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Form 990-PF

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

20	1	N
$\angle w$		U

F	or cal	endar year 2010, or tax year beginning		05/	01 , 2010 ,	and ending	1	04/30,2011
G	Che	ck all that apply: Initial return		Initial return	of a former p	ublic charity		Final return
		Amended return		Addres	ss change	×	Name change	
N	ame o	f foundation					A Employer identific	ation number
_		DODGE TRUST FOR OLD PE	OPL	E 480006014			35-	0888764
N	umbei	r and street (or P O box number if mail is not deliver	ed to s	street address)		Room/suite	B Telephone number (s	ee page 10 of the instructions)
<u> </u>		P.O. BOX 1602						4) 235-2790
C	ty or t	town, state, and ZIP code					C If exemption applicat pending, check here	ion is
							D 1 Foreign organization	ons, check here . 🕨 🔃
_		SOUTH BEND, IN 46634					2 Foreign organization 85% test, check he	
H		ck type of organization: X Section 50°	(<u>د)(3</u>				computation •	
1		ection 4947(a)(1) nonexempt charitable trust		Other taxable pri			E If private foundation	status was terminated
ı		1,		ng method: X Ca	ash Acc	rual	under section 507(b)	(1)(A), check here . 🕨 🔛
	•			(specify)				a 60-month termination
				umn (d) must be or	n casn basis.)		under section 507(b)	(1)(B), check here
Ŀ	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	e	(a) Revenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in		expenses per books	incom	ie	ıncome	purposes
_		column (a) (see page 11 of the instructions))	+					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to	\vdash					
	2	Check ▶ attach Sch B	-					
	3	Interest on savings and temporary cash investments		6,003.		6,003.	6,003.	STMT 1
	4	Dividends and interest from securities		0,003.		0,003.	0,005.	SIMI_I
		Gross rents				+		
	ł	Net rental income or (loss)	-	-3,730.				
iue	Ба			<u> </u>				
Revenue	7	Capital gain net income (from Part IV, line 2)						
æ	8	Net short-term capital gain						
	9	Income modifications						
	10 a	Gross sales less returns and allowances	1			_		
		Less Cost of goods sold .	3 (C)					
	1	Gross profit or (loss) (attach, schedule)	199					
	11	Other income (attage) schedule) 2011						
: _	12	Total. Add lines 1 through 11	0	2,273.		6,003.	6,003.	
> _	13	Compensation of officers, directors, viustaes, etc.		_2,135.		1,068.		
	14	Compensation of officers, directors visiteds, etc	士	لا ل				
ses	15	Pension plans, employee benefits	<u> </u>					
en	16a	Legal fees (attach schedule) STMT . 2	ļ	1,376.		NONE	NONE	NONE NONE
Expenses	Ь	Accounting fees (attach schedule) STMT 3		950.		950.	NONE	NONE NONE
		Other professional fees (attach schedule)						
and Administrative	17	Interest	-					
istr	18	Taxes (attach schedule) (see page 14 of the instructions)			ļ <u></u>			
nie E	19	Depreciation (attach schedule) and depletion	-					
Ā	20	Occupancy						· · · · · · · · · · · · · · · · · · ·
ק	21	Travel, conferences, and meetings						
		Printing and publications						
Operating	23	Other expenses (attach schedule)				-		
Prai	24	Total operating and administrative expenses		1 161		2 010	MONTE	NOND
Õ	1	Add lines 13 through 23		4,461. 6,153.		2,018.	NONE	NONE
_	25	Contributions, gifts, grants paid		10,614.		2,018.	NONE	6,153. 6,153.
-	26	Total expenses and disbursements Add lines 24 and 25	\vdash	10,014.		4,010.	INOINE	0,133.
	27	Subtract line 26 from line 12		-8,341.				
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	<u> </u>	0,541.	1	3,985.		
	1	Adjusted net income (if negative, enter -0-)				-,,,,,	6,003.	
_	<u> </u>	rialanten ner menme (n negative, enter .0.).	<u>' </u>				<u> </u>	

For Paperwork Reduction Act Notice, see page 30 of the instructions. 0E1410 1 000 GP1813 A491 06/08/2011 14:07:33

