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# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

Open to Public Inspection

OMB No 1545-0047

Department on the Treasury Internal Revenue Service

SCANNED OCT 28 2011

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A F	or the	2010 calendar year, or tax year beginning JUL 1, 2010 and ending	g J	UN 30, 2011	
B c	heck if pplicable	C Name of organization		D Employer identific	cation number
	Addres: change	Scholarship Foundation of St. Joseph Cou			
	Name change	Doing Business As		35-6	042497
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/	/suite	E Telephone number	
	Termin-	3515 N Main, Suite C		5 <u>74-</u>	<u> 259-0522                                   </u>
	Amende	City or town, state or country, and ZIP + 4		G Gross receipts \$	1,469,496.
	Applica	MISHAWAKA, IN 40343		H(a) Is this a group re	turn
	pending	F Name and address of principal officer Joe Garrett		for affiliates?	Yes X No
				H(b) Are all affiliates inc	luded? Yes No
-		mpt status: X 501(c)(3) 501(c) ( )	527	If "No," attach a	list (see instructions)
		e: ▶ www.scholarshipfoundation.org		H(c) Group exemption	
		· · · · · · · · · · · · · · · · · · ·	Year o	of formation: 1961 N	State of legal domicile: IN
Pa		Summary			
Activities & Governance	<b>1</b> E	Briefly describe the organization's mission or most significant activities. College	Sc.	nolarships (	& Mentoring
ru.	2 (	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of	more	than 25% of its net as	
NO.	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	65
8 6	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	65
es	1	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	2
wit	6 7	Total number of volunteers (estimate if necessary)		6	75
Act	7a 7	Total unrelated business revenue from Part VIII, column (C), line #2CEIVED	7	<u>7a</u>	0.
	<u> </u>	Net unrelated business taxable income from Form 990-T, line 34	<del>.   -  </del>	7b	0.
	_ ,	10 00 00 00 10	)I ——	Prior Year 46,572.	Current Year 111,674.
ne	l	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	40,572.	0.
Revenue	9 F	Program service revenue (Part VIII, line 2g)	[	475,133.	124,293.
Re	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d) OGDEN, UT Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1e)		-130.	-1,011.
	''' `	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>-</b>	521,575.	234,956.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		236,000.	223,000.
		Benefits paid to or for members (Part IX, column (A), line 4)		29,867.	0.
s		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	31,292.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ē		Fotal fundraising expenses (Part IX, column (D), line 25)			
ω		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		44,902.	47,437.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		310,769.	301,729.
	19 F	Revenue less expenses Subtract line 18 from line 12		210,806.	-66,773.
Net Assets or Fund Balances			Beg	inning of Current Year	End of Year
ssets	20	Total assets (Part X, line 16)	<u> </u>	4,189,199.	4,780,753.
꺯	21	Total liabilities (Part X, line 26)	<u> </u>	2,873.	3,084.
		Net assets or fund balances Subtract line 21 from line 20		4,186,326.	<u>4,777,669.</u>
	irt II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedules and s			/ knowledge and belief, it is
true,	correct	t, and complete Declaration of proparer (other than officer) is based on all information of which pre	eparer .	nas any knowledge.	-11
Sign	n	Signature of officer		Date	
Her	e	Joe Garrett, President			
		Type or print name and title	Ιn	ate Check	X PTIN
		Print/Type preparer's name  Deparer's signature		~/ / If <sup>L</sup>	92
Paid	- h	Christine A Lauber	-4	7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
-	narer	Firm's name Christine A. Lauber, CPA		Firm's EIN	35-1546667
use	Only	Firm's address 1402 Mishawaka Ave.		Phone no. 5	74-288-4801
N4~	, the ID	South Bend, IN 46615  S discuss this return with the preparer shown above? (see instructions)		Tritolie IIU. 3	X Yes No
	/ tne IH				Form <b>990</b> (2010)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

	1990 (2010) Scholarship Foundation of St. Joseph Cou 35-6042497 Part III   Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
•	To provide scholarships to four year institutions for students from St
	Joseph county Indiana
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.  Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	002 000
74	Scholarships awarded to college students for 2008-2009 school
	\(\tau_{\text{Decomposition}}\)
4b	(Code ) (Expenses \$ including grants of \$) (Revenue \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4d	Other program services (Describe in Schedule O)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	X	_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	<u> </u>	X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		_X_
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			7.7
	Schedule D, Parts XI, XII, and XIII	12a		X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			77
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			v
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	45		v
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<del>                                     </del>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		v
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<del> </del>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4=		x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40	}	v
••	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	<u>20a</u>	<b> </b>	
þ	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that	204		
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	990 (	2010
		LOHII	330 (	2010)

Par	TIV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			37
	Schedule J	23		X
24a	The state of the s			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
	Schedule K. If "No", go to line 25	24a	- 1	Λ
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
	any tax-exempt bonds?	24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<u> 24u</u>		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		X
	disqualified person during the year? If "Yes," complete Schedule L, Part I  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		-23
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
26	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
2.1	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete		ļ	
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		· '	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X.
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			٠,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			v
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	-	X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Α.
а				
00	200 to the test of			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		х
27	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<u> </u>		
<b></b>	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2010)

Par				_
	Check if Schedule O contains a response to any question in this Part V		T.,	<u>                                     </u>
		0	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0		
_	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	씍		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1c		
_	(gambling) winnings to prize winners?	10		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2		
	, , , , , , , , , , , , ,	2b	х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20		<del>                                     </del>
•	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	0.0		
4a	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	i	x
_	If "Yes," enter the name of the foreign country:	<u> </u>		
D	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	-		
E.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		<del>                                     </del>	
0a	any contributions that were not tax deductible?	6a	ļ	х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
b	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	r? <b>7</b> a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
_	to file Form 8282?	7c	<u> </u>	X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <b>f</b>		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	? <u>7h</u>		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		<del> </del>
9	Sponsoring organizations maintaining donor advised funds.		1	
а	Did the organization make any taxable distributions under section 4966?	9a	-	ـــــ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	<del> </del>
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	_		ŀ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter			
а		-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	<b>⊢</b> ₄₀₌		İ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes " enter the amount of tax-exempt interest received or accrued during the year 12b	12a	<del> </del>	<del> </del>
	1 100, 01100 1110 1110 110 11	$\dashv$		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	138		<del> </del> -
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization to noonlood to read quantity and	$\dashv$		
	The time distribution of the time to the t	14a		X
14a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	$\top$	T
	11 165, Has it lifed a 1 Offit 120 to report those payments. In 170, provide an expendition in Consessed		990	(2010

