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Form **990-PF** 

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

OMB No 1545-0052

Department of the Treasury  Treated as a Private Foundation								2009	
		enue Service			to use a copy of this retur		te reporting	requirements	
		<del></del>		11/01/09 ,:		<b>'</b>		<del></del>	
<b>G</b> (	heck a	all that apply	Initial return  Amended ref		turn of a former public or ress change		change	Final return	
	the IR	Name of found	ation				•	loyer identification num	ber
	label. Otherwise.   Cripe Family Foundation, Inc.								2 of the contractions?
	print	· ——		ber if mail is not delivered		Room/suite		ohone number (see page 10 <b>4 – 533 – 4116</b>	or the instructions)
	type.	P.O. B		ioci ii maii is not delivered	to street address)	Roomsuite		emption application is pendi	and check here
	Specif		ate, and ZIP code	<del></del>			1	preign organizations, check	. —
Instr	Instructions. Goshen IN 46527							-	
HC	heck t	ype of organization	X Section 50	1(c)(3) exempt private			1	oreign organizations meetir 5% test, check here and att	·
	Section	1 4947(a)(1) nonex		<u> </u>	e private foundation		E If priv	vate foundation status was	terminated under
I Fa	air mar	ket value of all ass	ets at end J	Accounting method	X Cash Acc	rual	1 .	on 507(b)(1)(A), check here	
of	year (	from Part II, col (c)	),	Other (specify)			F If the	foundation is in a 60-mont	h termination
lin	e 16) l	<b>\$</b>	755,884 (P	art I, column (d) must t	e on cash basis )		unde	r section 507(b)(1)(B), ched	k here
Pa	art l	-	Revenue and	•	(a) Revenue and				(d) Disbursements
			umns (b), (c), and (d) may		expenses per books	(b) Net inv		(c) Adjusted net income	for charitable purposes
		the amounts in column	(a) (see page 11 of the ir	nstructions))					(cash basis only)
	1		grants, etc , received						
	2			equired to attach Sch B			•••••		
	3	•	gs and temporary o		106		106		
	4		terest from securition	es	14,450		14,450	14,450	
	5a	Gross rents							
ne	b	Net rental income	· · · —	0 Stmt 1	1 720		·····		
,en	6a b	· · ·	sale of assets not on line 1	24,995	1,720				
enue SCANNED	7	Gross sales price for all	ncome (from Part I				0		
<b>U</b>	8	Net short-term ca	•	v, iii le 2)			<u>U</u>	0	
$\geq$	9	Income modificat					*************	•	
Z	10a	Gross sales less ret							
m	b	Less Cost of goo			i,		***************************************		
	С	•	ess) (attach schedu	ıle)					•
\$	11	Other income (att	lach schedule)						
MAR	12	Total. Add lines 1	through 11		16,276		14,556	14,556	
<b>1</b> S	13	Compensation of	officers, directors,	trustees, etc				RECEIVED	
S.S.	14	Other employees	salaries and wages	i				112021122	70
海	15	Pension plans, er	• •				523	1 4 2011	SO-S
=	16a	Legal fees (attach					<u> </u>	MAR 1 4 2011	ဖွဲ့
ė	Ь	Accounting fees (	•	Stmt 2	1,350				Œ
ş	_ c		ees (attach schedule)					DGDEN, U	
ţ	17	Interest		C+m+ 3	227		215		
n.	18			uctions) Stmt 3	317		317		
Ξ	19 20		schedule) and deple	uon		<u> </u>			
Operating and Administrative Expense	21	Occupancy Travel conference	es, and meetings						
pu	22	Printing and publi	_		<del></del>				
ğ	23	Other expenses (att. sch						- · ·	
ing	24	•	, and administrativ	e expenses.					<u> </u>
<u>ra</u>		Add lines 13 throu			1,667		317		o
be	25	Contributions, gift	_		38,360				38,360
U	1	_					<del></del>	······	=

Add lines 13 through 23 1,667 317 25 Contributions, gifts, grants paid 38,360 38,360 317 26 Total expenses and disbursements. Add lines 24 and 25 4(,027 38,360 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -23,751