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16 Total assets (to be completed by all filers - see the	Value
2 Savings and temporary cash investments 3 Accounts receivable ▶ 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 (attach schedule) (see page 15 of the instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Prepaid expenses and deferred charges. 10 a investments - Us and state governmentobligations(attach schedule). b investments - corporate bonds (attach schedule). 1 investments - mortgage loans 1 investments - use of their (attach schedule). 1 investments - other (attach schedule). 2 investments - other (attach schedule). 3 investments - other (attach schedule). 4 investments - other (attach schedule). 5 Other assets (describe ▶ STMT 4). 5 Total assets (to be completed by all filers - see the instructions Also, see page 1, item 1). 1 7 Accounts payable and accrued expenses. 1 8 Grants payable and accrued expenses. 2 1 Mortgages and other notes payable (attach schedule). 2 2 Other liabilities (describe ▶	
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c Investments - corporate bonds (attach schedule)	
Less' accumulated depreciation (attach schedule) 12 Investments - mortgage loans 13 Investments - other (attach schedule) 14 Land, buildings, and equipment basis Less' accumulated depreciation (attach schedule) 15 Other assets (describe STMT 4) 156,074. 147,735. 147 16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item I). 156,074. 147,735. 147 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe) 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	
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13 Investments - other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ► STMT 4) 16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item i)	
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Less: accumulated depreciation (attach schedule) Other assets (describe STMT 4) 156,074. 147,735. 147 16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	
15 Other assets (describe ► STMT 4) 16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	
16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	7,636
17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 3 Total liabilities (add lines 17 through 22)	
18 Grants payable	7,636
18 Grants payable	
19 Deferred revenue	
20 Loans from officers, directors, trustees, and other disqualified persons . 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe) 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	
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Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	
and complete lines 24 through 26 and lines 30 and 31.	
24 Unrestricted	
25 Temporarily restricted	
26 Permanently restricted	
Foundations that do not follow SEAS 117	
E Podridations that do not follow of AO 177,	
☐ check here and complete lines 27 through 31. ► X	
28 Paid-in or capital surplus, or land, bldg , and equipment fund	
Paid-in or capital surplus, or land, bldg , and equipment fund	
30 Total net assets or fund balances (see page 17 of the	
31 Total liabilities and net assets/fund balances (see page 17	
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	074
	074.
	341.
	2.
	735.
5 Decreases not included in line 2 (itemize) ► 5 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 147,	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 147,	<u> </u>

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			rage .	
(a) List and	describe the kind(s) of property sold (sick warehouse; or common stock, 200	e g., real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr)	
1a SEE PART IV DETA	IL					
b						
<u>C</u>						
<u>d</u>						
<u>e</u>						
(e) Gross sales price	(or allowable) plus expense of sale					
<u>a</u>				- <u>-</u>	_ .	
b						
<u>c</u>						
<u>d</u>						
Complete only for accets of	howing gain in column (h) and owned	by the foundation on 13/31/60				
		Gains (Col (h) ga (k), but not less t				
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	CO1	Losses (from co		
a .						
_b						
<u>C</u>						
d						
2 Capital gain net income or		gain, also enter in Part I, line 7	2		2 720	
	or (loss) as defined in sections 122		2	_	-3,730.	
-	ine 8, column (c) (see pages 13 an					
If (loss), enter -0- in Part I, li	ne 8		3			
		section 4940(a) tax on net investment Ir			 .	
	·	utable amount of any year in the ba Do not complete this part.	ase perio	d?	Yes X No	
1 Enter the appropriate amo	unt in each column for each year;	see page 18 of the instructions bef	fore makıı	ng any entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	tio col (c))	
2009	9,732.	157,397.		0.061	83091164	
2008	4,269.	164,290.			98453953	
2007	13,108.	167,501.			325624922	
2006	5,962.	169,771.		0.035	11789410	
2005	4,541.	173,606.		0.026	15693006	
2 Total of line 1, column (d)			2	0.227	34652455	
_	for the 5-year base period - divide t ation has been in existence if less		3	0.045	46930491	
4 Enter the net value of none	charitable-use assets for 2010 fron	n Part X, line 5	4		148,506.	
5 Multiply line 4 by line 3 .			5		6,752.	
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		40.	
7 Add lines 5 and 6			7_		6,792.	
8 Enter qualifying distributio If line 8 is equal to or gre Part VI instructions on page		n Part VI, line 1b, and complete t	8 hat part o	using a 1% tax	6,153. rate. See the	

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	ne ins	tructio	ns)					
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 ruling letter if necessary - see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u>80.</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-) 2								
3	Add lines 1 and 2			<u>80.</u> ONE					
4	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4								
5	5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0								
6	Credits/Payments:								
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 72.								
b	Exempt foreign organizations-tax withheld at source								
	Tax paid with application for extension of time to file (Form 8868) 6c NONE								
d	Backup withholding erroneously withheld								
7	Total credits and payments. Add lines 6a through 6d			<u>72.</u>					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8								
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			8.					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid								
	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ Refunded ▶ 11		·						
	VII-A Statements Regarding Activities		Т						
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		<u> </u>					
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			v					
	of the instructions for definition)?	1b		Х					
	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.			Х					
	Did the foundation file Form 1120-POL for this year?	1c							
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 \$,		Х					
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. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of								
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х					
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X					
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?								
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			Х					
3	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 Part XV	7	Х						
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the								
	instructions) ▶ STMT 6								
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						
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		X					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their								
	names and addresses	10		X					
	·	0.0	ODE /						