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI				$\mathbf{x}$
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		65		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	<u>65</u>		ł
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other			
	officer, director, trustee, or key employee?		2	<del></del>	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision			i
	of officers, directors or trustees, or key employees to a management company or other person?		3	+	X
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?	5		X
6	Does the organization have members or stockholders?		6	<del>  -</del>	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbers of the			
	governing body?	0	7a		X
	Are any decisions of the governing body subject to approval by members, stockholders, or other per		7b	+ -	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the year			
	by the following:			x	
	The governing body?		8a 8b	$\frac{\mathbf{x}}{\mathbf{x}}$	
ь	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched at the	80		
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ched at the	9	1	x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code )			1 41
000	tion B. I onotes (mis dection B requests information about policies not required by the intomatri	ovonac coacy		Yes	No
1∩a	Does the organization have local chapters, branches, or affiliates?		10a		X
	If "Yes," does the organization have written policies and procedures governing the activities of such	chapters, affiliates,		1	
_	and branches to ensure their operations are consistent with those of the organization?	•	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	ling the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that con	uld give rise		·	
	to conflicts?		12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes," descnbe			
	ın Schedule O how this is done		120	<u> </u>	
13	Does the organization have a written whistleblower policy?		13	-	X
14	Does the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and approve				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			<b>.</b>	1
	The organization's CEO, Executive Director, or top management official		15a		<u> </u>
b	Other officers or key employees of the organization		15b	Α.	1
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	mont with a			
юа	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangel taxable entity during the year?	HOIR WILLIA	16a	. [	x
<b>.</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate its participation	100	<u>'</u>	**
b	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org				l
	exempt status with respect to such arrangements?		16t	,	
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ►IN				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	「(501(c)(3)s only) availa	able for		
	public inspection. Indicate how you make these available. Check all that apply				
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	onflict of interest policy	y, and fir	ancial	
	statements available to the public			_	
20	State the name, physical address, and telephone number of the person who possesses the books a	nd records of the organ	nization	<b>-</b>	
	Cindy Crawford - 574-259-0522	<del></del>			
	3515 N. Main, Suite C, Mishawaka, IN 46545		For	n <b>990</b>	(2010)
			1 (1)		(2010)

orm 990 (2010)	Scholarship	Foundation of	of St.	Joseph Co	ou 35-6042497	Page 7
				<del> </del>		

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

\* Check if Schedule O contains a response to any question in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			(C				(D)	(E)	(F)	
Name and Title	Average			Posi				Reportable	Reportable	Estimated	
	hours per	(cl	neck	allt	hat	app	ly)	compensation from	compensation from related	amount of other	
	week (describe	ector		ļ				the	organizations	compensation	
	hours for	- <del>-</del>	8			ated		organization	(W-2/1099-MISC)	from the	
	related	rustee	trust		99,	mpen		(W-2/1099-MISC)		organization	
	organizations	Individual trustee or director	institutional trustee	<u>.</u>	Key employee	est co	=			and related	
	in Schedule O)	ligi	Instit	Officer	Key e	Highest compensated employee	<b>Former</b>			organizations	
Carla J. Robinson	· ·							-			
Development Director	30.00	X						2,190.	0.	0	
Stella C. Crawford									•	•	
Executive Director	30.00	X						29,101.	0.	0	
Joe Garrett									•	•	
President		<u> </u>		Х		-		0.	0.	0	
Tom Leland			1	7.7				0.	0.	0	
President - Elect	<del></del>			X_				0.		U	
Janet Horvath				х				0.	0.	0	
Vice President Mentoring		┢	├-	^		-		0.			
Doug Marsh				x				0.	0.	0	
Vice President Programs Tim Batalis				-							
Vice President Communications				x				0.	0.	0	
Pat Sloan											
Secretary				X				_0.	0.	0	
Chris Lauber					İ						
Treasurer		<u> </u>		X		<u> </u>	L	0.	0.	0	
Barb May											
Assistant Secretary			ļ	X	_	<u> </u>	<u> </u>	0.	0.	0	
Bob Rountree										•	
Assistant Treasurer		-		X		├	_	0.	0.	0	
		<u> </u>					<del> </del>				
						<u> </u>	_				
		$\vdash$	$\vdash$	$\vdash$	<u> </u>	+-					
			<u> </u>	_			_				
		-	$\vdash$		╁						
						1					

