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Form 990-PF

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

OMB No 1545-0052

2011

Department of the Treasury

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2011 or tax year beginning , and ending Name of foundation Employer Identification number HIRT FAMILY FOUNDATION, INC 27-1547947 Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) 3801 E. RACHELS GLEN ROAD City or town, state, and ZIP code If exemption application is pending, check here BLOOMINGTON IN 47408 G Check all that apply Initial return of a former public charity Initial return 1. Foreign organizations, check here Amended return Final return 2. Foreign organizations meeting the Address change Name change 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation section 507(b)(1)(A), check here Fair market value of all assets at J Accounting method Cash If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 28 (Part I, column (d) must be on cash basis) Analysis of Revenue and Expenses (The total of (d) Disbursements Part I (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal . expenses per income income books purposes the amounts in column (a) (see instructions)) cash basis only) 10,000 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ if the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on tine 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10a Gross sales less returns & allowances Less Cost of goods sold C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 10,000 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc g and Administrative Expenses Other employee salaries and wage: 14 Pension plans, employee benefits CEIVED 15 OSC Legal fees (attach schedule) Accounting fees (attach schedule) 2 5 2012 Other professional fees (attach schedule) 17 Taxes (attach schedule) (see instructions) EN, LIT Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings Printing and publications STMT 1 18 Other expenses (att. sch.) Total operating and administrative expenses. Add lines 13 through 23 6.250 6.250 25 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 6,268 Subtract line 26 from line 12. 27 Excess of revenue over expenses and disbursements 3,732 0 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

	-	-RF (2011) HIRT FAMILY FOUNDATION, INC		27-154794		Page 2
1	Part I	Balance Sheets Attached schedules and amounts in the description colur should be for end-of-year amounts only (See instructions		Beginning of year		of year
7	1	Cash—non-interest-bearing	-	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	2	Savings and temporary cash investments		25,000	28,732	28,732
	3	Accounts receivable		· · · · · · · · · · · · · · · · · · ·		<u> </u>
- [•	Less allowance for doubtful accounts				!
-	4	Pledges receivable				
-	•	Less. allowance for doubtful accounts		•		†
-	5	Grants receivable				
1	6					
ŀ	0	Receivables due from officers, directors, trustees, and other				
-		disqualified persons (attach schedule) (see				
	7	instructions)				<u> </u>
1	,	Other notes and loans receivable (att. schedule)	^			1
		Less: allowance for doubtful accounts	0			
Assets	8	Inventones for sale or use				
SS	9	Prepaid expenses and deferred charges				
٩	10a	Investments—U S and state government obligations (attach schedule)				
ł	Ь	Investments—corporate stock (attach schedule)				
1	C	Investments—corporate bonds (attach schedule)				
1	11	Investments—land, buildings, and equipment: basis				‡
1		Less accumulated depreciation (attach sch.)				
1	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
1	14	Land, buildings, and equipment. basis				•
ł		Less accumulated depreciation (attach sch.)				
-	15	Other assets (describe)		·	
-	16	Total assets (to be completed by all filers—see the				
-		instructions. Also, see page 1, item I)	-	25,000	28,732	28,732
	17	Accounts payable and accrued expenses			<u> </u>	
္တ	18	Grants payable				
abilities	19	Deferred revenue				
≣	20	Loans from officers, directors, trustees, and other disqualified persons				
림	21	Mortgages and other notes payable (attach schedule)				Į.
_	22	Other liabilities (describe ▶)			
4	23	Total liabilities (add lines 17 through 22)		0	0	
		Foundations that follow SFAS 117, check here				
S		and complete lines 24 through 26 and lines 30 and 31.				
2	24	Unrestricted				
흕	25	Temporanly restricted				
9	26	Permanently restricted				
S		Foundations that do not follow SFAS 117, check here	► X			
빏		and complete lines 27 through 31.				
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds		25,000	28,732	
Se	28	Paid-in or capital surplus, or land, bldg , and equipment fund				[
B	29	Retained earnings, accumulated income, endowment, or other funds				į.
힐	30	Total net assets or fund balances (see instructions)		25,000	28,732	Į.
4	31	Total liabilities and net assets/fund balances (see				
_		instructions)		25,000	28,732	
	Part II					·
1		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must a	gree with	ļ	
		f-year figure reported on prior year's return)			1	25,000
2	Enter	amount from Part I, line 27a				1 2 7 7 7