Part	/II-A Statements Regarding Activities (continued)			
11	t any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	ŀ		
	neaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	nd the foundation acquire a direct or indirect interest in any applicable insurance contract before			
		12		Х
13	id the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	/ehsite address ► N/A			
14	he books are in care of ▶ 1ST_SOURCE_BANK Telephone no ▶ (574)235-2	790_		
	ocated at ▶ 100 N MICHIGAN, SOUTH BEND, IN ZIP+4 ▶ 46601			
15	ection 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	. 🔲
	nd enter the amount of tax-exempt interest received or accrued during the year			
16	t any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
	ver a bank, securities, or other financial account in a foreign country?	16		Х
	ee page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter			
	ne name of the foreign country			
Part	/II-B Statements Regarding Activities for Which Form 4720 May Be Required			
	ile Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	uring the year did the foundation (either directly or indirectly):	İ		
	I) Engage in the sale or 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	}		
	disqualified person?			
	3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	1) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	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)?			
	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.)			
b	any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	ection 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		
	rganizations relying on a current notice regarding disaster assistance check here		1	
C	id the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	vere not corrected before the first day of the tax year beginning in 2010?	1c		X
2	axes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	perating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	t the end of tax year 2010, did the foundation have any undistributed income (lines 6d and	ļ		
	e, Part XIII) for tax year(s) beginning before 2010?]		
	"Yes," list the years			
b	re there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1		
	relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	۱		v
	II years listed, answer "No" and attach statement - see page 22 of the instructions.)	2b		X
С	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_				
3a	t any time during the year? Yes X No			
b	"Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or			
	isqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			[
	ne 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	24		
_	oundation had excess business holdings in 2010)	3b 4a		X
	and the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			 ^
ь	haritable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		Х
	namente perpose that had not been temoved from Jeopardy before the first day of the tax year beginning in 2010!	, 70		1 41

Form 990-PF (2010)		35-08	88764		Page
Part VII-B Statements Regarding Activities f	or Which Form 47	20 May Be Requi	red (continued)		
 5a During the year did the foundation pay or incur any ame (1) Carry on propaganda, or otherwise attempt to influe (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or (4) Provide a grant to an organization other than a char section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitate purposes, or for the prevention of cruelty to children b If any answer is "Yes" to 5a(1)-(5), did any of the transport of the prevention of the prev	ence legislation (section n (see section 4955); o	r to carry on, n described in tructions) or educational under the exceptions	Yes X No Yes X No Yes X No X No X described in		
Regulations section 53.4945 or in a current notice rega			1 1	· · · <u> 5b</u>	
Organizations relying on a current notice regarding disa c If the answer is "Yes" to question 5a(4), does the found because it maintained expenditure responsibility for the If "Yes," attach the statement required by Regulations se	ation claim exemption f grant? ection 53.4945-5(d).	rom the tax			
6a Did the foundation, during the year, receive any funds,	• •		Yes X No		
on a personal benefit contract?				' 6ь	Х
b Did the foundation, during the year, pay premiums, dire If "Yes" to 6b, file Form 8870.	city or indirectly, on a p	ersonal benefit contrat	ur	00	
7a At any time during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?	Yes X No	,	
b If "Yes," did the foundation receive any proceeds or hav			• —	•	
Part VIII Information About Officers, Directo					
and Contractors 1 List all officers, directors, trustees, foundation m	anagers and their c	ompensation (see)	nage 22 of the instru	ıctione)	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
SEE STATEMENT 7	-	2,135.	-0-	<u>-</u>	- 0 -
	-				
	-				
	-				
2 Compensation of five highest-paid employees (of lf none, enter "NONE."	ther than those incl	uded on line 1 - see	page 23 of the inst	ructions).	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	account, wances
NONE	-	NONE	NONE	NC	ONE
	-				
	-				-
	-				

Form **990-PF** (2010)

_	•
Page	•

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If no	one, enter "NONE.
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	NONE
Total number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	
De IVD	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1NONE	
2	
All other program-related investments. See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3	-

Pai	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundatio	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	150,768.
b		1b	NONE
C	Fair market value of all other assets (see page 25 of the instructions)	1c	NONE_
d	Total (add lines 1a, b, and c)	1d	150,768.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	150,768.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of		
		4	2,262.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	148,506.
6	Minimum investment return. Enter 5% of line 5	6	7,425.
Pa	Table Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) prival foundations and certain foreign organizations check here ☐ and do not complete this page 25.	te operating part.)	
1	Minimum investment return from Part X, line 6	1	7,425.
2 a	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	80.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	7,345.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	7,345.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	7,345.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	6,153.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	6,153.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,153.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calqualifies for the section 4940(e) reduction of tax in those years.	culating whet	