Рап	, ·	Statement of Rever	nue		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts		Federated campaigns	1a					
gra		Membership dues	1b					
an,		Fundraising events	1c					
igia		Related organizations	1d				excluded from tax under sections 512, 513, or 514	
Sim		Government grants (contribut	· ——					
ie tr	f	All other contributions, gifts, gran		111 674				
윤히		similar amounts not included abo		111,674.				
55	_	Noncash contributions included in lines	a 1a-1f \$		111,674.			ĺ
<del>-</del>	<u>n</u>	Total, Add lines 1a-1f		Business Code	111,0/4.			
	•			Business Code				
<u> </u>	2 a							
Ser	b							
E S	c d							
Program Service Revenue	e							
<u> </u>	f	All other program service reve	enue					
	q	Total. Add lines 2a-2f		<b></b>				
	3	Investment income (including	dividends, inter	est, and			•	
		other similar amounts)		▶ _	97,882.	97,882.		
.	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨 🛚				
	5	Royalties		▶				
1			(ı) Real	(II) Personal				
	6 a	Gross Rents						
	b	Less. rental expenses						
ł		Rental income or (loss)						
		Net rental income or (loss)		<u> </u>			<del> </del>	
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1,251,321	+				
}	b	Less: cost or other basis						
ĺ		and sales expenses Gain or (loss)	26,411.					
		Net gain or (loss)	20,411	<u>'</u>	26,411.	26,411		1
e e		Gross income from fundraising	•		20/4111	20/111		
Other Revenue		including \$ contributions reported on line						
윤		Part IV, line 18	a 10, 3 <del>00</del>	8,619.				
H.	h	Less direct expenses	b	0 600				
٥		Net income or (loss) from fun	_	<b>D</b>	-1,011.			-1,011.
		Gross income from gaming a	<del>-</del>					•
	_	Part IV, line 19	а					
	b	Less direct expenses	b					
		Net income or (loss) from gar	ning activities	<b>•</b>				
1		Gross sales of inventory, less						
		and allowances	а	ı <u></u>				
	b	Less cost of goods sold	b	·		Ì		
	С	Net income or (loss) from sale	es of inventory _					-
	_	Miscellaneous Reveni	ue	Business Code				
1	1 a							
	þ							
	С							<del> </del>
	d	All other revenue						<del>                                     </del>
		Total. Add lines 11a-11d			231 056	124,293.	0.	-1,011.
032009 12-21-10	2	Total revenue. See instructions.			234,330·	144,433.		Form <b>990</b> (2010)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3  All other organizations must comp	3) and 501(c)(4) organizat olete column (A) but are i			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S See Part IV, line 22	223,000.	223,000.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			00 040	
	trustees, and key employees	29,249.		29,249.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits	2,043.		2,043.	· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes	2,043.		2,043.	
11	Fees for services (non-employees)				
_	Management				
b	Legal	2,275.		2,275.	
	Lobbying	2,2,3.		2,2,00	
u	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			-	
g	Other				
12	Advertising and promotion	3,314.			3,314.
13	Office expenses	5,583.		5,583.	
14	Information technology				
15	Royalties				
16	Occupancy	15,851.		15,851.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		· · · · · · · · · · · · · · · · · · ·		
19	Conferences, conventions, and meetings				<del></del>
20	Interest				
21	Payments to affiliates	215.		215.	<del></del>
22	Depreciation, depletion, and amortization	1,275.		1,275.	
23	Insurance Ches expanses not covered	1,413.		1,213.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line			ł	
	24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	m	18,366.		18,366.	
h	Copier agreement	558.		558.	
c	000101 03100				
d					
e					
f	All other expenses				
25_	Total functional expenses. Add lines 1 through 24f	301,729.	223,000.	75,415.	3,314.
26	Joint costs. Check here   If following SOP				
	98-2 (ASC 958-720). Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising				
	solicitation		<del> </del>		5 000 (0010)

orm	990	(2010)	
OHILL	990	(2010)	

	•			:	(A) Beginning of year		<b>(B)</b> End of year			
П	1	Cash - non-interest-bearing			472.	1	734			
	2	Savings and temporary cash investments			38,630.	2	174,615			
	3	Pledges and grants receivable, net				3				
	4	Accounts receivable, net				4				
	5	Receivables from current and former officers, di	irectors, tru	ustees, kev						
		employees, and highest compensated employe								
		of Schedule L				5				
	6	Receivables from other disqualified persons (as	ceivables from other disqualified persons (as defined under section							
		4958(f)(1)), persons described in section 4958(c								
			b(t)(1)), persons described in section 4956(c)(3)(B), and contributing bloyers and sponsoring organizations of section 501(c)(9) voluntary							
		employees' beneficiary organizations (see instru				6				
Assets	7	Notes and loans receivable, net				7				
2	8	Inventories for sale or use		Γ		8				
`	9	Prepaid expenses and deferred charges			2,241.	9	2,269			
	10a	Land, buildings, and equipment cost or other								
		basis Complete Part VI of Schedule D	10a	12,205.						
	ь	Less accumulated depreciation	10b	12,205.	215.	10c	0			
	11	Investments - publicly traded securities				11				
	12	Investments - other securities See Part IV, line	11		4,147,641.	12	4,603,135			
	13	Investments · program-related See Part IV, line	11			13				
	14	Intangible assets		14						
	15	Other assets See Part IV, line 11				15				
	16	Total assets. Add lines 1 through 15 (must equ	ial line 34)		4,189,199.	16	4,780,753			
	17	Accounts payable and accrued expenses	2,873.	17	3,084					
	18	Grants payable		<u> </u>		18				
	19	Deferred revenue				19				
	20	Tax-exempt bond liabilities		<u> </u>		20	<del></del>			
8	21	Escrow or custodial account liability Complete	Part IV of S	Schedule D		21				
	22	Payables to current and former officers, directo								
		highest compensated employees, and disqualif	ied person	s Complete Part II						
<b>'</b>		of Schedule L		_		22				
	23	Secured mortgages and notes payable to unrela		[**	·	23				
	24	Unsecured notes and loans payable to unrelate	•	ties		24				
	25	Other liabilities. Complete Part X of Schedule D		-	0.053	25	2 004			
	26	Total liabilities. Add lines 17 through 25		77	2,873.	26	3,084			
		Organizations that follow SFAS 117, check he	ere 🕨 L	X and complete						
S		lines 27 through 29, and lines 33 and 34.			4 000 044		4 (00 227			
	27	Unrestricted net assets		-	4,090,244.	27	4,682,337			
0	28	Temporarily restricted net assets		-	96,082.	28	95,332			
	29	Permanently restricted net assets		<u>,</u> }		29				
2		Organizations that do not follow SFAS 117, c	check here	• ▶ L and						
ő		complete lines 30 through 34.				00				
, j	30	Capital stock or trust principal, or current funds		<u> </u>		30				
¥S	31	Paid-in or capital surplus, or land, building, or ed				31	<del></del>			
<b>y</b>	32	Retained earnings, endowment, accumulated in	ncome, or o	otner tunas	1 196 326	32	1 777 660			
	33	Total net assets or fund balances		-	4,186,326. 4,189,199.	33	4,777,669 4,780,753			
	34	Total liabilities and net assets/fund balances	<del></del>	,l	4,107,177.	34	Form <b>990</b> (2010			

