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# SCANNED MΔY 9

990-PF

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

OMB No 1545-0052 2010

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2010, or tax year beginning 12/17/10, and ending 12/31/10  $|\mathbf{X}|$ Initial return Initial return of a former public charity Final return G Check all that apply Amended return Address change Name change A Employer identification number Name of foundation 27-4330403 Parent Family Foundation, Inc. Telephone number (see page 10 of the instructions) 260-424-5656 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite 4625 N. Washington Road If exemption application is pending, check here City or town, state, and ZIP code 1. Foreign organizations, check here IN 46804 Fort Wayne 2. Foreign organizations meeting the H Check type of organization X Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here J Accounting method Cash X Accrual I Fair market value of all assets at end of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination 99,987 under section 507(b)(1)(B), check here line 16) ▶ \$ (Part I, column (d) must be on cash basis) Part I (a) Revenue and Analysis of Revenue and Expenses (The total of (d) Disbursements expenses per (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal books income income purposes the amounts in column (a) (see page 11 of the instructions) ) (cash basis only) 100,052 Contributions, gifts, grants, etc., received (attach schedule) Check ▶ If the foundation is **not** required to attach Sch B 2 3 Interest on savings and temporary cash investments Dividends and interest from securities Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns & allowances 10a Less Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 100,052 12 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc 13 Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Operating and Administrative Other professional fees (attach schedule) Taxes (attach schedule) (see page 14 of the instructions) Depreciation (attach schedule) and depletion 20 Occupancy Travel, conferences, and meetings Printing and publications Other expenses (att sch ) Total operating and administrative expenses. Add lines 13 through 23 0 0 25 Contributions, gifts, grants paid 0 0 Total expenses and disbursements. Add lines 24 and 25 26 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 100,052 0 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

Part II Balance Sheets Attended schoolase and amousts in the decembors counts (a) Beginning of year (b) Book Value (c) Fair Market Value (c) Sample of the first Accounts received to the first Accounts to the first Accounts received to the first Accounts to the first Accounts received to the first Accounts to the first Accounts to the first Accounts for the first Accounts to the first Accounts for the first Accounts to the first Accounts for th	Fo	orm 990-PF (2010) Parent Family Foundation, Inc. 27-4330403				Page 2			
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of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	ă	26	Permanently restricted		-				
of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	БП		Foundations that do not follow SFAS 117, check here ▶			, ;			
of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	교		and complete lines 27 through 31.						
of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	7	27	Capital stock, trust principal, or current funds						
of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	S	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1			
of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	set	29	Retained earnings, accumulated income, endowment, or other funds			1			
of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	Ş	30	Total net assets or fund balances (see page 17 of the			1			
of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	1			0	99,987				
of the instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	ž	31	,		-				
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65				0	99,987				
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	_	Part I		-		<u> </u>			
end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65				ist agree with					
2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶ See Statement 2  5 65	•			- <del>y</del> ······	1	0			
3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► See Statement 2 5 65	2					<del></del>			
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ See Statement 2 5 65									
5 Decreases not included in line 2 (itemize) ▶ See Statement 2 5 65			· · · ·			100.052			
					<del></del>	i e			
				b), line 30	<del></del>	<del></del>			

Part VI instructions on page 18

orm	990-PF (2010) Parent Family Foundation, Inc. 27-433040	3				Pa	ige 4
Pa	irt VI · Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page	18 of the	instr	uctions)			
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 instruct	ions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•	1				
	here ▶ ☐ and enter 1% of Part I, line 27b	1	1				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	لــ					- '
	Part I, line 12, col (b)						_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	ļ			<u> </u>
3	Add lines 1 and 2		3	<del>                                     </del>			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	<u> </u>			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	<del> </del>			0
6	Credits/Payments		ł				'
а	2010 estimated tax payments and 2009 overpayment credited to 2010		-				
b	Exempt foreign organizations—tax withheld at source 6b		4				
С	Tax paid with application for extension of time to file (Form 8868)  6c		4				
d -	Backup withholding erroneously withheld 6d 6		4			-	-
7	Total credits and payments Add lines 6a through 6d		7	<del>                                     </del>			
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	•	9	-			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	-			
1	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refur	nded <b>&gt;</b>	11				
	art VII-A Statements Regarding Activities					<u>,                                    </u>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				4 -	Yes	No_
L	participate or intervene in any political campaign?				1a		<u> </u>
D	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19						x
	of the instructions for definition)?				1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						*
_	published or distributed by the foundation in connection with the activities  Did the foundation file Form 1120-POL for this year?					~	x
c d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				1c		
ŭ	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
Ŭ	on foundation managers > \$						
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, article	s of					,
_	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	1	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		
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	Х	
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 Pa	art 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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page	•					
	27)? If "Yes," complete Part XIV				9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		_				
	names and addresses	Stmt	3		10	X	L .

Form	1990-PF (2010) Parent Family Foundation, Inc. 27-4330403	3			P	age <b>5</b>
	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					
	rheaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	X	<u> </u>
	Website address ► N/A					
14		hone no 🕨				
	4625 N. Washington Road					
	Located at ▶ Fort Wayne IN	ZIP+4 ▶	46804			_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	. 1	1			▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	▶ _	15			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		1		Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter					'
	the name of the foreign country					Ш
_ Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				Yes	LNa
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				res	No
1a	During the year did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(1) Engage in the sale of exchange, or leasing of property with a disqualified person?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		21 140			,
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			· '
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					'
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days )	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulati	ons			-	*
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?		N/A	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 2010?		N/A	1c		ļ
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 2010, did the foundation have any undistributed income (lines 6d and					1
	6e, Part XIII) for tax year(s) beginning before 2010?	Yes	X No			
L	If "Yes," list the years > 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 22 of the instructions)		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		11/21	20	1	+
·	► 20 , 20 , 20 , 20					1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					1
-	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or					
-	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					1
	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				1	
	foundation had excess business holdings in 2010 )		N/A	3b	L	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	s?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	;				-
	charitable purpose that had not been removed from jeopardy before the first day of the tay year beginning in 2	0102		4h	ı	l x

Form **990-PF** (2010)

Form	990-PF(2010) Parent Fami	ly Foundation, Inc	<b>27-4</b>	330403			Pa	age <b>6</b>
_Pa	rt VII-B Statements Regard	ing Activities for Which Fo	<u>rm 4720 May Be R</u>	equired (cont	inued)			
5a	During the year did the foundation pay of	r incur any amount to						
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (sec	tion 4945(e))?	Y	es 🗓 No			•
	(2) Influence the outcome of any specifi	ic public election (see section 4955)	), or to carry on,					
	directly or indirectly, any voter regist	ration drive?			es X No			
	(3) Provide a grant to an individual for ti	ravel, study, or other similar purpos	es?	Π̈́Υ	es 🗓 No			
	(4) Provide a grant to an organization o	• • • • • • • • • • • • • • • • • • • •				.		į
	section 509(a)(1), (2), or (3), or sect			□ Y	es 🗶 No			
	(5) Provide for any purpose other than		•	٠ ـــــ		. !		,
	purposes, or for the prevention of cr		.,,		'es 🕱 No	, }	1	,
b	If any answer is "Yes" to 5a(1)–(5), did a		under the excentions d			.	1	
-	Regulations section 53 4945 or in a curr				N/A	5b	İ	
	Organizations relying on a current notice	• •		c mandonoma).	▶ □			
С	If the answer is "Yes" to question 5a(4),						l	
·	because it maintained expenditure respe	•	on nom the tax	N/A 🗌 Y	es No			
	If "Yes," attach the statement required b	•			es [] 110			
6a	Did the foundation, during the year, rece	• •				.		f
va		erve any lunus, unectry of munectry,	to pay premiums		es X No	.		
	on a personal benefit contract?	and the second s			es X No	, <u>,  </u>  -	-	x
b	Did the foundation, during the year, pay	premiums, directly or indirectly, on	a personal benefit contr	act /		6b		
_	If "Yes" to 6b, file Form 8870			п,	, F	.		
	At any time during the tax year, was the				es X No	ı <u></u> -l		ı
b_	If Yes, did the foundation receive any pr				N/A	7b		
Pā		fficers, Directors, Trustees	, roundation iviana	agers, Highly	Paid Employ	æs,		
	and Contractors	- d-4: d 4b:		- f 4h - i 4 4i				
<u> 1 L</u>	ist all officers, directors, trustees, four	ndation managers and their comp	ensation (see page 22	of the instruction	<del> </del>			
			(b) Title, and average	(c) Compensation	<ul><li>(d) Contributions to employee benefit</li></ul>	(e) Exr	oense ad	ccount.
	(a) Name and	address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		r allowar	
				- ,	compensation			
J.	Rex Parent	Fort Wayne	Chair			}		
46	25 N Washington Road	IN 46804	0.25	0	0	<b>├</b> ──		0
Ma	rcus J. Parent	Fort Wayne	Secretary					
14	704 Walnut Creek Drive	IN 46814	0.25	0	О	├─		0
J	R Parent II	Boca Grande	Treasurer	,				
P	0 Вож 980	FL 33921	0.25	0	0	<u> </u>		0
Co	nnie J. Parent	Fort Wayne	Director					
46	25 N Washington Road	IN 46804	0.25	0	0	<u> </u>		0
2	Compensation of five highest-paid en	ployees (other than those include	ed on line 1 — see pag	e 23 of the instru	ctions).			
	If none, enter "NONE."							
			(b) Title, and average		(d) Contributions to employee benefit	(a) Ev	pense a	coount
	(a) Name and address of each empl	oyee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowa	
		·	devoted to position		compensation	<u> </u>		
NO	NE							
						L		
						<u></u>		
						<u></u>		
Tota	I number of other employees paid over \$	50,000						0
_								

Form 990-PF (20	Parent Family Foundation, Inc.	27-4330403	Page 7
Part VIII	Information About Officers, Directors, Trustees, Found and Contractors (continued)	ation Managers, Highly Paid Em	ployees,
3 Five highe	est-paid independent contractors for professional services (see page 2	3 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) Compensation
NONE			
Total number of			
lotal number of	others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	n's four largest direct charitable activities during the tax year. Include relevant statistical diother beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 N/A			
2		-, -, -, -	
3			
4			
Part IX-B	Summary of Program-Related Investments (see page		<del></del>
	largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
1 <b>N/A</b>			
2			
All other program	related investments See page 24 of the instructions		

Total. Add lines 1 through 3

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Form **990-PF** (2010)

3a

<u>3b</u> 4

5

b

5

Part XIII* Undistributed Income (see page 26 of the instructions)  1 Distributable amount for 2010 from Part XI,	Forn	990-PF (2010) Parent Family Foundati		27-433040	13	Page <b>9</b>
1 Distributable amount for 2010 from Part XI.	<u>Pa</u>	art XIII Undistributed Income (see page 26 o	f the instructions)	)		
Lendstributed mome, if any, as of the end of 2010  Better amount for 2009 only  Total of prior years 20		B. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	1 ' '	1 '' 1		, ,
2 Undistributed moome, if any, as of the end of 2010 a Enter amount for 2009 only b Total for proxy years 20  20  ,20  30  30  30  30  30  30  30  30  30	1		Corpus	rears prior to 2009	2009	
a Enter amount for 2000 only b Total for pury years 20	2					202
b Total for prorryeass 20  20  20   a From 2005 c From 2005 c From 2006 c From 2008 d From 2008 f Total of lines 3 at through e		-				
3 Excess distributions carryover, if any, to 2010 a From 2005 b From 2007 c From 2008 f Total of lines 3a through e Qualifying distributions for 2010 from Part XIII, Ine 4 P \$\frac{3}{2}\$ a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required—see page 26 of the instructions) c Treated as distributions out of corpus 6 Applied to 2010 distributions amount 6 Remaining amount distributed out of corpus 6 Excess distributions carryover spiled to 2010 (if an amount appears in column (a)) 6 Enter the not total of each column as indicated below. 7 Corpus Add rine 31 4c, and 4e Subtract line 4b from year's undistributed income Subtract line 4b from line 2b 7 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 6 Subtract line 6c from line 6b Taxable amount must be distributed income for which a notice of from line 12 to tax has been previously assessed 7 Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions 8 Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions 9 Lecass distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) 9 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) 9 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) 9 Excess from 2008		•				
a From 2006 b From 2007 d From 2008 c From 2008 f Total of lines 3a through e  Qualifying distributions for 2010 from Part XII, line 4 ▶ \$  Applied to 2009, but not more than line 2a b Applied to 2009, but not more than line 2a b Applied to 2009, but not more of prior years (Election required—see page 26 of the instructions) c Treated as distributions out of corpus (Election required—see page 26 of the instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus Excess distributions carryver applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 31, 40, and 4e Subtract line 5 b Prior years' undistributed momes Subtract line 4b from line 2b line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been saued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6b from line 6b Taxable amount—see page 27 of the instructions e Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b) (110° of 4942(a)) tax the shee page 27 of the instructions) Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) Excess distributions carryover from 2011. Subtract lines 7 and 8 from line 6 Excess from 2006 Excess from 2006 Excess from 2006 Excess from 2006 Excess from 2008	_					
c From 2007 d From 2008 e From 2008 f Total of lines 3 at through e Qualifying distributions for 2010 from Part XII, Ine 4 ▶ \$ A Applied to 2009, but not more than line 2a b Applied to 2009, but not more than line 2a c Applied to 2009, but not more than line 2a b Applied to 2009, but not more than line 2a c Applied to 2009, but not more than line 2a c Applied to 2009, but not more than line 2a c Applied to 2009, but not more than line 2a c Applied to 2010 distributions cut of corpus (Election required—see page 26 of the instructions) d Applied to 2010 distributions cut of corpus c Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a)) c Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed morems Subtract line 4b from line 2b c Enter the net rotal of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed morems Subtract line 4b from line 2b c Enter the net rotal of each column as horizon to the subtract line 4b from line 2b c Enter the net rotal of each column as horizon to the subtract line 4b from line 2b c Enter the access the subtract line 5 d announ—see page 27 of the instructions e Undistributed income for 2010 Subtract line 4a from line 2 a Taxable amount—see page 27 of the instructions d and 5 from line 1 This amount must be distributed income for 2010 Subtract line 4a from line 2 a Taxable amount—see page 27 of the instructions b Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions)  Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions)  Excess from 2006 b Excess from 2006 b Excess from 2006 b Excess from 2006 c Excess from 2006	а	From 2005				
d From 2009 From	b	From 2006				
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distributed in 2011  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 2005 not applied on line 5 or line 7 (see page 27 of the instructions)  9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9  a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009	f	Undistributed income for 2010 Subtract lines				
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 2005 not applied on line 5 or line 7 (see page 27 of the instructions)  9 Excess distributions carryover to 2011.  Subtract lines 7 and 8 from line 6a  10 Analysis of line 9  a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009		4d and 5 from line 1 This amount must be				
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 2005 not applied on line 5 or line 7 (see page 27 of the instructions)  9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9 a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009		distributed in 2011				202
170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)  8	7	Amounts treated as distributions out of corpus				
Instructions)  8  Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions)  9  Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a  10  Analysis of line 9  a  Excess from 2006 b  Excess from 2007 c  Excess from 2008 d  Excess from 2009		to satisfy requirements imposed by section				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) 9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009		170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
applied on line 5 or line 7 (see page 27 of the instructions)  9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9 a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009		•				
Instructions	8					
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9 a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009		· · · · · ·				
Subtract lines 7 and 8 from line 6a  10 Analysis of line 9  a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009	_	•				
10 Analysis of line 9 a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009	9					
a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009	40				<u></u>	
b Excess from 2007 c Excess from 2008 d Excess from 2009		·				
c Excess from 2008 d Excess from 2009	_		1			
d Excess from 2009	_		-			
	-		1			
	_		1			

3 Grants and Contributions Paid During the	Year or Approved for F	1	1	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	reapient		
a Paid during the year				
N/A				
			1	
			1	
Total		T	▶ 3a	
b Approved for future payment N/A				
N/A				
			1	
 Total			▶ 3b	···
IUIdi			<b>₽</b> 3D	

	Part XVI-A	Analysis of Income-Producing A	ctivities				
En	ter gross amo	unts unless otherwise indicated	Unrelate (a) Business code	(b) Amount	(c) Exclusion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of
1	Program ser	vice revenue			code		the instructions)
	a						
	b		_				
			_				
		<u> </u>	_				<del></del>
			_				
	f	<u> </u>					
	g Fees an	d contracts from government agencies					
2	Membership	dues and assessments					
3		avings and temporary cash investments					
4	Dividends a	nd interest from securities					
5	Net rental in	come or (loss) from real estate					
	a Debt-fin	anced property					
	b Not deb	t-financed property					
6	Net rental in	come or (loss) from personal property					
7	Other invest	ment income					
8	Gain or (loss	s) from sales of assets other than inventory					
9	Net income	or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory					
11	Other reven	ue <b>a</b>					
			_				
		<u> </u>					
			_				
	е		_				
12	Subtotal Ad	d columns (b), (d), and (e)			0	0	
13	Total. Add li	ne 12, columns (b), (d), and (e)				13	0
		in line 13 instructions on page 29 to verify calcula					· · · · · · · · · · · · · · · · · · ·
_	Part XVI-B	Relationship of Activities to the	<u>Accomplishn</u>	nent of Exempt	<u>Purpose</u>	es	
	Line No. ▼	Explain below how each activity for which incol accomplishment of the foundation's exempt pu instructions)					
_	N/A						
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_	A			-			Form <b>990-PF</b> (2010
DA	M						-om 33U-FF (2010

Preparer's signature

Thomas S. Danford, C.P.A.

Angola, IN

6850 West South Lake Gage Drive

46703

Thomas S. Danford

2	<u>60-</u>	<u>83</u>	3-	1	10	0
	Form	99	0-P	F	(20	10)

P00625800

Check X If

self-employed

Date

PTIN

05/10/11

Firm's EIN ▶ 35-1636436

Here

Paid

**Use Only** 

Signature of officer or trustee Print/Type preparer's name

Preparer Thomas S. Danford

Firm's address

Firm's name

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

2010

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Parent Famil	y Foundation, Inc.	27-4330403
Organization type (check		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	e foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private for	undation
	501(c)(3) taxable private foundation	
• •	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . (2)(7), (8), or (10) organization can check boxes for both the General Rule	le and a Special Rule See
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5, one contributor. Complete Parts I and II	,000 or more (in money or
Special Rules		
sections 509(a)(1)	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), and received from any one contributor, during the 00 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form	e year, a contribution of the
the year, aggregat	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received free contributions of more than \$1,000 for use exclusively for religious, chases, or the prevention of cruelty to children or animals. Complete Parts	aritable, scientific, literary, or
the year, contributi aggregate to more year for an exclusi	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from for use exclusively for religious, charitable, etc., purposes, but thes than \$1,000. If this box is checked, enter here the total contributions the vely religious, charitable, etc., purpose. Do not complete any of the partial because it received nonexclusively religious, charitable, etc., can be caused in the contribution of the partial because it received nonexclusively religious, charitable, etc., can be caused in the contribution of the partial because it received nonexclusively religious, charitable, etc., can be caused in the contribution of the partial because it received nonexclusively religious, charitable, etc., can be caused in the contribution of the partial because it received nonexclusively religious, charitable, etc., can be contributed in the contribution of the partial because it received nonexclusively religious, charitable, etc., can be contributed in the contribution of the partial because it received nonexclusively religious, charitable, etc., can be contributed in the contribution of the partial because it received nonexclusively religious, charitable, etc., can be contributed in the contribution of the partial because it received nonexclusively religious, charitable, etc., can be contributed in the contri	se contributions did not nat were received during the ts unless the <b>General Rule</b>
990-EZ, or 990-PF), but it i	that is not covered by the General Rule and/or the Special Rules does not must answer "No" on Part IV, line 2 of its Form 990, or check the box of to certify that it does not meet the filing requirements of Schedule B (Fo	on line H of its Form 990-EZ, or on

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

**Employer identification number** Name of organization Parent Family Foundation, Inc. 27-4330403 Part I Contributors (see instructions) (a) (d) Type of contribution No. Name, address, and ZIP + 4 Aggregate contributions 1 Connie J. Parent Person 4625 N. Washington Road Payroil 100,052 X \$ Noncash Fort Wayne IN 46804 (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (a) (b) (d) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution No. Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Aggregate contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution )

Page 1 of 1 of Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Page 1 of 1 of Part II Name of organization Employer identification number Parent Family Foundation, Inc. 27-4330403 Part II Noncash Property (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) 3270 Shs Vanguard Total Stock Mk 1 99,702 12/28/10 \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$

PARENTFAMIL Parent Family Foundation, Inc.

27-4330403 Federal Statements

FYE: 12/31/2010

# Statement 1 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Descri	~*.~~
I JESCHI	
	~

		Beginning of Year	 End of Year	Basis of Valuation		Fair Market Value
Trust Company of Oxford	1050047376					
	\$		\$ 99,637	Market	\$_	99,637
Total	\$	0	\$ 99,637		\$_	99,637

### Statement 2 - Form 990-PF, Part III, Line 5 - Other Decreases

Description					_	Amount		
Unrealized	Decrease	in	Market	Value	of	Investments	\$	65
Total							\$_	65

5/10/2011 12:49 PM

5/10/2011 12:49 PM · ന City, State, Zip Statement 3 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors Fort Wayne IN 46804 Federal Statements 4625 N. Washington Road Address PARENTFAMIL Parent Family Foundation, Inc. Name Connie J. Parent FYE: 12/31/2010 27-4330403

PARENTFAMIL Parent Family Foundation, Inc.
27-4330403 Federal Statements

5/10/2011 12:49 PM

FYE: 12/31/2010

# Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	 Amount
Connie J. Parent	\$ 100,052
Total	\$ 100,052