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5

3 Other increases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

5 Decreases not included in line 2 (itemize) ▶

4 Add lines 1, 2, and 3

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income				
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acq (mo , day,		(d) Date sold (mo , day, yr)
1a N/A						
b						
<u>C</u>		- 				
_d				<u> </u>		
е			L			-
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		(h) Gain (e) plus (f)	
_a						
<u>b</u>						
<u>c</u>						
e						
	gain in column (h) and owned by the four	ndation on 12/31/69		(1) (2)	anna (Cal	(h) nain minus
(I) F M ∨ as of 12/31/89	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	coi(i	(), but not I	(h) gain minus less than -0-) or lom col (h))
a			•			
b						
<u>c</u>						
d	· · · · · · · · · · · · · · · · · · ·					
8		<u> </u>		<u> </u>		
2 Capital gain net income or (net ca	ipital loss) If gain, also enter in If (loss), enter -0- in			2		
If gain, also enter in Part I, line 8,	s) as defined in sections 1222(5) and (6): column (c) (see instructions) If (loss), en					
Part I, line 8	d 04 4040(-) f B4			3		
	nder Section 4940(e) for Reduc			me		
	foundations subject to the section 4940(a) tax on net investme	nt income.)			
If section 4940(d)(2) applies, leave thi	s part blank					
	on 4942 tax on the distributable amount of fy under section 4940(e). Do not complete		e period?			Yes X No
1 Enter the appropriate amount in e	ach column for each year; see the instruc	tions before making a	any entries			·
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) e of noncharitable-use asse	18		(d) ribution ratio Irvided by col (c))
2010			24,	625		
2009						
2008						
2007						
2006		<u></u> .				
2 Total of line 1, column (d)				2		
	s-year base period—divide the total on line	e 2 by 5, or by the				
•	as been in existence if less than 5 years	, . , ,		3		
4 Enter the net value of nonchantal	ole-use assets for 2011 from Part X, line 5	5		4		24,778
5 Multiply line 4 by line 3				5		
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		0
8 Enter qualifying distributions from		and complete that	t veing a 40/ tow	Soo tho		6,268
Part VI instructions	line 7, check the box in Part VI, line 1b, a		tusing a 176 tax rate	. See lile		

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	-	1			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check						
	here ▶ X and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of		1			
	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	3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<u> </u>			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	<u> </u>			(
6	Credits/Payments		Ī			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a		Ī			
þ	Exempt foreign organizations—tax withheld at source 6b		•			
C	Tax paid with application for extension of time to file (Form 8868) 6c		•			
d	Backup withholding erroneously withheld 6d		I			
7	Total credits and payments. Add lines 6a through 6d TAX PAID W/O.R. 289	7				289
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		•		289
1	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 0 Refunded ▶	11				289
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					
	of the instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					I
	published or distributed by the foundation in connection with the activities.					Ī
С	Did the foundation file Form 1120-POL for this year?		N/A	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					I
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	_				l
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					I
	on foundation managers. > \$					Ī
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					l
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					Ī
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	···· · ·	X
	If "Yes," attach the statement required by General Instruction T.					I
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					ı
	By language in the governing instrument, or					I
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				3.7	ŧ
	conflict with the state law remain in the governing instrument?			6_	<u>X</u>	ļ
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	X	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) IN					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					ŧ
	(or designate) of each state as required by General Instruction G? if "No," attach explanation			8b	X	<u> </u>
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					•
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"		1			
	complete Part XIV			9		X
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	_				l
	names and addresses STMT 2	2		10	X	<u> </u>