032012 12-21-10

Form 990 (2010)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

10

Name of the organization

See section 509(a)(2). (Complete Part III.)

supporting organization, check this box

LHA For Paperwork Reduction Act Notice, see the Instructions for

a Type I

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

d Type III - Other

Schedule A (Form 990 or 990-EZ) 2010

Yes

Scholarship Foundation of St. Joseph Cou 35-6042497 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from

An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

describes the type of supporting organization and complete lines 11e through 11h.

b \_\_\_\_ Type II

activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

c \_\_\_\_ Type III · Functionally integrated

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (iii) Type of (vi) Is the organization in col. (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. (i) listed in your organization in col. support organization (i) organized in the (described on lines 1-9 governing document? (i) of your support? U.S.? above or IRC section (see instructions)) Yes

Form 990 or 990-EZ.

Schedule A (Form 990 or 990 EZ) 2010 Scholarship Foundation of St. Joseph Cou35-6042497 Page 2

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization · fails to qualify under the tests listed below, please complete Part III )

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants ")	118,305.	91,585.	45,067.	46,57 <u>2</u> .	111,674.	413,203.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	118,305.	91,585.	45,067.	46,572.	111,674.	413,203.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						7,849.
6	Public support. Subtract line 5 from line 4						7,849. 405,354.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	118,305.	91,585.	45,067.	46,572.	111,674.	413,203.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	136,251.	264,766.	-967505.	475,133.	782,408.	<u>691,053.</u>
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)			4,438.	-130.	-1,011.	3,297.
11	<b>Total support.</b> Add lines 7 through 10						1,107,553.
	Gross receipts from related activities,		•			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	
	organization, check this box and stor	here					
	ction C. Computation of Publ					· · · · · · · · · · · · · · · · · ·	26 60 %
	Public support percentage for 2010 (	• • • • • • • • • • • • • • • • • • • •	•	olumn (f))		14	36.60 %
	Public support percentage from 2009				4 - 00 4/00/	15	61.73 %
16a	33 1/3% support test - 2010.If the o	-			4 IS 33 1/3% OF M	ore, check this box	x and ►X
	stop here. The organization qualifies		•		lung 15 to 22 1/20/	or more sheet 45	
D	33 1/3% support test - 2009. If the o				iiile 15 is 33 1/3%	or more, check th	► □
4-	and stop here. The organization qual		• •		10 160 or 16h o	nd line 14 is 1004	or more
1/а	10% -facts-and-circumstances tes						
	and if the organization meets the "fact					t iv now the organ	iizatioii
	meets the "facts-and-circumstances"					70. and line 15 := 1	10% or
b	10% -facts-and-circumstances tes	-					
	more, and if the organization meets the				-		, 
10	organization meets the "facts-and-circ Private foundation. If the organization						
18	rivate loundation. If the organization	AT GIG TIOL CHECK A	50% OIT III 16 10, 108	<u>, , , , , , , , , , , , , , , , , , , </u>		dule A (Form 990	

032022 12-21-10

### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support				· · · · · · · · · · · · · · · · · · ·		
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not	  -		ļ			
include any "unusual grants ")						
2 Gross receipts from admissions,						
merchandise sold or services per-			]			
formed, or facilities furnished in any activity that is related to the		•		į		
organization's tax-exempt purpose		1				
3 Gross receipts from activities that						
are not an unrelated trade or bus-	ı		İ			
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf			}	1		
5 The value of services or facilities						
furnished by a governmental unit to		,				
the organization without charge						
6 Total, Add lines 1 through 5						
7a Amounts included on lines 1, 2, and		<del> </del>			<del>                                     </del>	
3 received from disqualified persons	ı	i	1			
b Amounts included on lines 2 and 3 received				<del> </del>		<del></del>
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b				<del> </del>		
8 Public support (Subtract line 7c from line 6)			<del> </del>	<del>                                     </del>		
Section B. Total Support			<u> </u>			
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	(a) 2000	(B) 2007	(0) 2000	(4) 2000	10/2010	
10a Gross income from interest,					<del>                                     </del>	
dividends, payments received on						
securities loans, rents, royalties			}			
and income from similar sources	<del></del>			<del> </del>	·	
b Unrelated business taxable income					ļ	
(less section 511 taxes) from businesses acquired after June 30, 1975						
•					<del> </del>	
c Add lines 10a and 10b  11 Net income from unrelated business		ļ <del>-</del>			<del> </del>	
activities not included in line 10b,						
whether or not the business is				Ì	1	
regularly carried on  12 Other income Do not include gain		-		<del>                                     </del>		
or loss from the sale of capital						
assets (Explain in Part IV)	<del></del>	<del> </del>		<del> </del>	<del>                                     </del>	
13 Total support (Add lines 9, 10c, 11, and 12)					F01/a)/0)	
14 First five years. If the Form 990 is for	tne organization	s tirst, second, thi	ra, τουπη, or τιπη t	ax year as a section	organiz (כ)(טומט organiz	ation,
check this box and stop here	io Support Do	roontogo	<del>.</del>	<del></del>		
Section C. Computation of Publ			naluma (f)		45	
15 Public support percentage for 2010 (		<u>-</u>	column (t))		15	%
16 Public support percentage from 2009 Section D. Computation of Invest					16	%
					147	
17 Investment income percentage for 20	•		ne 13, column (t))		17	%
18 Investment income percentage from:			and the same of the same of the same of the same of the same of the same of the same of the same of the same of	. 45	18   22 1/20/ and line 1	<u>%</u>
19a 33 1/3% support tests - 2010. If the						/ IS not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2009. If the						and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	nis box and see in	structions	▶∟