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

Form 990-PF (2009)

14,556

14,239

Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-)

4 808,552 5 808,552

2

3

-23,751

2 Enter amount from Part I, line 27a

4 Add lines 1, 2, and 3

3 Other increases not included in line 2 (itemize) ▶

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

5 Decreases not included in line 2 (itemize) ▶

	amily Foundation, In		35-2109635		Page 3
(a) List and describ	nd Losses for Tax on Investme be the kind(s) of property sold (e.g., real estate, shouse, or common stock, 200 shs MLC Co.)	ntincome	(b) How acquired P—Purchase	(c) Date ac	
No. 1 to Time and all	Andreas, or common stock, 200 sha living cooy	<u>-</u>	D—Donation	(1110 , day	(110; day, yi )
b	<del></del>	-			<del></del>
С					
d					
8			<del>                                     </del>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1 1 1	or other basis ense of sale	(	(h) Gain or (loss) (e) plus (f) minus (g)
a			<del></del>		
b					
c					
d		-			
e					
Complete only for assets showing	gain in column (h) and owned by the four	ndation on 12/31/69		(I) G	ains (Col. (h) gain minus
(i) F M ∨ as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (ı) ol (j), ıf any	col (k	), but not less than -0-) or .osses (from col (h))
a					
b					
С					
d					
e					
2 Capital gain net income or (net ca	pital loss) If gain, also enter in If (loss), enter -0- in	<b>.</b>		2	
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)	_			
If gain, also enter in Part I, line 8,	column (c) (see pages 13 and 17 of the ir	nstructions)			
If (loss), enter -0- in Part I, line 8	.,,	· _		3	
	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Incor	ne	
	foundations subject to the section 4940(a				
		,			
If section 4940(d)(2) applies, leave thi	s part blank				
Was the foundation liable for the secti	on 4942 tax on the distributable amount o	f any year in the bas	se period? 🔲 Ye	es X No	
If "Yes," the foundation does not qualif	fy under section 4940(e) Do not complete	this part			
1 Enter the appropriate amount in e	ach column for each year, see page 18 o	f the instructions bet	fore making any entries		<del></del>
(a)					(d)
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distribution	ns Net value	(c) e of noncharitable-use ass	ets	Distribution ratio (col (b) divided by col (c))
2008	<del></del>	,551	620,		0.057258
2007		,225	797,		0.052918
2006		,484	672,		0.054264
2005		,372	508,		0.059747
		,410	454,		0.058122
2004		,410	434,	300	0.056122
2 Total of line 1, column (d)				2	0.282309
	year base period—divide the total on line	2 by 5, or by the			0 056466
number of years the foundation ha	as been in existence if less than 5 years			3	0.056462
4 Enter the net value of noncharitab	le-use assets for 2009 from Part X, line 5			4	779,535
5 Multiply line 4 by line 3				5	44,014
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6	142
7 Add lines 5 and 6				7	44,156
8 Enter qualifying distributions from If line 8 is equal to or greater than	Part XII, line 4 line 7, check the box in Part VI, line 1b, a	and complete that pa	art using a 1% tax rate	See the	38,360

Part VI instructions on page 18

	990-PP (2009) CITPE PARTY POUNCACION, INC. 33-2109033			<u> </u>	age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruct	ions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)				۰
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			•	<u> 285</u>
_	here and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
_	Part I, line 12, col (b)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				- U
3	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  4			•	285
4			285		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				200
6	Credits/Payments				
a	2009 estimated tax payments and 2008 overpayment credited to 2009  6a 1,297				
b	Exempt foreign organizations—tax withheld at source  Toward with analysis of the state of the st				
C	Tax paid with application for extension of time to file (Form 8868)  Company with bolding arrangement to the life (Form 8868)				
d -	Backup withholding erroneously withheld  Table and the angle and a second and the			٠.	207
7	Total credits and payments Add lines 6a through 6d  7			Т,	<u> 297</u>
8	Enter any penalty for underpayment of estimated tax. Check here 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				010
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			Ι,	012
11 D-	Enter the amount of line 10 to be Credited to 2010 estimated tax > 1,012 Refunded > 11				
	rt VII-A Statements Regarding Activities	<del></del>			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
<b>b</b>	participate or intervene in any political campaign?	-	1a		<u> </u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		١		v
	of the instructions for definition)?  If the appropriate Verification and appropriate of the appropriate and appropriate and appropriate the appropriate forms of the appro		1b		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				X
c d	Did the foundation file Form 1120-POL for this year?	-	1c		
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation  \$ \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \( \) \(				
е					
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers   \$ \( \)				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				X
-	If "Yes," attach a detailed description of the activities		2		
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		3	1	х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b		N/A	4b		<del></del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,	5		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?		6	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		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) ▶ IN				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	ſ	· [		
	27)? If "Yes," complete Part XIV		9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X
				_	