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P	art VII-B Statements Regard	ling Activities for Which Fo	orm 4720 May Be Re	equired (conti	nued)		
5a	During the year did the foundation pay o	r incur any amount to					
	(1) Carry on propaganda, or otherwise a	attempt to influence legislation (secti	ion 4945(e))?	Π,	res X No		
	(2) Influence the outcome of any specific	c public election (see section 4955);	or to carry on,	_	_		
	directly or indirectly, any voter regist	ration drive?			res X No		
	(3) Provide a grant to an individual for tr	avel, study, or other similar purpose	es?	, []	res X No		
	(4) Provide a grant to an organization of	her than a charitable, etc , organiza	tion described in	_	_		
	section 509(a)(1), (2), or (3), or sect	on 4940(d)(2)? (see instructions)			res X No		
	(5) Provide for any purpose other than r	eligious, charitable, scientific, literar	y, or educational	_			
	purposes, or for the prevention of cr	uelty to children or animals?			res X No		
b	If any answer is "Yes" to 5a(1)-(5), did a	ny of the transactions fail to qualify	under the exceptions desc	ribed in	_		
	Regulations section 53 4945 or in a curre	ent notice regarding disaster assista	nce (see instructions)?		N/A	5b	
	Organizations relying on a current notice	regarding disaster assistance chec	k here		▶ 🗍		
С	If the answer is "Yes" to question 5a(4),	does the foundation claim exemption	n from the tax				
	because it maintained expenditure response	nsibility for the grant?		N/A 🗍 🕆	res No		
	If "Yes," attach the statement required by	Regulations section 53 4945-5(d)			_		
6a	Did the foundation, during the year, rece		o pay premiums				
	on a personal benefit contract?	•	-		res X No		
b	Did the foundation, during the year, pay	oremiums, directly or indirectly, on a	personal benefit contract	?		6b	X
	If "Yes" to 6b, file Form 8870.	- ·					
7a	At any time during the tax year, was the	foundation a party to a prohibited tax	x shelter transaction?		res X No		
b	If Yes, did the foundation receive any pro-	oceeds or have any net income attrib	outable to the transaction?	·	N/A	7b	
P	art VIII Information About O	fficers, Directors, Trustees	, Foundation Mana	gers, Highly I	Paid Employe	es,	
	and Contractors						
1 1	ist all officers, directors, trustees, fou	ndation managers and their com	pensation (see instruction	ons).			
	(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		pense account, er allowances
ED	WARD HIRT	BLOOMINGTON	PRES/TREAS		,		
	01 E RACHELS GLEN RD	IN 47408	1.00	0	، ا		(
	THLEEN MCTIGUE	BLOOMINGTON	SECRETARY				
38	01 E RACHELS GLEN RD	IN 47408	1.00	o			(
						1	
			<u> </u>			1	
						1	
2	Compensation of five highest-paid er	nployees (other than those includ	ded on line 1—see instru	ictions). If none,	enter		•
	"NONE."						
	(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		pense account, er allowances
NC	NE						
							. ***
						<u></u>	
	I number of other employees paid over \$5						

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Part VIII	Information About Officers, Directors, Trustees, Fou and Contractors (continued)	ındation Managers, Highly Paid En	
3 Five high	nest-paid independent contractors for professional services (see ins	structions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		l.	
otal number o	f others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
	i's four largest direct chantable activities during the tax year. Include relevant statistical information other beneficiaries served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			
2	••		
3			
•			
			ļ
4			
Part IX-8	Summary of Program-Related Investments (see ins	structions)	<u> </u>
	argest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
		•	
All other program-	related investments. See instructions		
3			
otal Add lines	: 1 through 3	•	1

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	foundations,	
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	0
b	Average of monthly cash balances	1b	25,155
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	25,155
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	0
3	Subtract line 2 from line 1d	3	25,155
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	377
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	24,778
6	Minimum Investment return. Enter 5% of line 5	6	1,239
Pŧ	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	<u> </u>	
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	1,239
2a	Tax on investment income for 2011 from Part VI, line 5		-/
b	Income tax for 2011. (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,239
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,239
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1,239
P	rt XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	6,268
þ	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.,	ŀ	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
a	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	6,268
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 instructions)	5	0

