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



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 Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

	ndar year 2011, or tax year beginning		, and ending				
Name of to	oundation <u>ard Foundation, Inc., The</u>			A	Employer identification num 35-2049728	ber	
Number ar	Room/suite	В	Telephone number (see the (317) 873-29				
City or tow		State IN	ZIP code 46077-9107	С	If exemption application is		G \square
	ck all that apply Initial return	Initial Return of a form			1 Foreign organizations, chec		G□
	Final return	Amended return		b	2 Foreign organizations meet		- 🗀
H CI	Address change neck type of organization X Section 501	Name change (c)(3) exempt private fo	undation		here and attach computation	nig tite op /e test, till N	"Ĝ 🗌
I Fai	Section 4947(a)(1) nonexempt charitable tru			Ε	ff private foundation status under section 507(b)(1)(A)		G□
(fr	D-4 II L: (a) L: 40)	ounting method 🔲 C Other (specify)	ash X Accrual	F	If the foundation is in a 60-		
G \$	327, 599. (Part I,	column (d) must be on	cash basis)		under section 507(b)(1)(B)		G
- uit	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursem for charitab	
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a) (see instructions))					purposes (cash basis c	
	1 Contributions, gifts, grants, etc, received (att sch)	0.					
	2 Ck G X it the foundn is not req to att Sch B 3 Interest on savings and temporary						
	cash investments 4 Dividends and interest from securities	0. 31,849.	31,84	0			
	5a Gross rents						
	b Net rental income or (loss)	F 157	L-6a Stmt				
R	6a Net gain/(loss) from sale of assets not on line 10 b Gross sale by 16a 242, 479.	-5,157.					
V E	assets on line 6a 7 Capital gain net income (from Part IV, line 2)			0.			
Ŋ	8 Net short-term capital gain						
	9 Income modifications 10a Gross saleş less						
~ ⊜	10a Gross sales less returns and allowances b Less Cost of				٥		
F=	goods sold						
اب	c Gross profit/(loss) (att sch) 11 Other income (attach schedule)		<u> </u>				
701	40 Table Add base 4 About 4 d	06.600	21 04	_			
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	26,692.	31,84	9.			
<u>u</u>	14 Other employee salaries and wages						
\$	15 Pension plans, employee benefits						
ØÅ.	16a Legal fees (attach schedule) b Accounting fees (attach sch) L-16b Stmt	1,650.				-	CEN
SCANNED	c Other prof fees (attach sch)	1,630.					650.
O I P S E T	17 Interest						
P R	18 Taxes (attach schedule)(see instrs) Eed PE Exclae Ta 19 Depreciation (attach	76.					76.
A A	sch) and depletion						
N V	20 Occupancy 21 Travel, conferences, and meetings	<u> </u>	,				
A E	22 Printing and publications	-					
D P E N	23 Other expenses (attach schedule) See Line 23 Stmt	538.	242,47	9.	241,967.		26.
Š	Total operating and administrative expenses. Add lines 13 through 23	2,264.	242,47			1	
s	25 Contributions, gifts, grants paid	10,900.	242,47	J .	241,967.		752. 900.
	26 Total expenses and disbursements. Add lines 24 and 25	13,164.	242,47	9	241,967.	12	652.
	27 Subtract line 26 from line 12:	20,104.	2.2,3,		241,507.		552.
	a Excess of revenue over expenses and disbursements	13,528.					
	b Net Investme が存在的内 含物をプログログ			0.			
	c Adjusted net income (if ne Percury) = D		L		0.		
MAA E	ar wangsvory woduction Act Notico, con inch	THETHORE		TCC	A0301 12/02/11	Form 990-P1	- /2011\

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SERVICE CENTER DIRECTOR COVINGTON, KY MALL LAST 0 27



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

6 0.

7 Add lines 5 and 6 7 22,341.

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Part VI instructions

12,652.