Form	1990-PF(2009) Cripé Family Foundation, Inc. 35-2109635			Page	5
Pá	art 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?	L	12	X	<u>.                                    </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	L	13	X _	_
	Website address ► N/A				
14	The books are in care of ▶ RANDALL M JACOBS Telephone no ▶ 574	1-53	3-1	171	
	YODER, AINLEY, ULMER & BUCKINGHAM				
	Located at ► GOSHEN, IN ZIP+4 ► 465	527 -	057	5	_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here				Ш
П.	and enter the amount of tax-exempt interest received or accrued during the year		<del></del>		_
۳ę	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		·····1.		_
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	,		'es N	<u>lo</u>
1a	During the year did the foundation (either directly or indirectly)	.			
	<ul> <li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person?</li> <li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li> </ul>	10			
		10			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	lo			
		10			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	"		I	
		10		I	
	(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 )	10			
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)?	<u>'A</u> [	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			-	
	were not corrected before the first day of the tax year beginning in 2009?	'A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and	.			
		lo l			
b	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				
	(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 )	/A	2ь	ŧ	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	- F		_	_
	<b>▶</b> 20 , 20 , 20 , 20			1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				
	at any time during the year?	10		I	
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			1	
	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	,		Ī	
	foundation had excess business holdings in 2009 )  N/	'A  _:	3b	_   _	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	Ľ	4a	<u> </u>	
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	DE	_
		Form	ココリ	PF (20	U9)

orn	1990-PF(2009) Cripe Family Fo	<del></del>		2109635			P	Page <b>6</b>
<u>Pa</u>	art VII-B Statements Regarding A	ctivities for Which Form	<u>4720 May Be R</u>	equired (cont	inued)			
5a	During the year did the foundation pay or incur a	any amount to			<u>_</u>			
	(1) Carry on propaganda, or otherwise attempt				Yes X No			
	(2) Influence the outcome of any specific public	election (see section 4955), or to	carry on,	_	_			
	directly or indirectly, any voter registration di			Ц	Yes X No		:	1
	(3) Provide a grant to an individual for travel, st	udy, or other similar purposes?			Yes X No			Ī
	(4) Provide a grant to an organization other than			_	_			Ī
	section 509(a)(1), (2), or (3), or section 4940	0(d)(2)? (see page 22 of the instru	uctions)		Yes X No			Ī
	(5) Provide for any purpose other than religious	, charitable, scientific, literary, or e	educational	_	_		:	1
	purposes, or for the prevention of cruelty to	Yes X No			1			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in								1
Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? N/A5b_								
Organizations relying on a current notice regarding disaster assistance check here								1
С	If the answer is "Yes" to question 5a(4), does the	e foundation claim exemption fron	n the tax	. —	_			I
because it maintained expenditure responsibility for the grant?  N/A Yes No								ŧ
	If "Yes," attach the statement required by Regula							ŧ
6a	Did the foundation, during the year, receive any	funds, directly or indirectly, to pay	premiums					Ī
	on a personal benefit contract?				Yes X No			1
b	Did the foundation, during the year, pay premiun	ns, directly or indirectly, on a pers	onal benefit contract	?		6Ь		X
_	If "Yes" to 6b, file Form 8870							1
	At any time during the tax year, was the foundation				Yes X No			L
	If yes, did the foundation receive any proceeds of				N/A	7b		<u> </u>
Pa	art VIII Information About Officers	s, Directors, Trustees, Fo	undation Mana	gers, Highly	Paid Employe	es,		
4 .	and Contractors							
<u> 1 L</u>	list all officers, directors, trustees, foundation	managers and their compensa	tion (see page 22 o	f the instruction	s).			
			(b) Title, and average	(c) Compensation	(d) Contributions to	(-) [		
	(a) Name and address		hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred		pense a r allowa	
			develop to position		compensation			
	BERT E CRIPE	Goshen	PRESIDENT					
	o INSIGHT ACCOUNTING GROUP, P.C.	IN 46526	1.00		0			0
	BERT E CRIPE, JR	GOSHEN	SECRETARY					
	o INSIGHT ACCOUNTING GROUP, P.C.	IN 46526	1.00		0			0
	CHARD D CRIPE	GOSHEN	DIRECTOR					
	o INSIGHT ACCOUNTING GROUP, P.C.	IN 46526	1.00		0			0
	IL TOM	GOSHEN	DIRECTOR					
	o INSIGHT ACCOUNTING GROUP, P.C.	IN 46526	1.00	(	0	!		0
2	Compensation of five highest-paid employee If none, enter "NONE."	s (other than those included or	ı line 1—see page 2	23 of the instruct	tions).			
	il none, enter NONE.		T	I				
	(a) Name and address of each employee paid	d many than \$50,000	(b) Title, and average	4-10	(d) Contributions to employee benefit	(e) Ex	pense a	ccount.
	(a) Name and address of each employee paid	more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowa	
NO	MP	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>		compensation			
140	nu							
		<del></del>			<del>                                     </del>	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·	<del></del>	+					
	<del></del>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	-	<del> </del>			
	· · · · · · · · · · · · · · · · · · ·				<del> </del>	ļ		
otal	number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·		1	<u> </u>		т—	
	or other employees paid over 400,000	<del> </del>				000	<del></del>	(2009)
					Foi	m サブ	ノーアド	(2009)