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

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6,268

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Pa	art XIII Undistributed Income (see instructions)				
1	Distributable amount for 2011 from Part XI,		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
_	line 7			***************************************		1,239
2	Undistributed income, if any, as of the end of	1 2011				
a					1,231	
b	· · · · · · · · · · · · · · · · · · ·				· ·	
3	Excess distributions carryover, if any, to 201	1.				
a						•
b						*
C	_					
d				,		
_	From 2010	· · · · · · · · · · · · · · · · · · ·				
f 4	Total of lines 3a through e					
4	Qualifying distributions for 2011 from Part X	II,				
_	line 4: \\$ 6,268				1 001	
	Applied to 2010, but not more than line 2a				1,231	Hinton I
D	Applied to undistributed income of prior year	\$				
_	(Election required—see instructions)					
C	Treated as distributions out of corpus (Elect	ion				
_	required—see instructions)	:				
	Applied to 2011 distributable amount		2 700			1,239
	• • • • • • • • • • • • • • • • • • • •		3,798			
5	Excess distributions carryover applied to 20					
	(If an amount appears in column (d), the sar	ne				
e	amount must be shown in column (a))					
6	Enter the net total of each column as		, , ,			
_	indicated below:	5	2 700			
	Corpus Add lines 3f, 4c, and 4e Subtract III	ne 5	3,798			
D	Prior years' undistributed income Subtract line 4b from line 2b					
_		4	1-1-11-11-11-11-1			11.1
U	Enter the amount of prior years' undistribute income for which a notice of deficiency has	u ;				_
	been issued, or on which the section 4942(a					
	tax has been previously assessed	''				
A	Subtract line 6c from line 6b Taxable		· · · · · · · · · · · · · · · · · · ·			
u	amount—see instructions					,
_	Undistributed income for 2010 Subtract line					
•	4a from line 2a Taxable amount—see			,		
	instructions					
f	Undistributed income for 2011 Subtract line				· · · · · · · · · · · · · · · · · · ·	
1	4d and 5 from line 1 This amount must be	•			,	
	distributed in 2012					0
7	Amounts treated as distributions out of corporate	ıs				····
•	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (see instructions)					
8	Excess distributions carryover from 2006 no			***************************************		***************************************
•	applied on line 5 or line 7 (see instructions)	`				
9	Excess distributions carryover to 2012.		-			······································
-	Subtract lines 7 and 8 from line 6a		3,798			
0	Analysis of line 9	ł	······································	2 1 11 1 11 11 11 11 11 11 11 11 11 11 1		· · · · · · · · · · · · · · · · · · ·
а	Excess from 2007		1		,	
b	Excess from 2008		I			
C	Excess from 2009		1			
d	Excess from 2010		1			
е	Excess from 2011	3,798				,

P	art XIV Private Operating For	undations (see in:	structions and Par	VII-A, question 9)				
1a	If the foundation has received a ruling or o								
	foundation, and the ruling is effective for 2	2011, enter the date of	the ruling	•					
b	b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years					
	income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total			
	investment return from Part X for				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	each year listed								
b	85% of line 2a				<u> </u>				
С	Qualifying distributions from Part XII,								
	line 4 for each year listed								
d	Amounts included in line 2c not 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	ļ							
•	alternative test relied upon								
а	"Assets" alternative test—enter								
	(1) Value of all assets								
	(2) Value of assets qualifying under	<u></u>							
	section 4942(j)(3)(B)(i)								
b	"Endowment" alternative test—enter 2/3					 			
	of minimum investment return shown in					1			
	Part X, line 6 for each year listed								
_	"Support" alternative test—enter	····							
С			:]					
	(1) Total support other than gross investment income (interest,		•						
	dividends, rents, payments on				•	•			
	securities loans (section								
	512(a)(5)), or royalties)								
	(2) Support from general public								
	and 5 or more exempt								
	organizations as provided in								
	section 4942(j)(3)(B)(iii)				<u> </u>				
	(3) Largest amount of support from								
	an exempt organization								
D.	(4) Gross investment income	action (Commists	4hi	ha farradatian ha	d 65 000 as =====	!n44			
F¢	rt XV Supplementary Inform		•	ne roundation na	a \$5,000 or more	in assets at			
1	any time during the ye		10115.)		 				
-	Information Regarding Foundation Ma List any managers of the foundation who I	-	than 204 of the total cor	tributions recoived by	the foundation				
а	before the close of any tax year (but only i			•	ine touridation				
	N/A	i they have contributed	more than \$5,000). (O	cc sccion 507 (d)(2))					
b	List any managers of the foundation who	own 10% or more of the	e stock of a comoration	/or an equally large no	etion of the				
•	ownership of a partnership or other entity)		•						
	N/A								
2	Information Regarding Contribution, G	rant. Gift. Loan. Scho	olarship, etc., Program						
_			preselected charitable		s not accept				
			·	-	•				
	unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d								
а	The name, address, and telephone number		m applications should b	e addressed	· · · · · · · · · · · · · · · · · · ·				
-	N/A	,							
	•								
b	The form in which applications should be s	submitted and informat	on and materials they s	should include		······································			
	N/A		<u> </u>						
С	Any submission deadlines								
	N/A	·							
d	Any restrictions or limitations on awards, s	uch as by geographica	l areas, charitable field:	s, kınds of institutions, o	or other				
	factors								
	N/A		-·						