		204972	28	Р	age 4	
Par		struction	ıs)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here G 🔲 and enter 'N/A' on line 1	L				
	Date of ruling or determination letter: (attach copy of letter if necessary ' see instrs)					
b	b Domestic foundations that meet the section 4940(e) requirements in Part V,					
	check here G and enter 1% of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	ŀ				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
-	foundations only Others enter -0-)	2			0.	
3	Add lines 1 and 2	3			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0.	
6	Credits/Payments					
а	2011 estimated tax pmts and 2010 overpayment credited to 2011 6a					
b	Exempt foreign organizations ' tax withheld at source 6b					
С	Tax paid with application for extension of time to file (Form 8868) 6c 0.					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7			0.	
8	Enter any penalty for underpayment of estimated tax. Check here I 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.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			0.	
11	Enter the amount of line 10 to be Credited to 2012 estimated tax G Refunded G	11	_			
	VII-A Statements Regarding Activities					
				Yes	No	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a		X	
			1		<u>~</u>	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		x	
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publis or distributed by the foundation in connection with the activities	hed				
	c Did the foundation file Form 1120-POL for this year?					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation G \$ (2) On foundation managers G \$		_			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers G \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		v	
_	If 'Yes,' attach a detailed description of the activities		-		X	
	ir 165, attach a detaneo description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes				-	
4.0	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3		X	
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4a	·	X	
	•		4b	X	1,7	
J	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T		5		X	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		1 1			
	? By language in the governing instrument, or					
	? By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict the state legislation that effectively amends the governing instrument so that no mandatory directions that conflict the state legislation that effectively amends the governing instrument so that no mandatory directions that conflict the state legislation that effectively amends the governing instrument so that no mandatory directions that conflict the state legislation that effectively amends the governing instrument so that no mandatory directions that conflict the state legislation that effectively amends the governing instrument so that no mandatory directions that conflict the state legislation that effectively amends the governing instrument so that no mandatory directions that conflict the state legislation that the state l	ct	<u> </u>		 	
_	with the state law remain in the governing instrument?		6	<u> </u>	<u> </u>	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	<u> </u>	 	
ъa	Enter the states to which the foundation reports or with which it is registered (see instructions) IN - Indiana					
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G7 If 'No,' attach explanation		8b	Х		
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49-	42(j)(5)				
	for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete	Part XIV	9		<u>x</u> _	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nai and addresses	nes	10	х		
BAA			Form 99	0-PF	(2011)	

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Pa	A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11	_	х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified advisory privileges? If 'Yes,' attach statement (see instructions)	l person had	12	:	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption a	pplication?	13	Х	
14	Website address GN/A The books are in care of G Eugene Rickard Telephon	e no G _(317) 87	73-29	
	Located at G 9202 Fanchon Drive; Zionsville, IN ZIP + 4 G	46077			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041. Check here and enter the amount of tax-exempt interest received or accrued during the year.	G <u></u> 15	<u> </u>		<u>. </u>
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other auti- bank, securities, or other financial account in a foreign country?	ority over a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name foreign country G	ie of the		:	i i
Pa	MANUEB Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
16	a During the year did the foundation (either directly or indirectly)		_		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	∐ Yes X	No		"
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	— –	No No		
		□ les ⊠			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X	No		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the			ŀ	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X	No		
ı	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	_	1	b	
	Organizations relying on a current notice regarding disaster assistance check here	G [1
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?			l c	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
;	a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d	□v 5	la.		
	and 6e, Part XIII) for tax year(s) beginning before 2011? If 'Yes,' list the years G 20 , 20 , 20 , 20	∐Yes X	No		
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(-1/21			
!	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)	(2) to			
	all years listed, answer 'No' and attach statement ' see instructions) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	150		2 b	X
,	G 20, 20, 20, 20				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X	No No		1
I	b If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved				
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to				
	determine if the foundation had excess business holdings in 2011)		<u> </u>	3Ь	
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a	X
					عنر
1	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of				,,,
	the tax year beginning in 2011?			4b	X