Form 990-PF (2009) Cripe Family Foundation	n, Inc.	35-2109635		Page 7
Part VIII Information About Officers, Directors	, Trustees, Founda	ation Managers, Highly Paid Em	ployees,	
and Contractors (continued)				
3 Five highest-paid independent contractors for professiona	ıl services (see page 23	of the instructions). If none, enter "NO	NE."	
(a) Name and address of each person paid more	than \$50,000	(b) Type of service	(c) Comper	nsation
NONE				
·		- <del></del>		
	<del></del>			
		-		
	<u> </u>			
Total number of others receiving over \$50,000 for professional service	ces		<u> </u>	
Part IX-A Summary of Direct Charitable Activ	ities			
List the foundation's four largest direct charitable activities during the tax year organizations and other beneficiaries served, conferences convened, research		nformation such as the number of	Expens	es
		DE MUE ENDIOVEEC		
1 COLLEGE SCHOLARSHIP PROGRAM FO		of the emplotees		
OF INDEPENDENT PROTECTION COME	ANI.		2	3,160
2 See Statement 8				3,100
2 See Statement o				
				5,200
3				<u> </u>
		•		
4				
•			i	
Part IX-B Summary of Program-Related Inves	stments (see page	24 of the instructions)	<u> </u>	
Describe the two largest program-related investments made by the foundation			Amount	
1 N/A				
·				
2				
				·
All other program-related investments See page 24 of the instructions	· · · ·			
3				
			!	
Total. Add lines 1 through 3		<b>&gt;</b>		

orm	990-PF(2009) Cripe Family Foundation, Inc. 35-2109635		Page 8
	Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn foi	
	see page 24 of the instructions.)		
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	782,410
b	Average of monthly cash balances	1b	8,996
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	791,406
9	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	791,406
4	Cash deemed held for chantable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	11,871
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	779,535
6	Minimum investment return. Enter 5% of line 5	6	38,977
₽ŧ	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private ope	rating	
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	38,977
2a	Tax on investment income for 2009 from Part VI, line 5 285		
b	Income tax for 2009 (This does not include the tax from Part VI )		
С	Add lines 2a and 2b	2c	285
3	Distributable amount before adjustments Subtract line 2c from line 1	3	38,692
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	38,692
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	38, <u>692</u>
	Will Ouglif in Distributions (see now OF of the instructions)		
P	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	38,360
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	38,360
5	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)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	38,360
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	)	

