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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

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

OMB No 1545-0052

Interi	nal Re	venue Service Note. The foundation ma	/ be able t	to use a copy of this	s return to sati	sfy state repo	orting requirements.	
For	calei	ndar year 2010, or tax year beginning			, and e	nding		
G (heck	k all that apply: Initial return		Initial return of a f	•	charity	Final return	
_		Amended return		Address char	nge		Name change	
Nai	ne o	f foundation					A Employer identification	number
		CUTEL CEVMON ECHNICAM	TON	INC			26-0726460	
Nur	nber a	SHIEL SEXTON FOUNDAT and street (or PO box number if mail is not delivered to street		-		Room/suite	B Telephone number	
'''		902 N. CAPITOL AVENU					317-423-60	0.0
Cit	ort	own, state, and ZIP code	<u> </u>	•			C If exemption application is po	
Oit	Uit		204				D 1. Foreign organizations	• =
H (heck	type of organization: X Section 501(c)(3)		vate foundation	•		Foreign organizations me check here and attach co	
$\ddot{\Box}$	_	ection 4947(a)(1) nonexempt charitable trust		xable private found	ation			
I Fa		arket value of all assets at end of year J Accoun			Accr	ual	E If private foundation stat under section 507(b)(1)	
(fr	om i		Other (spe				F If the foundation is in a 6	
•	\$	51,203. (Part I, col	umn (d) i	must be on cash	basis)		under section 507(b)(1)	
Pa	ırt İ	Analysis of Revenue and Expenses	(a)	Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		enses per books	` inco	ome	` income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received						
	2	Check 📂 🗶 if the foundation is not required to attach Sch. B						
	3	Interest on savings and temporary cash investments			,			
	4	Dividends and interest from securities		5.		5.	5.	STATEMENT 1
	5a	Gross rents						
	b	Net rental income or (loss)						
ě		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-					
Revenue	Ь	assets on line 6a			<u> </u>	0.		
Ŗ.	7	Capital gain net income (from Part IV, line 2)				υ.		
	8	Net short-term capital gain Income modifications	<u> </u>					
		Gross sales less returns						
	10a	and allowances Less Cost of goods sold	 					
		Gross profit or (loss)	1					
	11	Other income						-
	12	Total Add lines 1 through 11		5.		5.	5.	
	13	Compensation of officers, directors, trustees, etc		0.		0.	0.	0.
	14	Other employee salaries and wages						
	15	Pension plans, employee benefits						
ses	16a	Legal fees	-					
Expense		Accounting fees RECEIVED	-					
Щ	C	Other professional fees	70					
Operating and Administrative	17	Interest RAY 0 2 2011	80					
itra	18	Taxes	S S					
: <u>Ë</u>	19	Depreciation and deliletion	-					
Ę	20	Occupancy OGDEN, U					· · · · · · · · · · · · · · · · · · ·	
þ	21	rravel, comerences, and meenings						<u></u>
g an	22 23	Printing and publications Other expenses						· · · · -
ţi	23 24	Total operating and administrative						
era	_7	expenses. Add lines 13 through 23		0.		0.	0.	0.
Ö	25	Contributions, gifts, grants paid		0.		<u> </u>	· ·	0.
		Total expenses and disbursements						
		Add lines 24 and 25		0.		0.	0.	0.
	27							
		Excess of revenue over expenses and disbursements		5.				
	b	Net investment income (if negative, enter -0-)				5.		
	С	Adjusted net income (if negative, enter -0-)					5.	

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LHA For Paperwork Reduction Act Notice, see the instructions