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Part VII-B Statements Regarding Activiti		4720 May Be Requ	ired (continued)	
5a During the year did the foundation pay or incur	-			"
(1) Carry on propaganda, or otherwise attempt	to influence legislation	(section 4945(e))?	∐ Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registrat	ion drive?			No
(3) Provide a grant to an individual for travel, s	study, or other similar pu	urposes?	Yes X	No
(4) Provide a grant to an organization other that in section 509(a)(1), (2), or (3), or section 4	an a charitable, etc, orga 1940(d)(2)? (see instruc	anization described tions)	Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	s, charitable, scientific, of cruelty to children or	literary, or animals?	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	ne transactions fail to qua current notice regardin	ualify under the exception ng disaster assistance	ns	5b
Organizations relying on a current notice regard	ling disaster assistance	check here	G 🔲	
c If the answer is 'Yes' to question 5a(4), does th tax because it maintained expenditure responsi	e foundation claim exen bility for the grant?	nption from the	Yes	No No
If 'Yes,' attach the statement required by Regul	ations section 53 4945-5	5(d)		
6a Did the foundation, during the year, receive any on a personal benefit contract?	•	, , , , , , , , , , , , , , , , , , ,	Yes X	No Series
b Did the foundation, during the year, pay premiu	ms, 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 founda				
b If 'Yes,' did the foundation receive any proceed Part VIII Information About Officers, Di				7b X
and Contractors	rectors, Frustees,	rounuation manag	ers, migniy Paiu En	npioyees,
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions).	
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
Eugene Rickard				
9202 Fanchon Dr,	Mgr, Trustee			
Zionsville IN 46077	1.00	0.	0.	0.
Karyl Rickard				
9202 Fanchon Dr,	Trustee			
Zionsville IN 46077	1.00	0.	0.	0.
Mark Rickard				
9202 Fanchon Dr,	Trustee			
Zionsville IN 46077	1.00	0.	0.	0.
2 Compensation of five highest-paid employees	(other than those inclu	Ided on line 1 ' see inst	ructions) If none enter	'NONE'
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position	(C) Compendadin	employee benefit plans and deferred compensation	other allowances
None				
0				
0				
0				
0				
Total number of other employees paid over \$50,000	L	1	<u> </u>	None
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Form 990-PF (2011) Rickard Foundation, Inc., The 35	-204972	8 Page 7
Information About Officers, Directors, Trustees, Foundation Managers, Highly Pa and Contractors (continued)	id Employ	yees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c)	Compensation
None		
<u></u>	lone	
		<u>,</u>
	ļ	
		
Total number of others receiving over \$50,000 for professional services	G	None
Part DA Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 None		
(No "Direct" Charitable Activities - Our activities are done		
through other charitable organizations)		0.
²		
3		
4		
Part K-B Summary of Program-Related Investments (see instructions)	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
i none		
		0.
2		
]	
	-	
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	G	None
BAA	· ·	orm 990-PF (2011)

<u>Form</u>	1990-PF (2011) Rickard Foundation, Inc., The	<u>35-20497</u>	28 Page 8
Par	Minimum Investment Return (All domestic foundations must complete this part see instructions.)	Foreign fou	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes		20 550
	n Average monthly fair market value of securities Average of monthly cash balances	1 a	38,550. 1,081.
	Fair market value of all other assets (see instructions)	1 c	311,767.
	I Total (add lines 1a, b, and c)	1d	351,398.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c	''-	331,396.
•	(attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	₂	
3	Subtract line 2 from line 1d	3	351,398.
-			
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	5,271.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	346,127.
6	Minimum investment return. Enter 5% of line 5	6	17,306.
Par	t XI = Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of	erating fou	ndations
	and certain foreign organizations check here G 📗 and do not complete this part)	<u></u>
1	Minimum investment return from Part X, line 6	1	<u>17,306.</u>
28	Tax on investment income for 2011 from Part VI, line 5	0.	
	o Income tax for 2011 (This does not include the tax from Part VI)		
(: Add lines 2a and 2b	2c	<u> </u>
3	Distributable amount before adjustments Subtract line 2c from line 1	3	17,306.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	17,306 <u>.</u>
6	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	<u>17,306.</u>
Pai	TXII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes • Expenses, contributions, gifts, etc 'total from Part I, column (d), line 26	1a	12,652.
	Program-related investments ' total from Part IX-B	1 b	0.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes	2	
		-	
3	Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
	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	12,652.
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.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,652.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth qualifies for the section 4940(e) reduction of tax in those years.	er the foundati	
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				
line 7 2 Undistributed income, if any, as of the end of 2011				17,306.
a Enter amount for 2010 only		<u> </u>	0.	
b Total for prior years 20 , 20 , 20				· · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2011				
a From 2006 5,570.	<u>.</u>]		°	
b From 2007 3,516.				
c From 2008 1,418.	<u>. </u>			
d From 2009 1,231.				
e From 2010 1,322.				
f Total of lines 3a through e	13,057.			
4 Qualifying distributions for 2011 from Part XII, line 4 G \$ 12,652.				
a Applied to 2010, but not more than line 2a		<u> </u>		
•				
b Applied to undistributed income of prior years (Election required ' see instructions)				
 Treated as distributions out of corpus (Election required ' see instructions) 				
d Applied to 2011 distributable amount				12,652.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the	1,635.			1,635.
same amount must be shown in column (a))			ļ	
6 Enter the net total of each column as indicated below:			٥	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	11,422.			
•	==/==-			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable				
amount ' see instructions		0.		
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount ' see instructions			0.	
tille 24 Taxable allouit. See Histiubtions			<u> </u>	
f Undistributed income for 2011. Subtract lines				
4d and 5 from line 1 This amount must be distributed in 2012				3,019.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	3,935.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	7,487.			
10 Analysis of line 9	1,207.			
a Excess from 2007 3,516				
b Excess from 2008 1,418]		
c Excess from 2009 1,231				
d Excess from 2010 1,322				
e Excess from 2011 0	<u> </u>			
RΔΔ				Form 990-PF /2011