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year BLOOMINGTON HOSPITAL FOUNDATION 405 N ROGERS BLOOMINGTON IN 47404 250 SISTER OF MERCY 7262 MERCY RD OMAHA NE 68124-2389 1,000 UNIVERSITY OF IOWA PO BOX 1970 IOWA CITY IA 52244-1970 1,000 ST PAUL'S CATHOLIC CENTER 1413 EAST 17 TH STREET BLOOMINGTON IN 47408 3,000 IU SCHOOL OF MEDICINE 340 WEST 10TH STREET INDIANAPOLIS IN 46202 1,000 6,250 **Total** ▶ 3a b Approved for future payment N/A **Total ▶** 3b

- × 2×2×1		141			* · · · · · · · · · · · · · · · · · · ·	i age 12
	Analysis of Income-Producing Activunts unless otherwise indicated.	T	ad husings page	Evaludo	d by control 512 512 or 514	
inter gross amo	unts unless otherwise indicated.	(a) Business code	ed business income (b) Amount	(c) Exclusion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program ser	vice revenue		,,,,,,	code	Amount	(See instructions)
a						
b						
c				ļ		·
				.		
f	I control from a constant and a constant	<u> </u>				
	d contracts from government agencies dues and assessments			1		
-	avings and temporary cash investments					
	d interest from securities					
	come or (loss) from real estate					***
	anced property			·		
	-financed property					
	come or (loss) from personal property					
7 Other investi	ment income					
8 Gain or (loss) from sales of assets other than inventory			l		
	or (loss) from special events			ļ		
	or (loss) from sales of inventory	···		 		
	ie. a			ļ		
				 		
				 		
				 		
ee	d columns (b), (d), and (e)	···········	0		0	C
	ne 12, columns (b), (d), and (e)	<u> </u>	<u> </u>	l	13	
	n line 13 instructions to verify calculations)					
Part XVI-B	Relationship of Activities to the Ac	complishm	ent of Exempt Pu	rpose	3	·
Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpose)
N/A		•		·····		· <u>·</u>
	 					
	_					

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		·- · · · · · · · · · · · · · · · · · ·			<u> </u>	
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i						
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Part)	(VII	Information Rega				ns and Relationship		Noncharit	table	Pa	ge IS
		Exempt Organiza				····	- 				
						er organization described			, , , ,	Yes	No
			r than section	501(c)(3) organiz	ations) or in sect	ion 527, relating to politica	al				ĺ
_	anization:										
		om the reporting founda	ation to a non	charitable exempt	organization of						
• •	Cash								1a(1)		X
• •	Other as								1a(2)		X
	ner transa										ļ
• •		assets to a nonchanta	•	•					1b(1)	ļ. — .	X
		es of assets from a no		•	1				1b(2)		X
		f facilities, equipment,	or other asse	is ·					1b(3)		X
		rsement arrangements							1b(4)		X
		r Ioan guarantees	mhombin or f	hundrausina opliaita	tions				1b(5)		X
		ance of services or me							1b(6)		$\frac{\hat{x}}{x}$
	-	icilities, equipment, ma	-			n (b) should always show	tha fair ma	andra 4	1c	L	
						e foundation received less					
		=	_		-						
(a) Li		(b) Amount involved	1	e of nonchantable exem		e goods, other assets, or (d) Description of			ring arrangemen	nte	
1/A		(5) 1110	(6)		pr organization	(a) bossipasii si		oddiono, and one	ang artangomo		
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			· · · · · · · · · · · · · · · · · · ·			 					
									·		
									 		