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		90-PF (2010) SHIEL SEXTON FOUNDATION,	INC	26-	0726460 Page 2
	art	Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
	art	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	51,198.	51,203.	51,203.
	3	Accounts receivable ►			
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable -			
	_	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	,	disqualified persons			
	7	Other notes and loans receivable Less; allowance for doubtful accounts			
		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
Ass	9	Investments - U.S. and state government obligations	-		
	1	Investments - corporate stock			· · · · · · · · · · · · · · · · · · ·
	1 -	Investments - corporate bonds			
	1	Investments - land, buildings, and equipment basis			
	'''	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶		•	·
		Less accumulated depreciation			
	15	Other assets (describe ►)			***************************************
	40	Total accept (to be completed by all filers)	51,198.	51,203.	51,203.
_		Total assets (to be completed by all filers) Accounts payable and accrued expenses	<u>JI,190.</u>	31,203.	<u>JI,203.</u>
	17				
	18	Grants payable Deferred revenue			
Liabilities	19 20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ë	1	Other liabilities (describe)			
		Carlot Industrialos (Coccornos P			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
	•	and complete lines 24 through 26 and lines 30 and 31.	İ		
ès	24	Unrestricted			
au	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted			
pur		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
SO	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
ΙÀS	29	Retained earnings, accumulated income, endowment, or other funds	51,198.	51,203.	
Ż	30	Total net assets or fund balances	51,198.	51,203.	
	31	Total liabilities and net assets/fund balances	51,198.	51,203.	
	art				-
_					
1		l net assets or fund balances at beginning of year - Part II, column (a), line 30 st agree with end-of-year figure reported on prior year's return)	,	1	51,198.
2	•	st agree with end-of-year figure reported on prior year's return) r amount from Part I, line 27a		2	51,198.
		r increases not included in line 2 (itemize)		3	0.
-		lines 1, 2, and 3		4	51,203.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 30	- 6	51,203.
<u> </u>		The state of the s			Form 990-PF (2010)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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0.

0.

11,083.

Add lines 5 and 6

Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

6

7

orn	m 990-PF (2010) SHIEL SEXTON FOUNDATION, INC 26-	0726	460)	Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	- see	nstr	uctio	ns)
1a	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%				0.
	of Part I, line 27b				
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
	Add lines 1 and 2				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		_		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				0.
6	Credits/Payments:				
a	a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a				
b	b Exempt foreign organizations - tax withheld at source				
C	c Tax paid with application for extension of time to file (Form 8868)				
þ	d Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments. Add lines 6a through 6d				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			_	
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax				
	art VII-A Statements Regarding Activities				
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		1a	L	X
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		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.			ļ	
C	Did the foundation file Form 1120-POL for this year?		1c		X
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		ĺ		
	managers. ► \$0.				}
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	b If "Yes," has it filed a tax return on Form 990-T for this year?	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	<u>-</u> .	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	ļ
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
	If "Yes," complete Part II, col. (c), and Part XV				
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions) ►	<u> </u>			
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	Х	<u></u>
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? 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
		Forr	n 990	-PF (2010)

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orm 990-PF (2010) SHIEL SEXTON FOUNDATION,			26-07264	60	 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No		
. (2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir			ŀ	
any voter registration drive?			es 🗶 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗓 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				ı
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un-	der the exceptions described	in Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		uned	}		
expenditure responsibility for the grant?		. —	es 🔲 No		
If "Yes." attach the statement required by Regulations section 53 494	5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				ŀ
a personal benefit contract?	, , , , , , , , , , , , , , , , , , , ,		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		ŀ	6ь	x
If "Yes" to 6b. file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	□ Y	es X No		
b. If "Yes," did the foundation receive any proceeds or have any net income attribu			_	7b	
Information About Officers Directors Trust		nagers. Highly			
Part VIII Paid Employees, and Contractors			•		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accou	int, other wances
	10 poomon	- Cinci c /			
SEE STATEMENT 2		0.	O.		0.
JEE GIATEMENT 2			<u>_</u>		
		 			
		 			
Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "			
Compensation of the highest paid employees (eater than those me	(b) Title, and average		(d) Contributions to employee benefit plans	(e) E	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred	accou	xpense int, other wances
NONE	devoted to position		compensation	allu	Walles
NONE					
		-			
		1			
					
					
· · · · · · · · · · · · · · · · · · ·					
otal number of other employees paid over \$50,000			<u> </u>		0
			Form 9	990-PI	F (2010)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see	instructions)
1.	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	51,200.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	51,200.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	51,200.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	768.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	50,432.
6	Minimum investment return Enter 5% of line 5	6	2,522.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	2,522.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,522.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,522.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,522.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		_
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	0.
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	5	<u>0.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The empline C will be used in Bort V, column (b) in subsequent years when calculating whether the foundation of	unalifica for the	anation

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4940(e) reduction of tax in those years.