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	XIV Private Operating Foundati					N/A	
	If the foundation has received a ruling or det is effective for 2011, enter the date of the ru	lıng	, ,	• • • • • •	` ° G <u> </u>		
	Check box to indicate whether the foundation		ting foundation desc		4942(j)(3) or	4942(J)(5)	
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years			
	investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total	
b	85% of line 2a						
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 alternative test relied upon						
а	'Assets' alternative test ' enter.						
	(1) Value of all assets						
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	· <u> </u>					
b	'Endowment' alternative test ' enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
C	'Support' alternative test ' enter.		_				
	(1) Total support other than gross 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)		·				
	(3) Largest amount of support from an exempt organization						
	(4) Gross investment income				<u> </u>		
Par	Supplementary Information (assets at any time during the	Complete this per year 'see ins	oart only if the o structions.)	rganization had	\$ 5,000 or more	in	
	Information Regarding Foundation Manage			_			
a	List any managers of the foundation who ha close of any tax year (but only if they have	contributed more th	an 8 5,000) (See se	ction 507(d)(2))		n before the	
	Eugene Rickard, Foundation	-	ontributed mo	ore than 2%	of total		
b	contributions in prior year List any managers of the foundation who ow		he stock of a corpor	ation (or an equally	large portion of the o	wnership of	
	a partnership or other entity) of which the fo	undation has a 10%	or greater interest	(o oq)	12.go por 10		
	None						
2	Information Regarding Contribution, Grant	, Gift, Loan, Schola	rship, etc, Program	s:			
	Check here $G[X]$ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions,						
a	complete items 2a, b, c, and d The name, address, and telephone number	of the person to wh	om applications sho	uld be addressed			
	•		• •				
b	The form in which applications should be su	bmitted and inform	ation and materials	they should include			
c	Any submission deadlines						
d	Any restrictions or limitations on awards, si	uch as by geographi	cal areas, charitable	e fields, kinds of ins	ututions, or other fact	ors	