Form 990-PF (2010)

Page 9

Par	t XIII Undistributed Income (see page	26 of the instructio	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				7,345.
2	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only			6,153.	
b	Total for prior years 20 <u>08</u> , 20, 20		NONE		
3	Excess distributions carryover, if any, to 2010				
	From 2005 NONE				
	From 2006 NONE				
	From 2007 NONE				
d	From 2008 NONE				
	From 2009 NONE	NONT	į		
	Total of lines 3a through e	NONE			- ·
4	Qualifying distributions for 2010 from Part XII,				
_	line 4· \blacktriangleright \$ 6,153. Applied to 2009, but not more than line 2a			6,153.	
			-	0,133.	
b	Applied to undistributed income 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)	NONE			
d	Applied to 2010 distributable amount				NONE
	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2010	NONE			NONE
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b	Prior years' undistributed income Subtract		170175		
	line 4b from line 2b Enter the amount of prior years' undistributed		NONE		
٠	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has		NONE	Ì	
	been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions		NONE		
е	Undistributed income for 2009. Subtract line				· · · - · · ·
	4a from line 2a Taxable amount - see page 27 of the instructions				
,					
1	Undistributed income for 2010. Subtract lines 4d and 5 from line 1 This amount must be				
	distributed in 2011				7,345.
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				
8	instructions)	NONE			
•	applied on line 5 or line 7 (see page 27 of the	NONE			
	instructions)	NONE			
9	Excess distributions carryover to 2011.	NONE			
10	Subtract lines 7 and 8 from line 6a	TAOME			
	Excess from 2006 NONE				
	Excess from 2007 NONE				
	Excess from 2008 NONE				
	Excess from 2009 NONE				
	Excess from 2010 NONE				

Form **990-PF** (2010)

			tace page 27 of the			001.01.07	1101 1	11 1 DI C. 1DI
1 a	If the foundation has							
	foundation, and the ruling							
b	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section	on	4942(j)	(3) or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years				e) Total
	justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2	007	,	
	I or the minimum investment							
	return from Part X for each year listed							
	85% of line 2a				-			
b			· · · · · · · · · · · · · · · · · · ·					
С	Qualifying distributions from Part							
d	XII, line 4 for each year listed . Amounts included in line 2c not							
u	used directly for active conduct							
	of exempt activities							
е	Qualifying distributions made							
	directly for active conduct of exempt activities Subtract line							
	2d from line 2c							
3	Complete 3a, b, or c for the							
а	alternative test relied upon "Assets" alternative test - enter							
	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section							
ь	4942(j)(3)(B)(i)							
	enter 2/3 of minimum invest-							
	ment return shown in Part X,							
_	line 6 for each year listed	-					<u> </u>	
С	"Support" alternative test - enter							
	(1) Total support other than gross investment income	I .					ł	
	(interest, dividends, rents,							
	payments on securities loans (section 512(a)(5)),						1	
	or royalties)							
	(2) Support from general public and 5 or more							
	exempt organizations as	I .						
	provided in section 4942 (j)(3)(B)(iii)							
	(3) Largest amount of sup-							
	port from an exempt							
	organization							
Pa		ary Information (complete this part	only if the foun	dation had	\$5,000	or mor	e in assets
			e page 28 of the ir			40,000	0	J 455515
1	Information Regarding	•						
-	List any managers of			re than 2% of the to	tal contribution	ne receive	ed by the	e foundation
	before the close of any	v tax year (but only if t	hey have contributed	more than \$5,000).	(See section 5	07(d)(2).)	ou by the	, roundation
			•					
	N/A							
b	List any managers of					an equally	large po	ortion of the
	ownership of a partner	rship or other entity) (of which the foundatio	n has a 10% or great	er interest.			
	N/A							
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	nip, etc., Programs:				
	Check here ► X If 1	the foundation only	makes contributions	to preselected cha	ritable organ	ızations a	nd does	not accept
	unsolicited requests	for funds. If the four	ndation makes gifts,	grants, etc. (see page	ge 28 of the	instructio	ns) to ir	ndividuals or
	organizations under of	ther conditions, comp	lete items 2a, b, c, and	d d.				
	The name, address, ar	nd telephone number	of the person to whon	n applications should	be addressed	l:		
-	mo mamo, address, as	ia tolophono nambol	or the person to time.	· approductions circuit	50 444.0550	•		
_	The form in which ann	dications should be si	hmitted and informat	on and materials the	v should inclu			
D	The form in which app	meations should be st	ionnittea and inioimat	ion and materials the	y should inclu	ue.		
C	Any submission deadle	ines:						
_								
d	Any restrictions or I	imitations on awards	s, such as by geogr	aphical areas, char	table fields,	kınds of i	nstitution	ns, or other
	factors:							