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				2,522.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
d From 2008 42,869.				
e From 2009	40.050			
f Total of lines 3a through e	42,869.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 0 .			0.	
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				0.
d Applied to 2010 distributable amount	0.			
e Remaining amount distributed out of corpus	2,522.			2,522.
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	2,322.			2,322.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	40,347.			***
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2011	<u></u>			0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)	· · · ·			
8 Excess distributions carryover from 2005	0.			
not applied on line 5 or line 7	U •			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	40,347.			
O Analysis of line 9:	±0,347•			
a Excess from 2006				
b Excess from 2007				
c Excess from 2008 40,347.				
d Excess from 2009				
e Excess from 2010				

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	<u>EXTON FOUNI</u>				726460 Page 10
Part XIV Private Operating Fo			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
, foundation, and the ruling is effective for			▶ └		
b Check box to indicate whether the foundary		ng foundation described		4942(j)(3) or	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0000	Prior 3 years	(4) 0007	4-1-7-1-1
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed		ļ			ļ
b 85% of line 2a		ļ	 		
c Qualifying distributions from Part XII,			1		
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities		-		ļ	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	··		 		
alternative test relied upon:					
a "Assets" alternative test - enter:			•		
(1) Value of all assets		-		+	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				_	
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(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					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)			<u> </u>		
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		to this nort only	if the foundation	had \$5,000 ar m	oro in occoto
Part XV Supplementary Infor	mation (Comple le vear-see the i	instructions.)	ii tile loulluatioi	1 11au \$5,000 01 111	ore in assets
1 Information Regarding Foundation		<u>-</u>			
a List any managers of the foundation who		than 2% of the total con	tributions received by the	e foundation before the clo	ose of any tax
year (but only if they have contributed mo					
NONE					
b List any managers of the foundation who			(or an equally large port	on of the ownership of a p	partnership or
other entity) of which the foundation has	a 10% or greater interes	st.			
NONE					····
2 Information Regarding Contribution					
Check here ► X if the foundation on the foundation makes gifts, grants, etc. (s					
				omplete items za, b, c, an	u u.
a The name, address, and telephone number	er of the person to who	m applications should be	addressed;		
b The form in which applications should be	submitted and informa	tion and materials they s	hould include:		-
c Any submission deadlines:		-			
			1	aller factors	
d Any restrictions or limitations on awards,	such as by geographic	ai areas, charitable fields	, kinds of institutions, or	otner factors:	
					

3 Grants and Contributions Paid During th Recipient	If recipient is an individual,			
* * * * * * * * * * * * * * * * * * * *	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year	NONE	E01 (C)		
NONE	NONE	501 (C) (3)	GENERAL ASSISTANCE	
NONE				
		ļ		
T-A-I			▶ 3a	
Total b Approved for future payment			Ja	0
a papiered in latera payment				
NONE				
NONE				
	1	1	1	
	_			

inter gross amounts unless otherwise indicated.		ed business income		uded by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
•			+		
ab			 		 -
c			1		· · · · · · · · · · · · · · · · · · ·
d		· · · · · ·			
e	1		1		
1					
g Fees and contracts from government agencies				 	
Membership dues and assessments					
Interest on savings and temporary cash					
investments				ļ	
Dividends and interest from securities					5
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					<u> </u>
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other		-			
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
C			1	1	
d					
d		0.		0.	
e		0.		0.	
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e)		0.		···	
e	ons.)			13	
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		Exempt Organ	ıizations								
1 Did	the or	ganization directly or indi	rectly engage in any	y of the following	ng with any o	ther organizat	ion describ	ed in section 501(c) of		Yes	No
the	Code	other than section 501(c)	(3) organizations)	or in section 52	27, relating to	political orga	nızatıons?				
a Tran	sfers	from the reporting founda	ation to a noncharit	able exempt or	ganization of	•			1		
(1)	Cash								1a(1)		Х
(2)	Othe	assets							1a(2)		X
b Othe	er trar	sactions:								l ,	
(1)	Sales	of assets to a noncharital	ible exempt organiza	ation					1b(1)		_X
(2)	Purc	nases of assets from a no	incharitable exempt	organization					1b(2)		X
(3)	Renta	al of facilities, equipment,	or other assets						1b(3)		X
(4)	Reim	bursement arrangements	i .						1b(4)		<u> </u>
(5)	Loan	s or loan guarantees							1b(5)		X
(6)	Perfo	rmance of services or me	embership or fundra	nsing solicitatio	ons				1b(6)		<u> X</u>
c Sha	ring o	f facilities, equipment, ma	uling lists, other ass	ets, or paid em	ployees				1c		X
d If th	e ans	wer to any of the above is	"Yes," complete the	following sche	edule. Columi	n (b) should a	lways show	the fair market value of the goods, o	ther ass	ets,	
or s	ervice	s given by the reporting fo	oundation. If the fol	undation receiv	ed less than f	faır market val	lue in any tr	ansaction or sharing arrangement, s	now in		
colu	mn (c) the value of the goods,									
a) Line no	_	(b) Amount involved	(c) Name o	of noncharitable	e exempt orga	anization	(d)	Description of transfers, transactions, and	haring an	rangeme	nts
				N/A_							
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On loth	o four	 ndation directly or indirect	thy affiliated with or	related to one	or more tay-	evemnt organ	uzations des	ecribed			
		501(c) of the Code (other				exempt organ	iizationis uct	(T	Yes	X	Nn
		emplete the following sche		7)(0)) 01 111 3001							,
יו ט	, ci	(a) Name of org			(b) Type of	organization		(c) Description of relationsh	ID		
		N/A							·		
											