Form 990-PF (2011) Rickard Foundation, Inc., The

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Ye		re Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
United Way-Central Ind		ŀ	General Oper	
Indianapolis		501 (c) (3)	_	
Indianapolis IN 99999	,	NFP	Support	0.
Christian InterAction			Program Support	0.
Newark		501 (c) (3)		
Newark DE 99999		NFP		0.
Brooklyn Tabernacle Church			Prayer Band &	0.
17 Smith St		501 (0) (3)	Other Ministries	•
Brooklyn NY 11201		NFP	Support	4 000
Purdue Univ Foundation		MEE	Graduate	4,000.
West Lafayette		501 (-) (2)		
West Lafayette IN 99999		NFP	Scholarship Support	800.
University of Wyoming		MEP		800.
Laramie		E01 (=) (0)	Scholarships in	
Laramie WY 99999		l	Home Economics	1 000
Wi 99999 Wichita State Univ	'	NFP	Support	1,200.
Wichita State Univ			33% Each: Christian,	
		l	Fletcher-McKinley &	
Wichita KS 99999	'	NFP	Armstrong Support	1,200.
University of Wisconsin			25% ea: Taylor,	
Madison		l	Schrag, Shain &	
Madison WI 99999		NFP	Analy Chem Funds	1,200.
Missionary Church-R Hall Prog				
Fort Wayne			Rick Hall	
Fort Wayne IN 99999		NFP	Support	750.
Campus Crusade for Christ			Kelly Burch	
Orlando		l	Acct 0568914 Ohio	
Orlando FL 99999	1	NFP	Univ Support	500.
See Line 3a statement				
				1,250.
Total		l	G 3a	10,900.
b Approved for future payment				20/300.
	N/A	N/A	N/A	
	-"/		· · · · · · · · · · · · · · · · · · ·	
		Ī		
Total	<u> </u>	<u> </u>	G 3b	
BAA	TEFA0501 (7/14/11	u 3b	Form 900 DE (2011)

Page'12

Part XVII-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
С					
d					
е					
f					
g Fees and contracts from government agencies			ļļ		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	0.	
4 Dividends and interest from securities			14	31,849.	
5 Net rental income or (loss) from real estate			_		
a Debt-financed property					_
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			1	0.	
8 Gain or (loss) from sales of assets other than inventory	<u> </u>		1	-5,157.	
9 Net income or (loss) from special events	ļ		 		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue		····		······································	
a	-				
D	 		 		
cd			+ +		
0e			.		
12 Subtotal Add columns (b), (d), and (e)				26,692.	
13 Total. Add line 12, columns (b), (d), and (e)				13	26,692
See worksheet in line 13 instructions to verify calculation	anc \			19 .	

PanaXXIB Relationship of Activities to the Accomplishment of Exempt Purposes

	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
_	
_	

Form 990-PF (2011) Rickard Foundation, Inc., The 35-2049728 Park XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							·	<u>-</u>	
de	escribe	organization directly d in section 501(c) to political organiza	of the Code (oth	gage in any of er than section	the following wi 501(c)(3) organ	th any oth nizations)	ner organization or in section 527	,	Yes No
	•	s from the reporting		noncharitable	exempt organiz	ation of			
) Cas	•	,						1a (1) X
(2) Othe	er assets							1a (2) X
b 0	ther tra	ansactions							
(1) Sale	es of assets to a noi	ncharitable exem	npt organizatio	n				1 b (1) X
-	•	chases of assets fro		. •					1 b (2) X
		tal of facilities, equi							1 b (3) X
-	-	nbursement arrange	•						1 b (4) X
•	-	ns or loan guarante							1 b (5) X
	•	formance of service		or fundraising	n solicitations				1 b (6) X
		of facilities, equipm			-	/ees			1c X
			,g	,	, ,				10 1 12
d If th ar	the an e good ny tran	swer to any of the a ls, other assets, or saction or sharing a	tbove is 'Yes,' co services given b arrangement, sh	omplete the fo y the reporting ow in column	llowing schedule foundation If ti (d) the value of	Column he founda	i (b) should alwa	ays show the fa s than fair mark r services recei	ir market value of set value in ved
(a) Line	$-\tau$	(b) Amount involved		_	empt organization				s, and sharing arrangements
			(0,1000		pg	 '	(4) -000		, and one my arrangements
		<u>.</u>		_			. =		
				·					
					-				-
			1						
d	escribe	undation directly or ed in section 501(c) complete the follow	of the Code (oth	ed with, or rela er than section	ated to, one or r n 501(c)(3)) or in	nore tax-en section	exempt organizati 527?	ions	Yes X No
) Name of organiza		/b) T)	pe of organizati	00		c) Description o	of relationship
		y wante of organiza	uon		rpe of organizati	UII .	- ''	c) Description o	n relationship
							-		
	_								
									· · ·
	Under	penalties of perjury, I decl	are that I have exami	ned this return, inc	luding accompanying	schedules	and statements, and to	the best of my kno	wledge and belief, it is true,
Sign	correct,	and committee Declaration	on of preparer (other t	than taxpayer) is b	ased on all information	on of which p	preparer has any know	edge	May the IRS discuss this return with the
Here	\ _ _	Ligerce	· IVUR	wu	<u> </u>	<u> </u>	Trustee		preparer shown below (see instructions)?
	Signa	Rept/Type propagate		- In	Date		Title	-	X Yes No
		Print/Type preparer's n	_		r's signature		Date	_	II PTIN
Paid		/Steven G I		CPA /Ste	ven G Hedge	es, C	PA 06/20/12	T .	<u> </u>
Prepa	rer	1	Tax Pros					Firm's EIN G	
Use 0	nly	-	Box 5085					4	
		<u> </u>	Bloomingto	on	<u> </u>	IN 4	7407	Phone no (812) 336-9101
BAA									Form 990-PF (2011)