Part AV Supplementary information (c	Jonanaea)	i 4 r		
3 Grants and Contributions Paid Durin	g the Year or Appro	ved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 8				
Total			▶ 3a	6,153.
b Approved for future payment				
]		
_ 	L		<u> </u>	
Total			▶ 3b	

Part XVI-	A Analysis of Income-Produ	cing Activ	vities		 _	
Enter gross a	amounts unless otherwise indicated	Unrela (a)	ted business income (b)		section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	(a) Business code	Amount	(c) Exclusion code	Amount	(See page 28 of the instructions)
_						
c						
d						
e						
f						
-	and contracts from government agencies					
	ship dues and assessments			<u> </u>		
	n savings and temporary cash investments ds and interest from securities			14	6,003.	
	al income or (loss) from real estate:			1 1 1	0,005.	
	-financed property					
	debt-financed property					
	I income or (loss) from personal property					
	vestment income					
	oss) from sales of assets other than inventory	1		18	-3,730.	
9 Net inco	me or (loss) from special events					
10 Gross pr	ofit or (loss) from sales of inventory					
11 Other re	venue. a					
b						<u></u>
c						
d		-				
е					0.052	·
	. Add columns (b), (d), and (e)				2,273.	
	dd line 12, columns (b), (d), and (e)				13	2,273.
Part XVI-	Relationship of Activities			xempt Purp	oses	
Line No.	Explain below how each activit					uted importantly to the
_	accomplishment of the foundation					
V	instructions.)					
 						
					 	
						
					 	
					· · · ·	
			NOT ADDITORD	TE		<u> </u>
			NOT APPLICAB	LE		
						
	 					
	-					
		<u>.</u>		·		
-						
			····			
				<u>.</u>		
		· · · · · · · · · · · · · · · · · · ·				
			 			

Form 99	U-PF (20)10) 				33-0000/0	4		Pä	age i
Part 2	(VII	Information Exempt Orga		ansfers To and	Fransactions	and Relation	onships With	Nonc	harit	abl
1 D	id the	organization directly	y or indirectly en	gage in any of the	following with	any other orga	inization described		Yes	No
ir	section	on 501(c) of the C	•	section 501(c)(3) orga						
	rganiza				_					
		· · · · · ·		aritable exempt organiz				ļ		٠,
										X
							• • • • • • • •	. <u>1a(2)</u>		X
		ansactions:						J		.,
				anization						X
				npt organization						X
								1		X
								1		_ <u>^</u>
									Ŀ	X
-	-		•	draising solicitations						X
	_		· -	r assets, or paid employ					<u> </u>	
				s," complete the foll						
		-		es given by the repo	-					
				ment, show in colum						
(a) Line	no	(b) Amount involved	(c) Name of non	ncharitable exempt organiza	stion (a) De	escription of transfer	rs, transactions, and sh	aring arra	ingeme	nts
						•				
				-						
		=								
				- · · · ·						
d	escribe	•	the Code (other than	iated with, or related n section 501(c)(3)) or i	•	•	J	Y	es []	X No
		(a) Name of organizatio	on	(b) Type of organ	uzation	(0) Description of relation	nship		
							- · · ·			
							<u> </u>			
									_	
				···-						
	Unde belief	r penalties of perjury, I d	leclare that I have exa	amined this return, including preparer (other than taxpay	ng accompanying size or fiduciary) is ba	chedules and stater	nents, and to the bes	of my k	nowled	lge an
Sign	1. 3	V. a.	1.	N	17115/11		AVA		_	
Here	D -	10000 D	dams. H	V+			L-11			
	I S₁	gnature of officer or truste			Date	Titl	e			
Paid		Print/Type preparer's	s name	Preparer's signature		Date	Checkif	PTIN		
				<u> </u>			self-employed			
Prepa		Firm's name					Firm's EIN ▶			
Use (Only	Firm's address								

Form **990-PF** (2010)

Phone no

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

Kind of P		10 710 20	Descr	P	Date Date	Date sold		
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	P	acquired Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adj basis		or (loss)	
20,000.00		20000. U S 'PROPERTY TY			DUE 08/1		08/26/2004	08/15/2010
							'	
22,000.00		22000. U S T PROPERTY TY 23,816.00			UE 02/15		09/27/2004 -1,816.00	02/15/2011
22,000.00		23,616.00					-1,818.00	
		5000. UNITED PROPERTY TY			ES 4.375		02/28/2006	03/28/2011
5,266.00		4,933.00					333.00	
TOTAL GAIN(L	oss)					•	-3,730. =======	
					•			
}								

- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

ADJUSTED NET INCOME	1. 575. 1,100. 1,557. 725. 1,275. 638. 381.	
NET INVESTMENT INCOME	1. 575. 1,100. 1,557. 725. 1,275. 638.	
REVENUE AND EXPENSES PER BOOKS	1. 575. 1,100. 1,557. 1,275. 638. 381.	
DESCRIPTION	FEDERATED TREASURY OBLIGATIONS SS U S TREASURY NOTES 5.75% DUE 08/15/2010 U S TREASURY NOTE 5.00% DUE 02/15/2011 UNITED STATES TREASURY NOTES 4.375% DUE U S TREASURY NOTE 3.625% DUE 05/15/2013 UNITED STATES TREASURY NOTES 4.25% DUE 0 UNITED STATES TREASURY NOTES 4.50% DUE 0 UNITED STATES TREASURY NOTES 4.50% DUE 0 U S TREASURY NOTE 4.50% DUE 05/15/2017	

STATEMENT

CHARITABLE PURPOSES	NONE
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	688. 688. 1,376.
	TOTALS
DESCRIPTION	LEGAL FEES LEGAL FEES

CHARITABLE PURPOSES	1 1 1 1 1 1		NONE	
ADJUSTED NET INCOME	1 1 1 1		NONE	
NET INVESTMENT INCOME	 1 1 1	950.	950.	
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1	.050	.056	
			TOTALS	
DESCRIPTION	1 1 1 1 1 1 1	TAX PREPARATION FEES		

FORM 990PF, PART II - OTHER ASSETS

TOTALS

ENDING FMV	!!!	1,57	1,22	3,02	16,628.	0,20	2,41	, 56	1 1 1 1 1 1 1 1 1	147,636.	
ENDING BOOK VALUE		9,59	0,7	4,83	01	8,0	2,11	5,	1 1 1 1 1 1 1 1 1	147,735.	

STATEMENT

		•				INCREAS			WORTH	OR	FUND	BALA	NCES	
DESCI					 = =				 				AMOUNT	
ROUNI	DING	DIE	FFERE	NCE										2.
						ŗ	CTA	.L						2.

STATE(S) WHERE THE FOUNDATION IS REGISTERED

IN

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

OFFICER NAME:

1ST SOURCE BANK

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 2,135.

TOTAL COMPENSATION:

2,135.

=========

DODGE TRUST FOR OLD PEOPLE 480006014 35-0888764 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: REAL SERVICES OF ST JOS CTY C/O ANDREW S. VARGO ADDRESS: DIRECTOR OF FINANCE SOUTH BEND, IN 46601 AMOUNT OF GRANT PAID 6,153.

TOTAL GRANTS PAID:

6,153.

SCHEDULE D (Form 1041)

Capital Gains and Losses

OMB No 1545-0092

2010

Department of the Treasury Internal Revenue Service

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

Name of estate or trust **Employer identification number** DODGE TRUST FOR OLD PEOPLE 480006014 35-0888764 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (c) Date sold (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2009 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales price the entire year (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) (see instructions) Subtract (e) from (d) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b....... -3,730Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Capital gain distributions 10 Gain from Form 4797, Part I 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a,