Form **990-PF** (2009)

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

P	in Alli Undistributed income (see page 26 of	the instructions)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<del></del>
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				38,692
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005 3,800	1			
	From 2006 3,819	-			
	From 2007 3,763	1 :			
	From 2008 4,785	1 :			
	Total of lines 3a through e	16,167			
4	_	10,107			<del></del>
-	Qualifying distributions for 2009 from Part XII,				1
_	line 4 > \$ \$8,360				1
	Applied to 2008, but not more than line 2a				
U	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)	ļ			<u> </u>
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2009 distributable amount				38,360
_ <del>0</del>	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2009	332			332
	(If an amount appears in column (d), the same				1
	amount must be shown in column (a) )				
6	Enter the net total of each column as				
	indicated below:				1
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	15,835			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable				1
	amount—see page 27 of the instructions				
0	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				0
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)				
8	Excess distributions carryover from 2004 not		,		•
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.	İ		. —	1
	Subtract lines 7 and 8 from line 6a	15,835	·		
0	Analysis of line 9		ę		
а	Excess from 2005 3,468		`		1
b	Excess from 2006 3,819	•			1
С	Excess from 2007 3,763	1			
d	Excess from 2008 4,785				1
е	Excess from 2009				

Pa	rt XIV Private Operating For	undations (see pa	ige 27 of the inst	tructions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling or o	determination letter that	it is a private operatii	ng		
	foundation, and the ruling is effective for 2	009, enter the date of t	he ruling	<b>&gt;</b>		
b	Check box to indicate whether the founda	tion is a private operatii	ng foundation describ	ed in section	4942(J)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for		<u> </u>			
	each year listed					
ь	85% of line 2a	· · · · · · · · · · · · · · · · · · ·		<del> </del>		·
c	Qualifying distributions from Part XII,	<del></del>		- <del> </del>		
Ŭ	line 4 for each year listed					
d	Amounts included in line 2c not used directly					<del></del>
•	for active conduct of exempt activities					
е	Qualifying distributions made directly					
٠	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the				<del> </del>	
3	alternative test relied upon					
а	"Assets" alternative test—enter					
а	(1) Value of all assets					
	(2) Value of assets qualifying under				<del>                                     </del>	
	section 4942(j)(3)(B)(j)					
b	"Endowment" alternative test—enter 2/3				<del></del>	
D	of minimum investment return shown in					
	Part X, line 6 for each year listed					
_	"Support" alternative test—enter		<del></del>	<del>-</del>	<del></del>	
С	• •					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public			1		
	and 5 or more exempt			Ì		
	organizations as provided in					
	section 4942(j)(3)(B)(III)  (3) Largest amount of support from			<del></del>		
	an exempt organization				`	
	(4) Gross investment income	<del>- · · - · - · · · · · · · · · · · · · ·</del>	· · · · · · · · · · · · · · · · · · ·	<del></del>	<del>                                     </del>	
Pa	art XV Supplementary Inform	nation (Complete	this part only if	the foundation b	ad \$5 000 or more	in assets at
. •	any time during the ye				iaa 40,000 or inorc	iii ussets at
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who l	-	than 2% of the total c	ontributions received b	v the foundation	
	before the close of any tax year (but only				•	
	N/A	•			•	
b	List any managers of the foundation who	own 10% or more of the	e stock of a corporation	on (or an equally large	portion of the	<u></u>
	ownership of a partnership or other entity)	of which the foundatio	n has a 10% or greate	er interest		
	N/A					
2	Information Regarding Contribution, G	rant, Gift, Loan, Scho	larship, etc., Progra	ms:	<del></del>	
	Check here ► X if the foundation only	makes contributions to	preselected charitab	le organizations and d	oes not accept	
	unsolicited requests for funds. If the found	lation makes gifts, gran	its, etc (see page 28	of the instructions) to i	ndıvıduals or	
	organizations under other conditions, com	iplete i <u>tems 2a,</u> b, c, an	nd d	<u> </u>		
а	The name, address, and telephone numb	er of the person to who	m applications should	be addressed		
	N/A					
b	The form in which applications should be	submitted and informat	ion and materials the	y should include		
_	N/A			···		
С	Any submission deadlines					
	N/A					
ď	Any restrictions or limitations on awards, s <b>N/A</b>	such as by geographica	ıı areas, charitable fie	ias, kinas of institution:	s, or other factors	
	И/ А		~			- 000 PE