						<u> </u>					
2a Is i	the founda	ation directly or indirect	ly affiliated wi	ith, or related to, o	ne or more tax-e	xempt organizations			_		_
de	scnbed in	section 501(c) of the C	Code (other th	nan section 501(c)	(3)) or in section	527?			Y	es X	No
b If"	Yes," con	plete the following sch	edule.								
		a) Name of organization		(b) Type of	organization		(c) Descripti	on of relationship			
N/	A.					<u></u>					
		·					 				
											
	l ladas ass	allos of source I dealers the	at I house exemine	ad this makes including	annomen and acho	tules and statements, and to the	hast of my k	nowledge and he	hef it is this		
1						hich preparer has any knowledg					—
1									RS discuss this reparer shown be		ı
İ		11	1 1	(1	-			(see instr		Yes	No
Sign	L -	9/1/	11 61	17	رسما	14/2012	DDEC.	IDENT			
lere	Signs	ature of officer or trustee	/ <u>_</u>		10/	THE THE	the	LDENI			
					Proposed at a 1				Data	<u> </u>	
aid	Pnnt/Ty	pe preparer's name			Preparer's signatu	/			Date	Check	
aid Transmi	STED	HANIE COBB CPA	7		Strok	arie (obb Ci	PA	4	5/11/12	sen-en	nployed
repare: Ise Only			1 & CO.	, P.C., (CPA'S	ance wise a	1	PTIN	P00627	7495	
oo UIII)			$\frac{\sqrt{400}}{2}$,	J. 11 U				$\frac{100027}{35-172}$		
	- inite		INGTON	, IN 474	102-0488		-		812-33		

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2011

HIRT FAMILY	FOUNDATION, INC	27-1547947
Organization type (check	cone)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Specia	I Rule. See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in y one contributor. Complete Parts I and II	n money or
Special Rules		
under sections 50	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 9(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a c \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, I and II	contribution of
dunng the year, to	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scient roses, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.	
during the year, cont total to more to year for an exclus	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one co- ontributions for use exclusively for religious, charitable, etc., purposes, but these contributions that were received han \$1,000. If this box is checked, enter here the total contributions that were received ively religious, charitable, etc., purpose. Do not complete any of the parts unless the Go anization because it received nonexclusively religious, charitable, etc., contributions of ear.	outions did during the eneral Rule
990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules does not file Schedule must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its F90-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990,	Form 990-EZ or on
For Paperwork Reduction Act No	otice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Schodula B (Form 900, 900 E7, or 900 BE) (2011)							
Schedule B (Form 990, 990-EZ, or 990-PF) (2011)							
Name of organization							
итрт	TAMITY	FOUND					

Page 1 of 1 of Part I

HIRT FAMILY FOUNDATION, INC

Employer identification number

27-1547947

£Mir 1.	Contributors (see instructions). Ose dup	plicate copies of Pa	int i ili addittonal space is nee	edea.
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
1	EDWARD HIRT & KATHLEEN MCT 3801 E RACHELS GLEN RD BLOOMINGTON IN	TIGUE 47408	\$ 10,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
	•		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	1	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	 	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

798 HIRT FAMILY FOUNDATION, INC 27-1547947 FYE: 12/31/2011	Federal Statements		5/11/2012 8:49 AM	•
State	Statement 1 - Form 990-PF, Part I, Line 23 - Other Expenses	enses		
Description	Net Total Investment	Adjusted Net	Charitable Purpose	
EXPENSES BANK CHARGES TOTAL	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0	ۍ د د ا	
			4	

5/11/2012 8:49 AM City, State, Zip Statement 2 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors BLOOMINGTON IN 47408 **Federal Statements** Address EDWARD HIRT & KATHLEEN MCTIGUE
3801 RACHELS GLEN 798 HIRT FAMILY FOUNDATION, INC Name 27-1547947 FYE: 12/31/2011