#### SCHEDULE D

(Form 990)

**Supplemental Financial Statements** 

➤ Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

2010
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

	Scholarship Foundation	of St. Joseph Cou	35-6042497
Par	t I Organizations Maintaining Donor Advised Fund	ds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6		
		a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing the	at the assets held in donor advised f	unds
	are the organization's property, subject to the organization's exclusiv	e legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors is	n writing that grant funds can be use	d only
	for charitable purposes and not for the benefit of the donor or donor	advisor, or for any other purpose con	ferring
	ımpermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the organization	n answered "Yes" to Form 990, Part	IV, line 7
1	Purpose(s) of conservation easements held by the organization (chec	k all that apply)	
	Preservation of land for public use (e.g., recreation or education	n) Preservation of an historic	cally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified cons	ervation contribution in the form of a	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure in	cluded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/1	7/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, e	extinguished, or terminated by the org	panization during the tax
	year ▶		
4	Number of states where property subject to conservation easement i		
5	Does the organization have a written policy regarding the periodic mo	onitoring, inspection, handling of	—, —,
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfo		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing		•
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(n)(4	Yes No
_	and section 170(h)(4)(B)(ii)?	mente in its revenue and evnence etc	
9	In Part XIV, describe how the organization reports conservation ease		
	include, if applicable, the text of the footnote to the organization's fin	ancial statements that describes the	organization's accounting for
Pai	conservation easements.  III Organizations Maintaining Collections of Art, I	distorical Treasures, or Othe	r Similar Assets
	Complete if the organization answered "Yes" to Form 990, Pal		
12	If the organization elected, as permitted under SFAS 116 (ASC 958),		and balance sheet works of art
	historical treasures, or other similar assets held for public exhibition,		
	the text of the footnote to its financial statements that describes these		or public dorrido, provido, irri dicixiv,
b	If the organization elected, as permitted under SFAS 116 (ASC 958),		d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education		
	relating to these items:	, c. 1556a of his factoration of public	some sing and and anothing amounts
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treasures,	or other similar assets for financial dai	
_	the following amounts required to be reported under SFAS 116 (ASC		
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	Assets included in Form 990, Part X		<b>&gt;</b> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2010

	dule D (Form 990) 2010 Scholar t III Organizations Maintaining C	ship Found							
L									
3	Using the organization's acquisition, accessing the check all that apply).	on, and other record	s, check any of the	rollowing tha	t are a si	gnincant	JS <del>e</del> OI IIS	collection i	tems
_	Public exhibition		Loan or evel	hange progra	me				
a	= -	d							
b									
C	Preservation for future generations				1		Dan	4 VIV	
4	Provide a description of the organization's co						se in Par	LAIV	
5	During the year, did the organization solicit of		•	•	er sımılar	assets	_	7 v	
Par	t IV Escrow and Custodial Arran	•	-		Vee!  to		Dort IV	Yes	<u> No</u>
Fai	reported an amount on Form 990, Pa	-	ete ir the organizatio	n answered	res to	romi 990	, Part IV,	illie 9, or	
40	Is the organization an agent, trustee, custod		liany for contribution	e or other as	eate not	ıncluded			
ıa		ian or other intermed	nary for contribution	is or other as	5612 1101	IIICIGGEG		Yes	□ No
	on Form 990, Part X?	and annuals to the fe	llavona tablas					_ 162	140
D	If "Yes," explain the arrangement in Part XIV	and complete the lo	llowing table					Amount	
	Danisa in a lange					40		Amount	
	Beginning balance					1c			
	Additions during the year					1d			
e	Distributions during the year					1e			
T	Ending balance	000 David V Iva-	010			1f		Yes	No
	Did the organization include an amount on F		217				L	_ tes	NO
Par	t V Endowment Funds. Complete		swered "Ves" to Fo	rm 990 Part	IV line 1				
· car	Endownient Lands: Complete		(b) Prior year	(c) Two year			aare hack	(e) Four ye	are back
4.	Decimina of wear balance	(a) Current year		(C) TWO year	S Dack	(a) Thies y	cais back	(e) roury	Jais Dack
1a	Beginning of year balance	4,167,722,	3,957,848.	<del></del>					
D	Contributions	135,181.	59 189.						<del></del>
C .	Net investment earnings, gains, and losses	772,381,	471,617.		-		<del></del> -	<del> </del>	
	Grants or scholarships	67,635,	62,665.		-				
е	Other expenditures for facilities		0.10 664						
	and programs	226,822.	240,661.		+			<del> </del>	
T	Administrative expenses	18,256,	17,606.						
g	End of year balance	4,762,571,	4,167,722,						
2	Provide the estimated percentage of the year								
	Board designated or quasi-endowment		_%						
D	Permanent endowment	% %							
C 		• •	ation that are hold a	nd administa	rad for th	oo oraanii	ration		
3a	Are there endowment funds not in the posse	ession of the organiza	alion mat are neid a	nu auministe	rea loi ti	le organiz	ation	[v	es No
	by.							3a(i)	es No X
	(i) unrelated organizations							3a(ii)	X
	(ii) related organizations  If "Yes" to 3a(ii), are the related organization	a hatad as required a	n Schodulo D2					3b	<del></del>
D	Describe in Part XIV the intended uses of the	· · · · · · · · · · · · · · · · · · ·						30	<del>l</del>
Par	t VI Land, Buildings, and Equipm			<del> </del>					
	Description of investment	(a) Cost or o		or other	(c) Ac	cumulate	hd	(d) Book v	/alue
	Description of anvestment	basis (investr	1	(other)		preciation	~	(a) Dook (	
10	Land	225.5 (11170011	, 50310	, ,					
	Buildings								
	Leasehold improvements	-					_		
	Equipment		1	2,205.		12,2	05.		0.
	Other					<u> </u>			
	. Add lines 1a through 1e (Column (d) must e	egual Form 990. Part	X, column (B). line 1	10(c))		-			0.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. Se	ee Form 990, Part X, line 1	or st. Joseph (	COU 35-6042497	1 age V
(a) Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valuation nd-of-year market value	
1) Financial derivatives			·	
2) Closely-held equity interests				
3) Other				
(A) Endowment	4,587,956	End-of-Year	Market Value	
(B) Beneficial interest in	ļ	<u> </u>		
(C) trust - Doug	15,179	End-of-Year	Market Value	
(D)	<u> </u>		·	
(E)				
<u>(f)</u>	-			
(G)		<u> </u>		
(H)				
(I)  Fotal (Col (b) must equal Form 990, Part X, col (B) line 12.)	4,603,135		· · · · · · · · · · · · · · · · · · ·	
Part VIII Investments - Program Related. S				
			ethod of valuation	
(a) Description of investment type	(b) Book value		nd-of-year market value	
(1)				
(2)	<del> </del>		•	
(3)			·	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	<u></u>			
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line				
(а	) Description		(b) Book val	lue
(1)	·			
(2)			<del></del>	
(3)		<del> </del>		
(4)				
(5)		·		
(6)				
(7)				
(8)				
(9)	· · · · · · · · · · · · · · · · · · ·			
Total. (Column (b) must equal Form 990, Part X, col (B) lin	15 )			
Part X Other Liabilities. See Form 990, Part X		-,**		
1. (a) Description of liability		(b) Amount		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) lir FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote	ne 25)	ments that reports the consider	liability for uncertain toy positions the de-	
2. FIN 48 (ASC 740)	to the organization's financial state	ments that reports the organization's	mapmity for uncertain tax positions under	
032053			Schedule D (Form 99	001 004