-											
								and to the best of my knowledge and beli	ef, it is tru	ie, correc	ct,
Sign	and	complete Declaration of prepar	rer (other than taxpayer	r or flouclary) is b	ased on all infor		1	any knowledge			
Here		Lycurs	Muss			14/27	1)	EVP			
		Signature of officer or tru	ıstee)		Date		Title			
		Print/Type preparer's na	ıme	Preparer's s	ignature		Date	Check if PTIN			
Paid				<u> </u>			<u> </u>	self- employed			
Prepa											
Use O	nly	Firm's name						Firm's EIN ►			
		Firm's address 🕨						Phone no.			
									-000		
								For	m 990	-PF (2	2010)

Schedule B

(Form 990, 990-EZ. or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

Name of the organization SHIEL SEXTON FOUNDATION, 26-0726460 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-FZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-FF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

	Form 990, 990-EZ, or 990-PF) (2010)		Page 1 of 1 of Part I Employer identification number
Name of or	ganization		
	SEXTON FOUNDATION, INC		26-0726460
Part I	Contributors (see instructions)		.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	(d) ons Type of contribution
1	SHIEL SEXTON COMPANY, INC. 902 N. CAPITOL AVENUE INDIANAPOLIS, IN 46204		Person X Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) ons Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Aggregate contribution	(d)
No.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution \$\$	(d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) ons Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribute	(d) Type of contribution
023452 12-23	3-10	\$Schedule B	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

SHIEL SEXTON FOUNDATION, INC

26-0726460

	ash Property (see instructions)		1
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			N1
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 	
453 12-23-10			90, 990-EZ, or 990-PF) (2

FORM 990-PF DIVIDENDS	AND	INTEREST	FRON	M SECURITI	ES	STAT	EMENT 1	
SOURCE		GROSS AMOUNT		CAPITAL GAINS DIVIDENDS				
CITY SECURITIES	-		5 .	•		0.	5.	
COTAL TO FM 990-PF, PART I, LN	4 :		5.			0.	5.	
ORM 990-PF PART VIII - L TRUSTEES A						STAT	EMENT 2	
NAME AND ADDRESS	·					EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT		
ANDREW K. SHIEL 302 N. CAPITOL AVENUE INDIANAPOLIS, IN 46204		DIRECTOR 10.00	<u>-</u> :		0.	0.	0.	
11CHAEL T. DILTS 102 N. CAPITOL AVENUE INDIANAPOLIS, IN 46204		DIRECTOR 10.00	AND	PRESIDENT	0.	0.	0.	
RIAN J. SULLIVAN 102 N. CAPITOL AVENUE INDIANAPOLIS, IN 46204		DIRECTOR 10.00			0.	0.	0.	
CICHARD E. HENNESSEY 102 N. CAPITOL AVENUE NDIANAPOLIS, IN 46204		DIRECTOR 20.00	AND	TREASURER	0.	0.	0.	
RISTIN L.ALTICE 02 N. CAPITOL AVENUE NDIANAPOLIS, IN 46204		DIRECTOR 20.00	AND	SECRETARY	0.	0.	0.	
'OTALS INCLUDED ON 990-PF, PAGE	6,	PART VIII			0.	0.	0.	