JSA

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2010

Page	2
 1	

Caution: Read the instructions before completing this part. 13 Net short-term gain or (loss) 13 14 Net tong-term gain or (loss) 14 Net tong-term gain (loss) 15 Total net gain or (loss) 16 Net (line)	Sched	ule D (Form 1041) 2010				Pa	ge 2
14 Net long-term gain or (loss): 15 Total net gain or (loss): 16 Unrecaptured section 1250 gain (see line 18 of the wrksht.). 17 Total net gain or (loss). Combine lines 13 and 14a 18 Total for gain or (loss). Combine lines 13 and 14a 19 Total ret gain or (loss). Combine lines 13 and 14a 19 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 10 Total ret gain or (loss). Combine lines 13 and 14a 11 Total ret gain or (loss). Combine lines 13 and 14a 11 Total ret gain or (loss). Combine lines 14 and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 20 (los his part and complete the worksheet on page 3 of the instructions if: 10 Either lines 14b, col. (2) or lines 14c, col. (2) is more than zero. 10 Either lines 14b, col. (2) or lines 14c, col. (2) is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if: 10 Either lines 14b, col. (2) or lines 14c, col. (2) is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if: 10 Either lines 14b, col. (2) or lines 14c, col. (2) is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if: 10 Either the same lines 15 from lines 12c (loss) and the lines 14b and 15 in column (2) 11 Either the smaller of the amount on line 17 or \$2,300 12 Either the smaller of the amount from line 23 (loss) and the smaller of lines 12c (loss)	Part		art.		_	1 (30 (6)	
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15 Total net gain or (loss). Combine lines 13 and 14a Note: Hine 15, column (3), is a net gain, enter the gam on Form 1041, line 4 for Form 390-T, Part I, line 4a) If lines 14a and 15, column (2), are net gains, gr to Part V, and do not complete Part V If line 15, column (3), is a net loss, complete Part V and the Capital Loss Carryover Worksheed, as necessary. Part V Capital Loss Limitation 16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4a, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet on page 2 or the instructions to figure your capital loss carryover. Part V Tax Computation Using Maximum Capital Gains Rates Form 1041 files. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 2c) is more than zero. Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part of Form 990-T, and Form 990-T, line 34, is more than zero. Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part of Form 990-T, and Form 990-T, line 34, is more than zero. 17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) 18 Enter the smaller of line 14a or 15 in column (2) 19 Enter the estate's or trust's qualified dividends from Form 1041, line 22 (or Form 990-T, line 34) 19 Enter the smaller of line 14a or 15 in column (2) 10 Enter the smaller of line 14a or 15 in column (2) 10 Enter the smaller of line 14a or 15 in column (2) 11 Enter the smaller of line 24 (col. (2) is more than zero. 22 Subtract line 25 from l			14b				
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 for Form 990-T, Part I, line 4a) If lines 14a and 15, column (2), are net gains, g to Part IV and do not complete Part IV if line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary. Part IV Capital Loss Limitation 16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000. Note: (the loss on line 15, column (3) is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet on page 7 of the instructions to figure your careginal loss carryover. Part V Tax Computation Using Maximum Capital Gains Rates Form 1041 fillers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 20(2), and Form 1041, line 21(2) is more than zero. Caution: Skip this part and complete the worksheet on page 8 of the instructions if: Either line 14b, co.! (2) or Iner 14c, co.! (2) is more than zero, or Both Form 1041, line 2b(1), and Form 995.2, line 4g are more than zero. Torm 990-T, and Form 990-T, iner 34, is more than zero. Torm 990-T, and Form 990-T, line 34, is more than zero. To Enter than 54, co.! (2) or line 14c, co.! (2) is more than zero. To Enter the smaller of line 14a or 15 in column (2) to line 14a and 15 are gains, or qualified dividends are included in income in Part of Form 990-T, line 34). In the estate or trust is filing form 4952, enter the amount from line 4g; otherwise, enter -0. 22 Subtract line 21 from line 17. If zero or less, enter -0. 23 Subtract line 23 from line 17. If zero or less, enter -0. 24 Enter the smaller of the amount on line 17 or \$2,300 Withing lines 25 and 26; gio to line 27 and check the "No" box. No. Enter the amount from line 26 (If line 26 is blank, enter -0.) 29 Sub	C	28% rate gain	14c				
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16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000 or if Form 1041, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Los Carryover Worksheet on page 7 of the instructions to Rigure your capital loss carryover. Tax Computation Using Maximum Capital Gains Rates Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 22 l2), and Form 1041, line 22 (is more than zero. Eather line 14b, col. (2) or line 14c, col. (2) is more than zero. Eather line 14b, col. (2) or line 14c, col. (2) is more than zero. Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part of Form 990-T, and Form 990-T, line 34, is more than zero. Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part of Form 990-T, and Form 990-T, line 34, is more than zero. Form 990-T trusts. Complete the spart only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part of Form 990-T, and Form 990-T, line 34, is more than zero. The trust line 14b, col. (2) or line 14c, col. (2) is more than zero. If Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0. If Enter the smaller of the amount on line 17 or \$2,300 If the estate or trust is filing Form 4952, enter the amount on line 23 caugal to or more than the amount on line 24? Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. No. Enter the amount from line 23. Are the amounts on lines 22 and 26 the same? Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. No. Enter the amount from line 26. (If line 26 is blank, enter -0.) Subtract	Note to Pa	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Forr rt V, and do not complete Part IV If line 15, column (3), is a net loss, complete Pa	m 990 art IV a	-T, Part I, line 4a) If lin and the Capital Loss C a	es 14a and 15, c a <mark>rryover Worksh</mark> e	column (2), are net gains, et, as necessary.	go
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Subtract line 22 from line 17. If zero or less, enter -0- 23 24 Enter the smaller of the amount on line 17 or \$2,300 Is the amount on line 23 equal to or more than the amount on line 24? Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. No. Enter the amount from line 23. Subtract line 25 from line 24. Are the amounts on lines 22 and 26 the same? Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22 Enter the amount from line 26 (If line 26 is blank, enter -0-) Subtract line 28 from line 27 Multiply line 29 by 15% (.15) 30		5,					
Enter the smaller of the amount on line 17 or \$2,300				· ·			
Is the amount on line 23 equal to or more than the amount on line 24? Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. No. Enter the amount from line 23	23	Subtract line 22 from line 17. If zero or less, enter -0		23			
Is the amount on line 23 equal to or more than the amount on line 24? Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. No. Enter the amount from line 23							
Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. No. Enter the amount from line 23. 25 26 Subtract line 25 from line 24. 27 Are the amounts on lines 22 and 26 the same? Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22 28 Enter the amount from line 26 (If line 26 is blank, enter -0-) 29 Subtract line 28 from line 27 Multiply line 29 by 15% (.15) 30				24			
No. Enter the amount from line 23 25	25						
26 Subtract line 25 from line 24							
27 Are the amounts on lines 22 and 26 the same? Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22 28 Enter the amount from line 26 (If line 26 is blank, enter -0-) 29 Subtract line 28 from line 27 Multiply line 29 by 15% (.15) 30							
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22 Enter the amount from line 26 (If line 26 is blank, enter -0-) Subtract line 28 from line 27 Multiply line 29 by 15% (.15) 30				26	-		
28 Enter the amount from line 26 (If line 26 is blank, enter -0-)	21			37	ł		
29 Subtract line 28 from line 27		Tes. Skip lines 27 thru 30, go to line 31	e 22	21			
30 Multiply line 29 by 15% (.15)	28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
30 Multiply line 29 by 15% (.15)							
					· · · · · <u> </u>	0	
Figure the tax on the amount on line 23. Use the 2010 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	31	-				1	
		A 1 1 1 2 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4			_		
32 Add lines 30 and 31		Add lines 30 and 31	· · ·		3.		
33 Figure the tax on the amount on line 17. Use the 2010 Tax Rate Schedule for Estates and Trusts	33	-				,,	
(see the Schedule G instructions in the instructions for Form 1041)	24					3	
Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule	34					,,	
G, line 1a (or Form 990-T, line 36)		G, line 1a (or Form 990-1, line 3b)	• • • •	· · · · · · · · · · · · · · · · · · ·			010