	dule D	(Form 990) 2010 Scholarship For Reconciliation of Change in Net Asset	oundation of Section states from Form 990 to	t. J Audite	oseph d Financ	Cou	35-6 atement	5042497 s	Page 4
1	Total r	revenue (Form 990, Part VIII, column (A), line 12)		•		1			
2		expenses (Form 990, Part IX, column (A), line 25)			Ī	2			
3		s or (deficit) for the year. Subtract line 2 from line 1				3			
4		nrealized gains (losses) on investments			-	4			
5		ed services and use of facilities			Ī	5			
6	Invest	ment expenses				6			
7	Prior p	period adjustments				7			
8	Other	(Describe in Part XIV)				8		•	
9	Total a	adjustments (net) Add lines 4 through 8				9			
10		s or (deficit) for the year per audited financial statem				10			
Par		Reconciliation of Revenue per Audited		nts Wil	th Revenu	ne be	r Return	<u> </u>	
1		revenue, gains, and other support per audited finance					1		
2		nts included on line 1 but not on Form 990, Part VIII	, line 12	1 1					
а		nrealized gains on investments		2a	<del> </del>				
b		ed services and use of facilities		2b					
C		veries of prior year grants		2c					
d		(Describe in Part XIV)		2d			.		
е		nes 2a through 2d					2e		
3		act line 2e from line 1					3	-	
4		nts included on Form 990, Part VIII, line 12, but not		1.1					
a		ment expenses not included on Form 990, Part VIII,	line /b	4a					
þ		(Describe in Part XIV)		4b					
C		nes 4a and 4b	000 Bart / (ran 10.)				4c 5		<del></del>
5 Par	† XIII	revenue. Add lines 3 and 4c. (This must equal Form Reconciliation of Expenses per Audite	ed Financial Stateme	nts W	ith Expen	ses p		rn	
1		expenses and losses per audited financial statemen				, , , , , , , , , , , , , , , , , , ,	1		
2		nts included on line 1 but not on Form 990, Part IX,							
- a		red services and use of facilities		2a					
b		year adjustments		2b					
c	-	losses		2c					
d		(Describe in Part XIV.)		2d					
		nes 2a through 2d					2e		
3		act line 2e from line 1					3		
4	Amou	nts included on Form 990, Part IX, line 25, but not o	n line 1:						
а		ment expenses not included on Form 990, Part VIII,		4a					
b	Other	(Describe in Part XIV)		4b					
С	Add li	nes <b>4a</b> and <b>4b</b>					4c		
		expenses Add lines 3 and 4c. (This must equal For	n 990, Part I, line 18.)				5		
		Supplemental Information							
		nis part to provide the descriptions required for Part							4, Part
		rt XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lii							
The	or	ganization uses the endown	ment funds to	prov	ride sc	nol	<u>arsnı</u>	os.	
					<del></del>				
								_	
	-				-				
								<del></del>	

Schedule D (Form 990) 2010

**SCHEDULE 1** (Form 990) Department of the Treasury Internal Revenue Service

Part

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

**2** Employer identification number 35-6042497 X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection ▶ Attach to Form 990. St. Joseph Cou Scholarship Foundation of General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization

Part IV, line 21, for any	in Iv, line 21, 10r any	(h) Purpose of grant or assistance			:	
	res to Form 990, Fal additional space is ne	(g) Description of non-cash assistance				
	lanization answered I can be duplicated if	(f) Method of valuation (book, FMV, appraisal, other)				
d States	omplete ir the org nan \$5,000 Part I	(e) Amount of non-cash assistance			:	
Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Il Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	United States. United States. U	(d) Amount of cash grant				
	d Organizations in the s box if no one recipier	(c) IRC section if applicable				rganizations
cedures for moni	Governments and 55,000 Check this	(b) EIN				nd government or
Σŀ	rection of the Assistance to Governments and Organizations in the United States. Complete if the Organization answered Tes. to Form 990, Part IV, iii rectionent that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government				<ul><li>2 Enter total number of section 501(c)(3) and government organizations</li><li>3 Enter total number of other organizations</li></ul>