Employer Identification Number 35-2049728 Rickard Foundation, Inc., The Asset Information: Description of Property 6690 Sh Lilly Stock **Date Acquired** 03/01/04 **How Acquired** Donated Date Sold. 02/28/11 Name of Buyer Market Cost or other basis (do not reduce by depreciation) Sales Price. 230,479. 235,488. Sales Expense Valuation Method Cost -5,009. Total Gain (Loss) Accumulation Depreciation Description of Property 1163.919 Sh PIMCO Low Duration C Date Acquired 12/22/09 How Acquired Purchased Name of Buyer Date Sold 12/27/11 Market Sales Price Cost or other basis (do not reduce by depreciation) 12,000. 12,148. Sales Expense Valuation Method Total Gain (Loss) -148. Accumulation Depreciation Description of Property: How Acquired: Date Acquired Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method Total Gain (Loss) Accumulation Depreciation Description of Property Date Acquired. How Acquired Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method Total Gain (Loss) Accumulation Depreciation. Description of Property: **Date Acquired** How Acquired Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method: Accumulation Depreciation: Total Gain (Loss) Description of Property. Date Acquired How Acquired Date Sold Name of Buyer Cost or other basis (do not reduce by depreciation) Sales Price. Sales Expense Valuation Method Total Gain (Loss) Accumulation Depreciation Description of Property How Acquired Date Acquired Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method Accumulation Depreciation Total Gain (Loss) Description of Property. How Acquired Date Acquired Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method Total Gain (Loss) Accumulation Depreciation

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
John Hancock Lifestyle Growth C (JCLGX)	48,501.	38,292	
Pershing LLC (Cash)	187.	187	
PIMCO Commodity Real R (PCRCX)	112,293.	78,326	
PIMCO All Asset Class C (PASCX)	101,715.	96,337	
PIMCO Low Duration C (PTLCX)	84,795.	83,646	
PIMCO Real Return C (PRTCX)	27,185.	29,512	
Lilly Stock	0.	0	
Total	374,676.	326,300	

Supporting Statement of:

Form 990-PF, p1/Line 23(b)-7

Description	Amount	
Net Investment Expense		
(See Sec 4940(c)(4)(D) - Like Kind Exchanges		
Similar to Sec 1031 Apply)		
Reinvest Lilly Stock Sale Proceeds	230,479.	
Reinvest PINCO "	12,000.	
Less Commissions	-512.	

Total

241,967.

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Comm Exp (COGS)	512.	512.		
Brokerage Serv Fee	0.	0.		
Bank Service Fees	26.	0.		26.
Licenses and Permits				
Office Supplies				
Program Exp				
Reinvest Sale Proceeds-Sec4940(241,967.	241,967.	
Other Selling Exp				

Total <u>538.</u> <u>242,479.</u> <u>241,967.</u> <u>26.</u>

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient	If recipient is an individual,	Foun- dation	Purpose of grant or contribution	Person or Business Checkbox Amount	
Name and address (home or business)	show any relationship to any foundation manager or	status of re- cipient			
	substantial contributor				
a Paid during the year					
Great Commission Ministrie	s			Person or	
Orlando		501 (c) (3)	General	Business X	
Orlando FL 9999	9	NFP	Support	0.	
City Light Ministries				Person or	
Ft Wayne		501 (c) (3)	Rick Hall	Business X	
Fort Wayne IN 9999	9	NFP	Support	750.	
Vision Nicaragura		\		Person or	
PO Box 2172		501 (c) (3)	Ron Read	Business X	
Fairview NC 2873	_	NFP	Support	500.	

