NAME: MARANDA JO MASTIN \$956 72 ADDRESS: 6800 E WOODSIDE RD ALBANY, IN 47320 RELATIONSHIP. NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ______ RECIPIENT NAME: KEAIRAH J MCNEARY \$956.72 ADDRESS: 1901 E HIGHLAND AVE **MUNCIE**, IN 47303 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID

PURPOSE OF GRANT

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS. GIFTS, GRANTS PAID RECIPIENT NAME. **KEWANAH MCNEARY** \$956.72 ADDRESS: 1901 E HIGHLAND AVE MUNCIE, IN 47303 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID RECIPIENT NAME: **BLAKE MURRELL** \$956.72 ADDRESS: 2202 W 250 N ANDERSON, IN 46011 RELATIONSHIP. NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A RECIPIENT NAME: MATTHEW R PARKER \$956.72 ADDRESS: 305 S CAMBRAY RD MUNCIE, IN 47304

AMOUNT OF GRANT PAID

RELATIONSHIP: NONE

N/A

PURPOSE OF GRANT.

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME. RACHEL M POTEE \$478.36 ADDRESS: 1805 N INNISBROOK DR MUNCIE, IN 47304 RELATIONSHIP NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT N/A AMOUNT OF GRANT PAID RECIPIENT NAME. ASHLEY REPLOGLE \$1,435 08 ADDRESS: 2501 S CR 400 E MUNCIE, IN 47302 RELATIONSHIP NONE PURPOSE OF GRANT. GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A RECIPIENT NAME: **AUDREY D SCHMALTZ** \$478 36 ADDRESS: 7020 N NEB RD MUNCIE, IN 47304 **RELATIONSHIP:** NONE

AMOUNT OF GRANT PAID

PURPOSE OF GRANT:

N/A

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF. PART XV, LINE 3 - CONTRIBUTIONS. GIFTS, GRANTS PAID RECIPIENT NAME: SAMANTHA SMITH \$956.72 ADDRESS. 208 N BAYBERRY MUNCIE, IN 47304 RELATIONSHIP: NONE PURPOSE OF GRANT. GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID RECIPIENT NAME \$956 72 SARAH E SHOPTAW ADDRESS: 10982 W SOUTH ST PARKER CITY, IN 47368 RELATIONSHIP. NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT N/A AMOUNT OF GRANT PAID RECIPIENT NAME: KRISTOPHER FRANKLIN SHROYER \$956.72 ADDRESS: 5108 S DELAWARE DR **MUNCIE, IN 47302 RELATIONSHIP:**

AMOUNT OF GRANT PAID

NONE

N/A

PURPOSE OF GRANT:

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: TIFFANY D SMITH \$1,435.08 ADDRESS: 208 N BAYBERRY LN MUNCIE, IN 47304 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT N/A AMOUNT OF GRANT PAID RECIPIENT NAME: **MELISSA D THOMAS** \$1,722 09 ADDRESS: 3715 N BENNINGTON CT APT G MUNCIE, IN 47303 RELATIONSHIP NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT. N/A RECIPIENT NAME RINDY TURNER \$956 72 ADDRESS: 1901 MOCKINGBIRD LN **MUNCIE, IN 47304 RELATIONSHIP:** NONE

AMOUNT OF GRANT PAID

PURPOSE OF GRANT

N/A

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SAMANTHA THUMPSON \$956.72 ADDRESS: 11100 W CR 700 S MIDDLETOWN, IN 47356 **RELATIONSHIP:** NONE **PURPOSE OF GRANT:** GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID _____ RECIPIENT NAME: RYAN P WADDELL \$574.03 **ADDRESS** 3708 W GODMAN AVE MUNCIE, IN 47304 RELATIONSHIP. NONE PURPOSE OF GRANT: GENERAL SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID RECIPIENT NAME: RACHEL N WHITED \$956.72 ADDRESS. 4116 S 350 W HARTFORD CITY, IN 47348 **RELATIONSHIP:**

AMOUNT OF GRANT PAID

NONE

N/A

PURPOSE OF GRANT.

GENERAL SCHOLARSHIP

SHROYER SCHOLARSHIP FUND 000381 35-6017466 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME·	\$956.72
TAYLOR YEAKLE	
ADDRESS	
1321 N 650 W	
YORKTOWN, IN 47396	
RELATIONSHIP.	
NONE	
PURPOSE OF GRANT:	
GENERAL SCHOLARSHIP	
FOUNDATION STATUS OF RECIPIENT:	
N/A	
AMOUNT OF GRANT PAID	

070	PAGE 1	OBJ-BALANCED	CURRENT MARKET VALUE		142.90 0 00	142 90		159.46	95,169.45		081 46	081.4G		188 54
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ALPEA KEY SHROYER-SC		SIROYER SCH	SCHOLARSHIP FUND	Q				24 00 0391	1506	PAGE 2
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NOT CLASSIFIED SEP 400 NIDCAP GROWTH ISHARES SEP 400 NIDCAP SPDR T ROWE MIDCAP GROWTH	154 290 744.402	FULL NR FULL NR FULL	9,959 18 34,785.21 28,059.05	9,959 34,789 28,059	133 565 40	ר. ד ט. ד ט. ט	1 .c. c. 2 .e. z.	9,959 28,175 24,320	77.710 131.740 47.490	11,967.34 38,204.60 35,351 65
TOTAL WOT CLASSIFIED			72,807 44	72,807	744	6.0	6.4	5.5		85,523.59
TOTAL KID CAP EQUITY FUNDS			72,807.43	72,507	744	0.9	יד פט	62,455		, 523.5
			SMALL C	CAP RQUITY F	FUNDS					
NOT CLASSIFIED I SHAKES SEP SMALL CAP 600	t (ļ								
SLP 600 SMALL CAP GROVIH	537	FULL	31,564.17	31,564	364	C7	2.9	23,612	54.720	29,384 64
ISHARES	310	FULL	9,972.10	5,972	, v	9.0	1.3	5,972	57.140	11,959.40
TOTAL NOT CLASSIFIED			41,536.27	41,535	438	1.1	4.1	33,584		41,384.04
TOTAL SMALL CAP EQUITY FUIDS	S		41,536.27	41,536	438	1.1	4.1	33,584		41,384 04
			INTERNATIONAL	TIONAL EQUITY	TY FUNDS					
NOT CLASSIFIED VANGUARD INTL GROUTH ADMIRAL SHARES	215.438	FULL	12,878 74	12,879	C)	<u>د</u> «		מ ני		ה ה ה
***TOTAL EQUITIES	* *	×	387,815.31	7,81	838	•	•	347,538)))	738
SUB-TOTALS				970,710			100 0			
ACCRUED INTEREST EX-DIVIDENDS			970,854 00		30,733	0 R		938,897	п	1,012,133.26 6 18 2,523.25
GRAID TOIM,S			970,851.00	970,710	36,733	3.0	100.0	936,897	г	1,014,651.69
INVESTMENT CONTROL 9.	970,711.10	SHARES/PAR	CONTROL	169,462	71.					
TAX YID LONG TERM G/L TAX YID MID TERM G/L TAA YID SHOFT TERN G/L	-37,450 36 0.00 -87.06	FESS PAID Y/T/D LAST FSR PMT DA	PAID Y/T/D FER PMT DATE	11,008.68 12/07/2009		PRIOR Y/E HARKET CONTRIBUTIONS TO		VALUE DATE	មិសន , ន១ខ ប	06 00: