

#### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# ള **6**V SCANIFI MAY

Department of the Treasury

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

Treated as a Private Foundation

OMB No 1545-0052

		Note. The foundation may be able		i to satisfy st	ate reporting	requirements	
			ind ending	oborit:		Final return	
GC	neck a		turn of a former public	$\overline{}$	L obacca	rinal retum	
			ress change	Name	change	oyer identification num	ther
		oundation R. & MARY JANE SCHNEIDER			1 -	-1885368	i.Jei
		LY FOUNDATION, INC.				hone number (see page 1	(O of the instructions)
				am/aulta		2-824-1032	io or the manachema)
		nd street (or P O box number if mail is not delivered to street addres	is) Ro	om/suite		mption application is pend	ting check here
		HAWKS WAY		·	1	rripuon application is perio reign organizations, chec	·
	•	n, state, and ZIP code MINGTON IN 47401			1	•	
		type of organization. X Section 501(c)(3) exempt private	foundation			reign organizations meeti % test, check here and a	
_			e private foundation			ate foundation status was	
		rket value of all assets at J Accounting method:	Cash X Acc		-	on 507(b)(1)(A), check her	<b>▶</b>   1
			Casii [22] ACG	Jai	F If the	foundation is in a 60-mon	th termination
			he on cach hacie \	•		r section 507(b)(1)(B), che	
	ne 16)   art	Analysis of Revenue and Expenses (The total of	(a) Revenue and			· · · · · · · · · · · · · · · · · · ·	(d) Disbursements
£~	234.8	amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Netin	vestment	(c) Adjusted net	for charitable
		the amounts in column (a) (see page 11 of the instructions) )	books	inc	ome	income	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	4,079				100011
	2	Check ► X If the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	3,366		3,366		
	5a	Gross rents					77
45	b	Net rental income or (loss)					
ž	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	-62,954		11	,	
Revenue	ь	Gross sales price for all assets on line 6a 70,804					
	7	Capital gain net income (from Part IV, line 2)			0	1,,,,,	
	8	Net short-term capital gain				0	
	9	Income modifications	,		, ,		
	10a	Gross sales less return & lowards/					
	b	Less. Cost of goods sold		,			
	С	Gross profit op(loss) (attach schedule)					
	11	Other income attach schedule					
	12	Total. Add lines 1-through 11	-55,509		3,366	0	
	13	Compensation of officers of core, trustees, etc.	0				
enses	14	Other employee salaries and wages					
e	15	Pension plans, employee benefits					
, X	16a	Legal fees (attach schedule)					
	ь	Accounting fees (attach schedule) STMT 2	555				<u> </u>
, <u>×</u>	С	Other professional fees (attach schedule)					<u></u>
and Administrative Exp	17	Interest		ļ			<u> </u>
is	18	Taxes (attach schedule) (see page 14 of the instructions) STMT 3	84			ļ	
<u>=</u>	19	Depreciation (attach schedule) and depletion					
Ď	20	Occupancy .		<u> </u>			<del> </del>
þ	21	Travel, conferences, and meetings					<del> </del>
a	22	Printing and publications					
	23	Other expenses (att. sch.) STMT 4	2,001	<del> </del>			
計	24	Total operating and administrative expenses.			^		
Operating	1	Add lines 13 through 23	2,640		0	(	3,456
ဝီ	25	Contributions, gifts, grants paid	3,456				
_	26	Total expenses and disbursements. Add lines 24 and 25	6,096	<u> </u>	0		3,430
	27	Subtract line 26 from line 12:	" 61 6AF	1			
	a	Excess of revenue over expenses and disbursements	-61,605	-	3,366		
	b	Net investment income (if negative, enter -0-)		<del>] · · · ·</del>	3,300	(	1
	C	Adjusted net income (if negative, enter -0-)	F	<u> </u>		<u> </u>	T

Page 2

_		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of	f year
_	Part II	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash—non-interest-bearing	583	577	577
١	2	Savings and temporary cash investments	347	1,101	1,101
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
1	4	Pledges receivable ▶			,
	-	Less: allowance for doubtful accounts ▶			
ı	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			<del></del>
	•	disqualified persons (attach schedule) (see page 15 of the			
- 1		instructions)			
	7	Other notes and loans receivable (att. schedule)			
	•	Less: allowance for doubtful accounts			
S	8	Inventories for sale or use			
šį	9	Prepaid expenses and deferred charges			
Assets	-	Investments—U.S. and state government obligations (attach schedule)			
٦	10a		133,757	71,404	70,818
1	b		2337.37	, 2, 00 _	
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment. basis	İ		
		Less accumulated depreciation (attach sch )			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment. basis			
		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ▶ )			<del></del>
	16	Total assets (to be completed by all filers—see the	124 607	72 002	72,496
_		instructions. Also, see page 1, item I)	134,687	73,082	12,390
	17	Accounts payable and accrued expenses			
S	18	Grants payable			•
ij	19	Deferred revenue			-
豆	20	Loans from officers, directors, trustees, and other disqualified persons			-
Liabilities	21	Mortgages and other notes payable (attach schedule)			-
_	22	Other liabilities (describe ▶ )			-
_	23	Total liabilities (add lines 17 through 22)	0		4
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
ınc	24	Unrestricted	<del></del> -		
or Fund Balances	25	Temporarily restricted			1
Õ	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here ▶ X			
교		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds			1
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund			1
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	134,687	73,082	4
As	30	Total net assets or fund balances (see page 17 of the			
et		instructions)	134,687	73,082	
Ž	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	134,687	73,082	<u></u>
_	Part	Analysis of Changes in Net Assets or Fund Balances		<del>_</del>	
1	Tota	net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	st agree with		
		of-year figure reported on prior year's return)		<u>1</u>	134,687
2		r amount from Part I, line 27a		2	-61,605
		r increases not included in line 2 (itemize)		3	<u> </u>
		lines 1, 2, and 3	•	4	73,082
		eases not included in line 2 (itemize) ▶		5_	
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, column	(b), line 30		73,082
_					Form 990-PF (2010)

<sup>2</sup> g 5	C WARY TANK GOVERN	.ED	25 1005260		
The state of the s			32-1003300	_	Page
(a) List and describ	e the kind(s) of property sold (e g , real estate	),	P—Purchase		
1a N/A		<del></del>	D Donadon		
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,,	· ·		
a					
_b		ļ <u> </u>			
<u> </u>		<del>                                     </del>			
<u>d</u>					
Complete only for assets showin	grain in column (h) and owned by the	foundation on 12/	31/69		
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	xcess of col (i)	col (k)	, but not less than -0-) or
a					
b		· - · -			
С					
d				_	
е	tice (1) Depreciation allowed (a) Cost or other basis (or allowable) (or allowable) (or allowable) (b) Plus expense of sale (b) Plus (f) minus (d) (b) Plus (f) minus (d) (f) Gain or (loss) (e) plus (f) minus (d) (f) Gain or (loss) (e) plus (f) minus (d) (f) Gain or (loss) (f) Ga				
	apital loss)	n Part I, line 7 (6):	<u> </u>	2	
If (loss), enter -0- in Part I, line 8		<del></del>	[	3	
				16	
If section 4940(d)(2) applies, leave th Was the foundation liable for the sec	is part blank. tion 4942 tax on the distributable amou	nt of any year in t			Yes X No
	<u> </u>				
(a) Base penod years	(b)		(c)		Distribution ratio
Calendar year (or tax year beginning	117			`	
<u>2009</u> 2008					
2007					
2006					
2005					
2 Total of line 1, column (d)				2	0.35284
3 Average distribution ratio for the	5-year base period—divide the total on	line 2 by 5, or by	the		_
number of years the foundation h	as been in existence if less than 5 yea	rs		. 3	0.07056
4 Enter the net value of noncharita	ble-use assets for 2010 from Part X, lin	e 5		. 4	77,263
5 Multiply line 4 by line 3		_		5	5,45

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

5,486

3,456

7 Add lines 5 and 6

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

8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18.

	990-PF (2010) RON R. & MARY JANE SCHNEIDER 35-1885368		Pa	ge <b>4</b>
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions	<u> </u>		
1a	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) 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			<u>67</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-)			_0
3	Add lines 1 and 2			67
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-			67
6	Credits/Payments:			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a			
b	Exempt foreign organizations—tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u>67</u>
10	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 ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a	$\longrightarrow$	<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		- 1	
	of the 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.			77
С	Did the foundation file Form 1120-POL for this year?	1c		X
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	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		:	
	on foundation managers.   \$			X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
_	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	3		x
4-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		x
4a	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b	_	
b 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
5	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:			
J	By language in the governing instrument, or		1	
	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	Х	
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
Va	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	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			<i>.</i>
-	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		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
_	names and addresses	10	L	X
		om 99	0-PF	(2010)

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 2010?

X

Form	990-PF (2010) RON R. & MARY J	JANE SCHNEIDER	35-1	885368			Page 6
Pa	rt VII-B Statements Regarding A	ctivities for Which Form	1720 May Be R	equired (conti	nued)		
5a	During the year did the foundation pay or incur	any amount to:	•				1
	(1) Carry on propaganda, or otherwise attemp	t to influence legislation (section 4	945(e))?	Y	es X No		
	(2) Influence the outcome of any specific publi	ic election (see section 4955); or t	o carry on,			•	
	directly or indirectly, any voter registration	drive?			es X No		-
	(3) Provide a grant to an individual for travel, s	study, or other similar purposes?		Y	es 🗓 No	1	1
	(4) Provide a grant to an organization other than	an a charitable, etc., organization	described in	. —		I	1
	section 509(a)(1), (2), or (3), or section 494	40(d)(2)? (see page 22 of the instr	ructions)	Y	es 🗓 No	ı	1
	(5) Provide for any purpose other than religiou	is, charitable, scientific, literary, or	educational	—	_	- 1	1
	purposes, or for the prevention of cruelty to				es X No	1	
b	If any answer is "Yes" to 5a(1)-(5), did any of t	the transactions fail to qualify unde	er the exceptions d	escnbed in			
	Regulations section 53.4945 or in a current no				N/A	5b	
	Organizations relying on a current notice regar				▶ [ ]		
С	If the answer is "Yes" to question 5a(4), does t				_		
	because it maintained expenditure responsibili	•		N/A 🗌 Y	es No		
	If "Yes," attach the statement required by Regu	• •	•	: —		Ī	
6a	Did the foundation, during the year, receive an	• •	av premiums			ł	1
-	on a personal benefit contract?	,,, c,, p.	, •		es X No		
b	Did the foundation, during the year, pay premiu	ums. directly or indirectly, on a per	rsonal benefit contr			6b	x
_	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the foundation	ation a party to a prohibited tax sh	elter transaction?		es X No	-	1
	If Yes, did the foundation receive any proceeds	• •			N/A	7b	
	Information About Officer					es.	
. •	and Contractors	<b>-,</b>					
1 1	lst all officers, directors, trustees, foundation	n managers and their compensa	tion (see page 22	of the instruction	5).		
					(d) Contributions to		
	(a) Name and address	s	(b) Title, and average hours per week	(c) Compensation (if not paid, enter	employee benefit		ense account, allowances
	, ,		devoted to position	-0-)	plans and deferred compensation	Outer	allowalices
RC	N R. SCHNEIDER	MARCO ISLAND	PRESIDENT				
	9 SAN MARCO RD, PO BOX 2573	FL 34146	1.00	اه	0		0
	SA L. SCHNEIDER	FISHERS	SECRETARY				
	053 HWTHORN RIDGE	IN 46037	1.00	٥	0		0
	N R. SCHNEIDER, II	BLOOMINGTON	TREASURER				<del></del>
	50 HAWKS WAY	IN 47401	1.00	٥	0		0
	OTT E. SCHNEIDER	PUNTA GORDA	VICE PRES.				
	1 COMO COURT	FL 33950	1.00	اه	0		0
2	Compensation of five highest-paid employed						
-	If none, enter "NONE."				,.		
			(1) T. (1)		(d) Contributions to		
	(a) Name and address of each employee pa	aid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,
	(a) Name and address of each employee pe	and more than \$55,555	devoted to position	(0) 00	plans and deferred compensation	other	allowances
	NB	<del></del>					
NC		••					
	· · · · · · · · · · · · · · · · · · ·						
	•						
				<del></del>		<b>-</b> -	
		••					
			<del> </del>	<del>                                     </del>		-	
	• •						
	<del></del>		+			<del> </del>	
	••					[	
		<del> </del>	<u> </u>				0
Tota	I number of other employees paid over \$50,000	'					<u> </u>

Part VIII			Page 7
•	And Contractors (continued)  Five highest-pald independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."  (a) Name and address of each person pald more than \$50,000  (b) Type of service  NONE  Lat number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities  stitle foundation four largest direct charitable activities during the tax year include relevant statistical information such as the number of reparations and other beneficianes served, conferences convened, research papers produced, etc  N/A  Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Personbe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  N/A  Ill other program-related investments. See page 24 of the instructions		
3 Five high	est-paid independent contractors for professional services (see page 23 of	the instructions). If none, enter "N	ONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		·	
otal number of	others receiving over \$50,000 for professional services		<b>&gt;</b>
Part IX-A	Summary of Direct Charitable Activities		
		formation such as the number of	Expenses
1 N/A			
2			
3			
	·		
4 .			
Part IX-B	Summary of Program-Related Investments (see page 24	of the instructions)	
Describe the two	<del></del>		Amount
1 N/A			
2	······································		
All other program	n-related investments See page 24 of the instructions		

▶

Total. Add lines 1 through 3

Form 990-PF (2010)

4

3,456

3,456

Amounts set aside for specific charitable projects that satisfy the:

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.

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.

Suitability test (prior IRS approval required)

3	5 -	18	8	53	6	8	

Page 9

Pa	rt X間 Undistributed Income (see	page 26 of	the instructions)			
1	Distributable amount for 2010 from Part XI,		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
	line 7					3,796
2	Undistributed income, if any, as of the end of 20	10:				
а	Enter amount for 2009 only		•		_	
	Total for prior years: 20 , 20 , 20		:			
3	Excess distributions carryover, if any, to 2010:		-			
а	From 2005	13,220			•	1
	From 2006	2,103			•	
	From 2007	-	:		•	
	From 2008	2,687				
-	From 2009	1,427			:	
	Total of lines 3a through e		19,437			
4	Qualifying distributions for 2010 from Part XII,					
•	line 4: ▶ \$ 3,456					
2	Applied to 2009, but not more than line 2a				•	
	Applied to undistributed income of prior years			1. 11		
	(Election required—see page 26 of the instruction	ne)	. 1			
_	Treated as distributions out of corpus (Election	113)			<del></del>	
·	required—see page 26 of the instructions)	·				
4	Applied to 2010 distributable amount					3,456
	Remaining amount distributed out of corpus					
			340		<u></u>	340
5	Excess distributions carryover applied to 2010		<u> </u>			
	(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:		10 007			
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		19,097			
D	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					
	amount—see page 27 of the instructions					
е	Undistributed income for 2009. Subtract line				•	
	4a from line 2a. Taxable amount—see page					
	27 of the instructions				,-	
f	Undistributed income for 2010. Subtract lines		:			
	4d and 5 from line 1. This amount must be					
	distributed in 2011					0
7	Amounts treated as distributions out of corpus					1
	to satisfy requirements imposed by section					1
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the					1
	instructions)					
8	Excess distributions carryover from 2005 not					
	applied on line 5 or line 7 (see page 27 of the					
	instructions)		12,880			<u> </u>
9	Excess distributions carryover to 2011.					1
	Subtract lines 7 and 8 from line 6a		6,217			1
0	Analysis of line 9:					1
a	Excess from 2006	2,103				1
b	Excess from 2007					
С	Excess from 2008	2,687				
d	Excess from 2009	1,427		•		1
е	Excess from 2010		,			1

Pa	rt XIV Private Operating For	ındations (see p	age 27 of the inst	ructions and Part	VII-A, question 9	)
1a	If the foundation has received a ruling or	determination letter th	nat it is a private opera	ting		
	foundation, and the ruling is effective for	2010, enter the date of	of the ruling	<b>&gt;</b>	_	
b	Check box to indicate whether the foundation			bed in section 49	942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for				<u>_</u>	
	each year listed		}			}
ь	85% of line 2a					
c	Qualifying distributions from Part XII,					
C	• •					
	line 4 for each year listed			<del> </del>		
d	Amounts included in line 2c not used directly					ļ
_	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c	<del></del>		<del></del>		
3	Complete 3a, b, or c for the		}			,
	alternative test relied upon:					
а	"Assets" alternative test—enter:					}
	(1) Value of all assets		ļ			
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					ļ
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		1			
	investment income (interest,		[			ĺ
	dividends, rents, payments on					ļ
	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)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	ार् XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5.000 or mor	e in assets at
	any time during the ye	•	•			
1	Information Regarding Foundation Mai					
а	List any managers of the foundation who	=	e than 2% of the total	contributions received	by 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 stock of a corpora	tion (or an equally large	portion of the	
	ownership of a partnership or other entity		· · · · · · · · · · · · · · · · · · ·		•	
	N/A	,				
2	Information Regarding Contribution, G	rant, Gift. Loan. Scho	olarship. etc Program	ms:		
			-	ble organizations and d	loes not accept	
	unsolicited requests for funds. If the foun		•	_		
	organizations under other conditions, cor					
а	The name, address, and telephone numl			ld he addressed:		
u	RON R. SCHNEIDER, I	•	полт аррисацона эпос	iid de addressed.		
	4650 HAWKS WAY BLOOM		47401			
<b>h</b>				ev chould indude:		
b	The form in which applications should be PURPOSE, ORGANIZATIO			~		
		W WILL THY	PVDMLI DIWI			<del></del>
С	Any submission deadlines: N/A					
		auch oc hu occes	ical areas, shortshir f	ields kinds of institution	ns or other	
d	Any restrictions or limitations on awards,	such as by geograph	icai areas, chantable f	ieius, Kinus OI Insuluuo	ns, or other	
	factors: SEE STATEMENT 6					
	COR DIVIDUDUI 0					

Part XV Supplementary Information (Co	ontinued)			
Part XV Supplementary Information (co 3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment	<del></del>	
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	Touplant		
a Paid during the year SEE STATEMENT 7				
SEE STATEMENT /				3,456
				3,430
			1 1	
			1	
			1	
			1	
Total	<u> </u>		. ▶ 3a	3,456
b Approved for future payment				
N/A				
<del></del>		<u> </u>		
Total			<b>&gt;</b> 3b	

DAA

Part XVI-A	Analysis of Income-Producing Ac	tivities				
	ounts unless otherwise indicated.		d business income	Exclude	d by section 512, 513, or 514	(e)
·		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program sei						the instructions )
				†	<u> </u>	
				<del> </del>		
ď	·	-				
				<del>                                     </del>		
f				1		
· -	nd contracts from government agencies	-		<del>                                     </del>		
	o dues and assessments			†	-	
	savings and temporary cash investments	-		1		<del></del>
	nd interest from securities	-		14	3,366	
	•				3,300	
	ncome or (loss) from real estate:			+		
	anced property			<del>                                     </del>		
	t-financed property			1	<del>                                     </del>	
	ncome or (loss) from personal property		-	+		<del> </del>
7 Other invest				+ -		-62,95
	s) from sales of assets other than inventory			+		- 02,33
	or (loss) from special events			+		
	or (loss) from sales of inventory			+		·· <del>·</del>
	ue: a	-		<del> </del>		
		-		<del>                                     </del>	· · · · · ·	
·	<del></del>	•		<del>                                     </del>		<del></del>
		·		+		<del></del>
ee	dd aslumas (b) (d) and (s)	-		):	3,366	-62,95
	dd columns (b), (d), and (e)	.,	l	۰ <u>۴</u>		
	ine 12, columns (b), (d), and (e)		•		. 13 _	-39,30
	in line 13 instructions on page 29 to verify calculat		ant of Evennt S			
Part XVI-B	Relationship of Activities to the A  Explain below how each activity for which incom					
Line No. ▼	accomplishment of the foundation's exempt purp					
•	instructions.)	,0000 (0110) 1101	r by providing lando it	эг о <b>цо</b> гт р	a.poooo,, (ooo pago ac	5. 2.0
N/A		· · · · · · · · · · · · · · · · · · ·				
					<del> </del>	
·-			<u> </u>			
		-				
				_		
_	<del>-</del>					
					<del></del>	· · · · · · · · · · · · · · · · · · ·
					<del></del>	<del></del>
			<del>.</del>			
		<del></del>				
			<del>-</del> -	-		
			<del></del>	_		
DAA						Form <b>990-PF</b> (201

			IANE SCHNEIDER		35-1885368		<u>_Pa</u>	ge 1
	Information Rega	_	ansfers To and Transa	ctio	ns and Relationships With Noncharita	able		
			ge in any of the following with	anv o	ther organization described	1	Yes	No
-	•		on 501(c)(3) organizations) or	-				
organization	• •	.,	00 .(0)(0) 0.ga22200) 0.		The state of the s			
•		ation to a no	ncharitable exempt organizat	ion of	:		į	
(1) Cash						1a(1)	l	X
(2) Other as	ssets		•			1a(2)		X
b Other transa			•		•		-	Γ
(1) Sales of	assets to a noncharita	able exempt	organization			1b(1)		X
• •	es of assets from a no	•	•			1b(2)		X
(3) Rental o	of facilities, equipment,	or other ass	sets			1b(3)		X
(4) Reimbur	rsement arrangements	3		•		1b(4)		X
(5) Loans of	r loan guarantees					1b(5)		X
(6) Perform	ance of services or me	embership o	r fundraising solicitations			1b(6)		X
c Sharing of fa	acilities, equipment, m	ailıng lists, o	ther assets, or paid employee	es		1c		X
d If the answe	r to any of the above is	s "Yes," com	plete the following schedule.	Colur	nn (b) should always show the fair market			
					the foundation received less than fair market			
					the goods, other assets, or services received.			
(a) Line no	(b) Amount involved	(c) Name	of nonchantable exempt organizat	ion	(d) Description of transfers, transactions, and share	ring arrang	ement	s
/A								
						_		
							_	
	<u> </u>							
a is the found	ation directly or indired	ctly affiliated	with, or related to, one or mo	re tax	exempt organizations		-	<b>-</b>
described in	section 501(c) of the	Code (other	than section 501(c)(3)) or in s	sectio	n 527? <sub>.</sub>	Y	es 2	Z] No
b If "Yes," con	nplete the following so	hedule.						
	Name of organization		(b) Type of organization		(c) Description of relationship			
N/A								
	<del></del>							
Under pe	alues of penury I declar	e that I have e	xamined this return, including acco	mpan	ying schedules and statements, and to the best of my kno ciary) is based on all information of which preparer has a	wiedge an	id Ide	
gn belieft it i	s true, correct, and compl	ever Lieciaratio		or nau	1/// Subsection all information of which preparer has a	IIÀ KUOMISC	190	
ere	$A \subseteq Y \cap M \setminus X$	4	ras. 1	15				

Preparer's signature

BUECHLEIN & ASSOCIATES,

47547-0519

PO BOX 519

JASPER, IN

812-482-3535 Form 990-PF (2010)

Check \_\_\_\_ rf

self-employed

Date

5-10-11

Firm's EIN ▶ 35 - 1387485

Phone no

P00098763

Paid

**Use Only** 

Print/Type preparer's name

Preparer CHARLES A. BUECHLEIN

Firm's name

Firm's address ▶

35-1885368			Federal Statements	atements			Page 1
		Statement 1	- Form 990-PF, Part I, Line 6a	ırt I, Line 6a - Sale	- Sale of Assets		,
Desc	Description		How Received				
Whom	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss
	INC CL B 12/28/93	10/05/10 \$	PURCHASE 2,964 \$	3,875 \$	w.		\$ -911
INTERNATIONAL	12/28/93	10/05/10	3,020	3,875			-855
INTERNATIONAL	355	10/02/10	22,529	44,099			-21,570
	7/06/94	10/02/10	4,150	8,124			-3,974
KIMBALL INTERNATIONAL	INC CL B 7/06/94	10/02/10	38,141	73,785			-35,644
TOTAL		\$	70,804 \$	133,758 \$	w 0	0	\$ -62,954
Description	<i>-</i>	Statement 2 - F	corm 990-PF, Part Total	Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees  Net Total Investment	unting Fees Adjusted Net	,	Charitable Purpose
PROFESSIONAL FEES		Ω	555	\$	ঞ	\$	
TOTAL		\$	555	\$	w	\$	0
		Statement 3		- Form 990-PF, Part I, Line 18 - 1	- Taxes		
Description			Total	Net Investment	Adjusted Net		Charitable Purpose
US TREASURY INDIANA SECRETARY OF S	STATE	<b>የ</b> ን	74 10	₩	₩	ጭ	1
TOTAL		φ.	84	ه 0	တ	\$   0   0	0
						,	1-3

.

Page 2	Charitable Purpose \$
	Adjusted Net S
ederal Statements	Net Investment
Federal	Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses    Net
35-1885368	EXPENSES LIFE INSURANCE PREMIUM BANK CHARGES MERRILL LYNCH FEE TOTAL

.

35-1885368

## **Federal Statements**

Page 3

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

_		
Des	Crin	tion

		Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
KIMBALL INTERNATIONAL	\$	133,757 \$		\$	
MORGAN STANLEY	_		71,404		70,818
TOTAL	\$_	133,757 \$	71,404	\$_	70,818

### **Federal Statements**

Page 4

#### Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

PURPOSE, ORGANIZATION AND TAX EXEMPT STATUS

#### Statement 6 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

LIMITED TO CHARITABLE, EDUCATIONAL, AND SCIENTIFIC CAUSES DOES NOT OFFER SCHOLARSHIPS

35-1885368	Fe	Federal Statements	ments	Page 5
Statement 7	Statement 7 - Form 990.PF Part )	7 - S ou I V	nts and Contributions Paid During the	,
		Year	Year Year	•
Name	Address			
Address	Relationship	Status	Purpose	Amount
SAN MARCO CATHOLIC CHURCH		RELIGIOUS	FINANCIAL SUPPORT	187
GOOD SHEPRED SCHOOL FUND		EDUCATION	FINANCIAL SUPPORT	200
NAPLES CENTER FOR ART		EDUCATION	FINANCIAL SUPPORT	150
STEINWAY PIANIO SOCIETY		EDUCATION	FINANCIAL SUPPORT	1,000
CATHOLIC FAITH APPEAL		RELIGIOUS	FINANCIAL SUPPORT	69
ST. CHARLES BORROMEO		EDUCATION	FINANCIAL SUPPORT	200
MARCO ISLAND DISCOVERY CE		EDUCATION	FINANCIAL SUPPORT	100
EARLY CHILDHOOD ACADEMY I		EDUCATION	FINANCIAL SUPPORT	009
ABUSED SHELTER WOMEN & CH		EDUCATION	FINANCIAL SUPPORT	100
ST. MAHEW HOUSE		EDUCATION	FINANCIAL SUPPORT	100
REACH OUT EVERGLADES		EDUCATION	FINANCIAL SUPPORT	250
ST. VINCENT DEPAUL		EDUCATION	FINANCIAL SUPPORT	100
KNIGHTS OF COLUMBUS		EDUCATION	FINANCIAL SUPPORT	100
MOD .		EDUCATION	FINANCIAL SUPPORT	100
EDUCATION FOUNDATION OF		EDUCATION	FINANCIAL SUPPORT	100
NEIGHBORHOOD HEALTH CLINI		EDUCATION	FINANCIAL SUPPORT	100