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Purpose of grant or status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year See Statement 9 38,360 38,360 ▶ 3a Approved for future payment N/A ▶ 3b Total

Enter gross amo	ounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
1 Program se	Nuce revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
	vice revenue					The management y
					·	
9						
f						
<b>g</b> Fees an	nd contracts from government agencies					
2 Membership	dues and assessments					
	savings and temporary cash investments			14	106	· · · · · · · · · · · · · · · · · · ·
	nd interest from securities			14	14,450	
	come or (loss) from real estate	ļ				
	anced property					
	t-financed property	<u> </u>	<del></del>			
	come or (loss) from personal property	<del></del>				
7 Other invest	ment income s) from sales of assets other than inventory		<del> </del>	14		1 700
	or (loss) from special events	<del>                                     </del>		1 T.		1,720
	or (loss) from sales of inventory	-	<del></del>	<del></del>	,	
	ue a		-	<del></del>	-	
				1 - 1		
			-			
12 Subtotal Ad	d columns (b), (d), and (e)			0	14,556	1,720
13 Total. Add I	ne 12, columns (b), (d), and (e)				13	16,276
	in line 13 instructions on page 28 to verify calculat	ions )				
DAW VIII IS						·
Part XVI-B	Relationship of Activities to the	Accomplishme				
Line No.	Relationship of Activities to the Explain below how each activity for which incom	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	
	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the Explain below how each activity for which incom	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No.	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he
Line No. ▼	Relationship of Activities to the  Explain below how each activity for which incom accomplishment of the foundation's exempt pur	Accomplishme	mn (e) of Part XVI-/	A contribute	d importantly to the	he

OTT	n 990-PF <u> (200</u>	9) Cripe Fan	UTTA LC	undation	n, inc	•	35-	<u>-2109</u>	635			Pag	<u>je 13</u>
P		Information Rega	_	insfers To a	nd Trans	actions	and Relat	ionship	s With N	onchar	itable		
_		Exempt Organiza										Yes	No
1	=	inization directly or indir		· ·	_	•	-				-	105	NU
		01(c) of the Code (other	r man section	i 50 i(c)(3) organ	nizations) or	in section	i 527, relating	to politica	l				
_	organization				44								
а		om the reporting founda	ation to a non	charitable exem	ipt organizati	on or							v
	(1) Cash										1a(1)		X
	(2) Other as										1a(2)		X
b	Other transa												.,
		f assets to a noncharita	-	-							1b(1)		<u> </u>
		ses of assets from a no			ion						1b(2)		X
	• •	of facilities, equipment,		ets							1b(3)		X
	` '	rsement arrangements									1b(4)	$\vdash$	X
	` '	r loan guarantees									1b(5)		X
	• •	ance of services or me	•	-							1b(6)		X
	_	acılıtıes, equipment, ma	_	•							1c		<u> </u>
d		r to any of the above is											
		goods, other assets, or	•		•								
		transaction or sharing	T								<del></del>		_
- /	(a) Line no	(b) Amount involved	(c) Name	of nonchantable ex	xempt organiz	ation	(d) Descri	iption of tra	nsfers, transac	tions, and	sharing arrange	ements	_
1/	<u>A</u>						<u>-</u>						_
		<del>-</del>	<del> </del>										
			<del> </del>	<del></del>									
			<del> </del>	<del>-</del>									_
		<b></b>	<u> </u>	<del>-</del>									
	<u> </u>	<del>                                     </del>											
			<u> </u>					·					
			<u> </u>										
				· · · · · · · · · · · · · · · · · · ·									
			ļ <u> </u>										
		<u> </u>			<u> </u>								
<b>2</b> a	Is the founda	ation directly or indirect	ly affiliated w	ith, or related to,	, one or more	e tax-exer	mpt organizati	ons			_		-
	described in	section 501(c) of the C	Code (other th	nan section 501(	c)(3)) or in s	ection 52	7?					es X	No
b		nplete the following sch	edule										
		Name of organization		(b) Type	of organization	<u> </u>		(0	) Description (	of relations	hip		
	<u>N/A</u>				~								
					· · · · · · · · · · · · · · · · · · ·								
		· . <u>-</u> -											
	Under penaltie	es of perjury, I declare that	I have examine	ed this return, inclu	iding accompa	nying sche	edules and stater	ments, and	to the best of r	ny knowled	ige and		
	belief, it is true	e, correct, and complete D	eclaration of pr	reparer (other than	taxpayer or fi	duciary) is I	based on all info	rmation of	which preparer	has any k	nowledge		
		100		<i>Z</i> _		2/4			Presid	ent			
စ	Signature	e of officer or trustee			(	Date /	<del>/                                    </del>	Tit	ile				
Ë		2					Date		01		Preparer's identi		
<u> </u>	Pi حري	reparer's 🕨 🕖 🥢	ma le	$\mathcal{L}$	4101	2.			Check if self-employed	ı⊾⊓l	number (see Sig page 30 of the in		
Sign Here	id Sign	gnature P	<u> </u>		7000		02/0	03/11	Jen-employed	·- U	P00367		
	Paid Preparer's Use Only	rm's name (or yours if	INSIGH	T ACCOU	NTING	GROUE		•					
	[ ž̃⊃ [ "s	elf-employed), address.		LINCOL						FIN -	20-370	839	5