Schedule I (Form 990) (2010)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2010) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Ö (d) Amount of non-cash assistance 0 We follow up with subsequent grades with scholarships. 。 223,000. 25 (c) Amount of cash grant 103 (b) Number of recipients (a) Type of grant or assistance See attached list, Scholarships, 032102 01-13-11 Part IV

Page 2

35-6042497

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

Scholarship Foundation of St. Joseph Cou

Schedule I (Form 990) (2010)

Part III

### **SCHEDULE O** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

**Employer identification number** 

Department of the Treasury Name of the organization ▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Scholarship Foundation of St. Joseph Cou	35-6042497
Form 990, Part VI, Section B, line 11: Presented to Presid	lent who then
presents to Executive Committee	
Form 990, Part VI, Section B, Line 12c: All abstentions fr	om voting are
noted in the minutes	
Form 990, Part VI, Section B, Line 15: Comparisons are made	le with local
payroll surveys for comparable positions	
Form 990, Part VI, Section C, Line 19: All are available 1	ipon request
Form 990, Part XI, line 5, Changes in Net Assets:	
Net unrealized gains on investments:	658,116.

## 2010-2011 STUDENT GRANTS

STUDENT	r	H.S.	COLLEGE	YEAR	AWARD	SPONSOR
Alexander	Andrew	John Glenn	IUPUI	Fresh	2,000	Jerry Hofferth
Barrett	Colleen	Clay	Purdue University	JR	2,000	Anne Hillman
Blanche	Emily	Marian	Butler University	JR	2,000	Matthew Krathwohl
Bolden	Mychai	Adams	Purdue University	SR	2,000	Darran Teamor
Bujeker	Evan	Saint Joseph's	Andrews University	SR	2,000	Bill Bollinger
Burnett	Benjamin	Clay	Valparaiso University	Fresh	2,000	William Vail
Burns	TheaMarie	HomeSchooled	IUSB	SOPH	, 2,000	Janet F. Hall
Byers	Andrew	Adams	Indiana University	Fresh	2,000	Jim Guibert
Caponigri	Felicia	Trinity	University of Notre Dame	JR	2,000	Anne Hillman
Carney	Kathleen	Adams	Indiana University	JR	2,000	Jeanne Skelton
Chung	Cheng Han	Clay	University of Michigan	JR	2,000	Charles Harrington
Clark	Andrea	Clay	Indiana University	SR	3,000	Mary Jane Stanley
Cook	Emily	Marian	Purdue University	SR	4,000 James M. Wilson	1 Jack Gordon
Couch	Calla	Trinity	Saint Mary's College	Fresh	2,000	Paula Miller
Daniels	Emily	HomeSchooled	Bethel College	Fresh	1,250 Laidig	James Considine
Davison	Ashley	Penn	Indiana Wesleyan	SR	2,500	Bill Bollinger
Deranek	Lauren	Marian	Indiana University	JR	2,000	Sue Bowman
DeWulf	Cassandra	Mishawaka	Ohio Northern University	Fresh	2,000	Suzanne Cierzniak
Dits	Christine	Trinity	Saint Mary's College	SR	2,000	Ray Larson
Dits	Michael	Trinity	Indiana University	SOPH	2,000	Tim Batalis
Drudge	Katelyn	Penn	Indiana University	SOPH	2,000	Harry Shaffer
Enis	Heather	Riley	Purdue University	Fresh	2,000 SB Lions/SF	Elizabeth McLaughlin
Etlenne	Andrea	Washington	University of Notre Dame	SR	2,000	Lyndal Fox
Evans	Abigall	Mishawaka	Ball State University	SOPH	2,000	John Yarger
Fairchild	Paige	Mishawaka	Saint Mary's College	SR	2,000	Joseph Garrett
Fairchild	Emily	Mishawaka	Saint Mary's College	SOPH	2,000	Ann Korb
Feeks	Anne	Trinity	Indiana University	SR	2,500	Carol J. Evans
Feeks	Mary	Trinity	Marymount University	Fresh	2,000	Lynne Wright
Fisher	Timothy	Mishawaka	Indiana University	SR	2,500	Robert Rountree

STUDEN	T	H.S.	COLLEGE	YEAR	AWARD	SPONSOR
Ford	Ariella	Mishawaka	DePauw University	SOPH	2,000	Janet Horvath
Garcia	Brenda	Washington	IUSB	JR	2,000	Rebecca Ruvalcaba
Garcia	Izamar	Washington	Goshen	JR	2,000	John Yarger
Geissler	Rachel	Adams	Indiana University	SOPH	2,000	Ed Everett
Giver	Kimberiy	Washington	Northern Michigan University	JR	2,500	Joyce Harrington
Gray	Amanda	Mishawaka	University of Notre Dame	JR	2,000	Mary Nucciarone
Green	Austin	Clay	Indiana University	Fresh	2,000	Geoffrey Newman
Green	Samuel	Riley	Ball State University	SOPH	2,000	Bruce BonDurant
Green	Kayla	Penn	Ball State University	SOPH	2,000	Joyce Harrington
Griggs	Gabriel	Trinity	University of Notre Dame	Fresh	2,000	James Connelly
Grondin	Michelle	Trinity	University of Minnesota	JR	2,000	Jeanette Moeller
Hamilton	Jordan	Trinity	Indiana University	SOPH	2,000	Darran Teamor
Hamma	Christine	Clay	University of Notre Dame	JR	2,000	Winifred Farquhar
Havard	Katharine	Trinity	IUPUI	Fresh	2,000	Susan Devetski
Hesch	Katle	Mishawaka	Purdue University	SR	2,000	Winifred Farquhar
Hinnefeld	John	Riley	Cornell University	SR	2,500	Keith Fulmer
Hinnefeld	William	Riley	University of Cincinnati	Fresh	2,500 Laidig	Douglas Wait
Hudak	Lauren	Saint Joseph's	Purdue University	Fresh	2,000	Harry Shaffer
Jagla	Claire	Marian	DePauw University	JR	2,000	Janet Horvath
Jeong	Ji Woong	Saint Joseph's	Purdue University	Fresh	2,000	Alfred Nelson
Jones	Kristina	Penn	Purdue University	Fresh	2,000	Ann Leonard Molenda
Kanema	Katendi	Mishawaka	IUSB	Fresh	2,000	Myrtle Wilson
Kazmierczak	Andrew	Washington	Butler University	SOPH	5,000 Bertha Kiel	Joseph Garrett
Keve	Bryan	Penn	University of Notre Dame	SR	2,000	Doug Osthimer
Kimm	Alexandra	Adams	Ball State University	Fresh	2,000	Liane Albert
Knutson	Allyson	Penn	Tulane	SOPH	2,000	Patricia Sloan
Kolecki	Lauren	Washington	Purdue University	SOPH	2,000	Becky Anson
Kostry	Neai	Mishawaka	Purdue University	JR	2,000	Ed Everett
Laird	Rhlannon	Penn	Rocky Mountain College	SOPH	2,000	Joyce Kuehl
LeRoy	Alicia	Penn	Saint Mary's College	SR	2,500	Ann Korb
Leszczynski	Elyse	Washington	IUPUI	SR	2,000	Patricia Sloan