Schedule D-1 (Form 1041) 2010

Page 2

DODGE TRUST FOR OLD PEOPLE				35-0888764	
Part II Long-Term Capital Gains and	(b) Date		n One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
5a 20000. U S TREASURY NOTES 5.75% DUE 08/15/2010 INTERE	08/26/2004	08/15/2010	20,000.00	22,247.00	-2,247.00
22000. U S TREASURY NOTE 5.00% DUE 02/15/2011	09/27/2004	02/15/2011	22,000.00	_23,816.00	-1,816.00
5000. UNITED STATES TREASURY NOTES 4.375% DUE 0	02/28/2006	03/28/2011	5,266.00	4,933.00	333.00
					<u> </u>
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· · · · · · · · · · · · · · · · · · ·					
				-	
					
				-	
		· -			
ib Total. Combine the amounts in column	(f) Enter here and	on Schedule D, lin	e 6b		-3,730.00
				Schedule D	-1 (Form 1041) 2010

Ε

STATE OF INDIANA) THE ST. JOSEPH PROBATE COURT
) SS:
ST. JOSEPH COUNTY) TRUST No. 547

IN THE MATTER OF THE TRUST OF)
DODGE HOME FOR OLD PEOPLE)

1st SOURCE BANK, successor to The First National Bank of Mishawaka, Indiana, Trustee

St. Joseph Probate Court

JOINT STIPULATION FOR CHANGE OF NAME OF TRUST

Pursuant to the request of the Office of the Indiana Attorney General, the Trustee of the above-named Trust and the office of the Indiana Attorney General of Indiana now stipulate that the name of the above-referenced Trust be changed to "The Dodge Trust For Old People."

DATED this 23 day of June, 2010.

DAVID V. BENT, P.C.

By:

David V. Bent (2691-71)

320 West Fourth Street
Mishawaka, Indiana 46544
Telephone: 574-255-3680

Attorney for Trustee

GREGORY F. ZOELLER

Attorney General of Indiana

By:

Greg A.) Schrage, (27630-32)

Deputy Attorney General

Office of the Indiana Attorney General 302 W. Washington Street, Fifth Floor Indianapolis, Indiana 46204

Telephone: 317-234-2354

317-233-4393 (fax)

STATE OF INDIANA) THE ST. JOSEPH PROBATE COURT
)ss:
ST. JOSEPH COUNTY) TRUST No. 547

IN THE MATTER OF THE TRUST OF)
DODGE HOME FOR OLD PEOPLE)

DODGE HOME FOR OLD PEOPLE

1st SOURCE BANK, successor to
The First National Bank of Mishawaka,
Indiana, Trustee

JUL -9 2010 St Joseph Probate Conf.

ORDER FOR CHANGE OF NAME OF TRUST

The Trustee, by Counsel, and the Office of Attorney General of Indiana, by Greg A. Schrage, Deputy Attorney General, having filed their Joint Stipulation for Change of Name of Trust in the referenced Trust, and the Court having examined the same now finds the same sufficient and that the same should be and is hereby granted.

IT IS THEREFORE ORDERED, that the name of the referenced Trust shall hereafter be "The Dodge Trust For Old People."

DATED this q day of ______, 2010.

Iter Dewith

Judge, St. Joseph Probate Court