EIN > 20-3708395 Phone no 574-534-4040

self-employed), address, and ZIP code

1832 W LINCOLN AVE

46526-5918

GOSHEN, IN

6121 Cripe Family Foundation, Inc. 35-2109635 FYE: 10/31/2010

ents		
l Statemen		
ederal Si		
Fede		
		1

•	•	Net tion Gain / Loss	\$ 1,720	0 \$ 1,720		Charitable Purpose	w.	v.		Charitable Purpose	w w
<u>Issets</u>		Expense Depreciation	တ	\$ O	ng Fees	Adjusted Net	₩.	w	SI	Adjusted Net	w w
Form 990-PF, Part I, Line 6a - Sale of Assets		Cost	23,275 \$	23,275 \$	Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees	Net Investment	w	w	3 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment	\$ 317
	How Received	Sale Price	Purchase \$ 24,995 \$	\$ 24,995 \$	2 - Form 990-PF, Parl	Total	1,350	1,350	Statement 3 - Form 990-P	Total	317
Statement 1 -		Date Sold	8/13/10 \$		Statement		∙ <b>v</b> ≻	<i>Υ</i> •	Stat		<i>ጭ</i> ፡ ጭ ፡
	Description	Whom Date Sold Acquired	RUSSELL STRATEGIC BOND FUND	Total		Description	Accounting Fees	Total		Description	Foreign Tax on Investments Total

• 6121 Cripe Family Foundation, Inc.

FYE: 10/31/2010

## **Federal Statements**

2/3/2011 2:14 PM

35-2109635

Statement 4 - Form 990-PF	, Part II, Line 10a - US and	State Government Investments

Description						
		eginning of Year	 End of Year	Basis of Valuation		Fair Market Value
MULTI FINANCIAL SECURITIES	CORP ACCT					
	\$	26,256	\$ 28,109	Cost	\$_	29,618
Total	\$	26,256	\$ 28,109		\$_	29,618

### Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description		_				
		Beginning of Year	 End of Year	Basis of Valuation		Fair Market Value
MULTI FINANCIAL SECURITIES (	CORP ACC	CT				
	\$	551,666	\$ 551,666	Cost	\$_	486,817
Total	\$	551,666	\$ 551,666		\$_	486,817

## Statement 6 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

De	scription		-					
			eginning of Year	_	End of Year	Basis of Valuation	_	Fair Market Value
MULTI FINANCIAL	SECURITIES	CORP ACCT						
		\$	209,373	\$_	184,243	Cost	\$_	193,513
Total		\$	209,373	\$_	184,243		\$	193,513

## Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments

Description						
	_	Beginning of Year	End of Year	Basis of Valuation		Fair Market Value
MULTI FINANCIAL-REIT HOLDINGS						
	\$_	38,486	\$ 38,486	Cost	\$_	39,888
Total	\$_	38,486	\$ 38,486		\$_	39,888

• 6121 Cripe Family Foundation, Inc.