STUDENT		H.S.	COLLEGE	YEAR	AWARD SI	ONSOR	
Louderback	Sarah	Mishawaka	Indiana University	SOPH	2,000	Michelle Hammer	
Lukas	Joshua	Clay	Bethel College	JR	5,000 Bertha Kiel	Lyndal Fox	
Madera	Sergio	Riley	Butler University	SOPH	2,000	David Dunlap	
Mangus	Tyler	Marian	IUSB	SR	2,500	Bruce BonDurant	
Marshall	Benjamin	Mishawaka	Taylor University	JR	2,000	Larry Landy	
McMahon	Megan	Marian	Purdue University	Fresh	2,000	Bill Kıllılea	
McMahon	Michael	Marian	University of Notre Dame	SR	5,000 Bertha Kiel	Doug Marsh	
McMahon	Kevin	Marian	Purdue University	JR	2,000	Ray Larson	
Miltenberger	Brina	New Prairie	Hope College	Fresh	2,000	Anne McGraw	
Miramontes	Rocio	Penn	University of Notre Dame	JR	2,000	Janet F. Hall	
Morton	Daniel	Clay	Purdue University	SR	2,000	D. Scott Brennan	
Nowak	Michelle	Saint Joseph's	IUSB	JR	2,000	Genelle King	
Racz	Hayley	Washington	Saint Mary's College	JR	2,000	Doug Marsh	
Rassi	Therryn	Penn	Saint Mary's College	SR	2,000	Amy Karkiewicz	
Reisdorf	Matthew	Mishawaka	Indiana University	Fresh	2,000 Mary E. Nicholson	Ronald Troyer	
Reist	Alison	Washington	Goshen	SOPH	2,000	James Hart	
Remiey	Katherine	Saint Joseph's	University of Notre Dame	JR	2,000	Mary Nucciarone	
Rhodes	Jared	John Glenn	IU-Purdue, Ft. Wayne	SOPH	2,000	John W. Toth	
Roush	Kenneth	Riley	Purdue University	SOPH	1,250		
Schmeltz	Erlca	LaVille	Indiana Wesleyan	SOPH	2,000	Janet B. Hall	
Schmidt	Jason	Penn	Ball State University	SOPH	2,000	Becky Anson	
Schmitt	Katherine	Saint Joseph's	University of Notre Dame	Fresh	2,000 Garcia/SF	Mary Jane Stanley	
Shenefield	Michael	Clay	Valparaiso University	JR	2,000	F. Peter Braasch	
Shuman	Collin	Trinity	Indiana University	SOPH	2,000	Peter Rumely	
Slaby	Mary Jane	New Prairie	Indiana University	JR	2,000	Genelle King	
Smith	Kathryn	John Glenn	IUSB	Fresh	1,000	Sara Miller	
Stukel	Amanda	Trinity	Saint Mary's College	SOPH	2,000	Thomas Leland	
Summers	Calla	Granger Christian	Hope College	SR	2,000	Rick Bliha	
Szczechowski	Terrence	Washington	IVY Tech	SOPH	2,000	Rick Bliha	
Uebbing	Monica	Saint Joseph's	Xavler University	JR	2,500 Mary Ann Zgodzinsk	i Joyce Kuehl	
Usabyimana	Annah	Adams	IUSB	Fresh	2,000	Myrtie Coleman	

STUDENT		H.S.	COLLEGE	YEAR	AWARD	SPONSOR
Voelker	Mark	Marian	St. Norbert College	JR	2,000	Michael Heintz
Voelker	Margaret	Marian	Miami University	SR	2,000	James Considine
Waldschmidt	Helen	Riley	Purdue University	JR	2,000	Christine Lauber
Walker	Joshua	Penn	Wheaton College	JR	2,000	Randy Rompola
Wallace	Erika	Riley	Saint Mary's College	SOPH	2,000	Larry Landy
Warnock	Katie	LaVille	Purdue University	SR	2,000	Sue Bowman
West	Alexander	Mishawaka	University of Notre Dame	JR	2,000	John W. Toth
Zeiger	Katherine	Mishawaka	Butler University	Fresh	5,000 Bertha Kiel	Mary Anne Hurst
Zientara	Michael	Saint Joseph's	Marquette	SOPH	2,000	Barbara May
Zloikowski	Angela	Adams	Ball State University	JR	2,000	David Dunlap
Zoellner	Amber	John Glenn	Savannah College of Art and Design	\$R	2,500	Tim Batalis