Total

1,250.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Steven Hedges, CPA	Acctng & Tax	1,650.			1,650.

Total

1,650.

1,650.

Form **8868** (Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

 ${\sf G}$ File a separate application for each return.

OMB No 1545-1709

THEOTOGRAPH TECTORIO	ic octivities and in the accept	arate appire				
	e filing for an Automatic 3-Month Extension, com				G X	
	re filing for an Additional (Not Automatic) 3-Month					
Do not com	plete Part II unless you have already been granted	an automat	ic 3-month extension on a previously filed	d Form 8868		
corporation request an easted N	iling (e-file). You can electronically file Form 8868 i required to file Form 990-T), or an additional (not a extension of time to file any of the forms listed in Mil With Certain Personal Benefit Contracts, which multing of this form, visit www.irs.gov/efile and click of	utomatic) 3 art I or Part st be sent to	-month extension of time. You can electri It with the exception of Form 8870, Inform the IRS in paper format (see instruction	onically file Form 88	368 to	
	automatic 3-Month Extension of Time. 0		· · · · · · · · · · · · · · · · · · ·			
	on required to file Form 990-T and requesting an au		<u> </u>	mplete Part Lonly	G	
,	rporations (including 1120-C filers), partnerships, R			•	- U	
income tax		EIVIICS, AIIC	THUSIS MUST USE FORM 7004 to request a	ii extension or time	to me	
			Enter filer's identif	fying number, see i	nstructions	
	Name of exempt organization or other filer, see instructions Employer					
Type or				X 35-2049728		
print	Rickard Foundation, Inc., 2	l'he				
File by the due date for	Number, street, and room or suite number. If a P.O. box, see in			Social security nu		
filing your return See	9202 Fanchon Drive,					
instructions	City, town or post office, state, and ZIP code. For a foreign add	ress, see instru	ctions			
	Zionsville			IN 460'	77-9107	
Enter the Ro	eturn code for the return that this application is for	(file a sepai	ate application for each return)		04	
Application Is For		Return Code	Application Is For		Return Code	
Form 990		01	Form 990-T (corporation)		07	
Form 990-B	L	02	Form 1041-A		08	
Form 990-E	Z	01	Form 4720		09	
Form 990-P	F	04	Form 5227		10	
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11	
Form 990-T	(trust other than above)	06	Form 8870		12	
Telepho ? If the or ? If this is check th the exte 1 I requuntil The e: G G I	ne No G_(317) 873-2916 ganization does not have an office or place of busing for a Group Return, enter the organization's four does box G If it is for part of the group, classion is for. est an automatic 3-month (6 months for a corporate Aug 15 , 20 12 , to file the exempt organization's return for calendar year 20 11 or tax year entered in line 1 is for less than 12 months thange in accounting period	ness in the ligit Group Eneck this bo	United States, check this box Exemption Number (GEN) X G and attach a list with the nain to file Form 990-T) extension of time turn for the organization named above	f this is for the whol mes and EINs of all		
3a If this nonre	application is for Form 990-BL, 990-PF, 990-T, 472 fundable credits. See instructions	20, or 6069,	enter the tentative tax, less any	3a \$	0.	
	application is for Form 990-PF, 990-T, 4720, or 60 ents made. Include any prior year overpayment allo			3 b \$	0.	
EFTP	ce due. Subtract line 3b from line 3a Include your S (Electronic Federal Tax Payment System) See i	nstructions		3c \$	0.	
payment in	you are going to make an electronic fund withdraws structions approverk Reduction Act Notice, see Instructions.	ai with this i			(Ray 1-2012)	

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