35-2109635

**Federal Statements** 

FYE: 10/31/2010

2/3/2011 2:14 PM

### Statement 8 - Form 990-PF, Part IX-A, Line 2 - Summary of Direct Charitable Activities

#### Description

Contributions to area 4H fair projects (ELkhart, Noble and Kosciosko County) and area school projects (Goshen, Fairfield, Wawasee Middle School) in support of the children of the employees of Independent Protection Company.

6121 Cripe Family Foundation, Inc. 35-2109635 FYE: 10/31/2010	Inc. Federal Statements	tements	2/3/2011 2:14 PM •	•
Statem	Statement 9 - Form 990-PF, Part XV, Line 3a - (	Line 3a - Grants and Contributions Paid During the Year	,	
Name	Address		•	
Address	Relationship Status	Purpose	Amount	
ELKHART COUNTY 4-H GOSHEN IN 46528		CHARITABLE	1,360	
GOSHEN GRIDINON CLOB GOSHEN IN 46527	FO BOX 5/5	CHARITABLE	009	_
	Trincolliway	CHARITABLE		-
INDIANAPOLIS IN 46202	omiversicy boureva	SCHOLARSHIP	2,500	
SOUTH BEND IN 46634	1/00 Mishawaka Avenue	SCHOLARSHIP	6,000	
FORDOR UNIVERSIII WEST LAFAYETTE IN 47907	504 NOICHWESTEIN AVENUE 07 107 Guith Indiana Minnia	SCHOLARSHIP		-
BLOOMINGTON IN 47405	10/ Both Smith Street	SCHOLARSHIP	12,500	
)		CHARITABLE	1,590	
THE CROSSING Elkhart IN 46517	south f. f.	CHARITABLE		-
Goshen IN 46526		CHARITABLE		
49032-9		SCHOLARSHIP	6,500	
	200 nign rain Avenue	CHARITABLE	-	
Indianapolis IN 46240-184	711 E 00cm 20, -184 1013 M Main 0t	CHARITABLE		
	. +	CHARITABLE	1,000	
FAILH MISSION Elkhart IN 46516-3369	T 26	CHARITABLE		
CAPS Elkhart IN 46517		CHARITABLE		
X GINES IN 46527	102 M. LINCOIII AVE., SUIL	CHARITABLE		
Goshen IN 46526-7309		CHARITABLE		
			б	

6121 Cripe Family Foundation, Inc. 35-2109635 FYE: 10/31/2010		Federal Statements	ments	2/3/2011 2:14 PM
Statem	Statement 9 - Form 990-PF, Part	XV, Line 3a - Gra Year (continu	XV, Line 3a - Grants and Contributions Paid During the Year (continued)	
Name	Address			٠
Address	Relationship	Status	Purpose	Amount
FAIRFIELD HIGH SCHOOL Goshen IN 46526-8502	67530 U.S. 33		CHARITABLE	100
Fort Wayne IN 46802			SCHOLARSHIP	
NOBLE COUNIX COMM FAIR CO Kendalville IN 46755	589 Fair Street	1 1 1	CHARITABLE	550
Syracuse IN 46567	3650 State Road 13 N	וסד כזז	SCHOLARSHIP	300
Goshen IN 46528	ZZSSI C.K. 10		SCHOLARSHIP	360
-	4 t		SCHOLARSHIP	2,500
CHRISI FOR THE NATIONS BI Dallas TX 75376-9000 OHIO TECHNICAL COLLECT	F.U. BOX /69000		SCHOLARSHIP	200
cleveland (	Edst olst		SCHOLARSHIP	2,000
Total				38,360
				6