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### **Return of Private Foundation**

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

OMB No 1545-0052

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

F	or ca	lendar year 2012 or tax year beginning	06/	01 , 2012, and endi	ng	05/31,20 13
-	Name	e of foundation			A Employerio	dentification number
	DR	FERRELL DUNN MEMORIAL FUND T	RUST 002429			35-6398629
-	Num	ber and street (or P.O box number if mail is not delivered	to street address)	Room/suit		number (see instructions)
					<b>,</b>	
	200	EAST JACKSON STREET				
_	City	or town, state, and ZIP code				
					C If exemption	application is
	MUN	ICIE, IN 47305			pending, thet	A nere
(	Ch	eck all that apply: Initial return	Initial return	of a former public char	rity D 1 Foreign or	ganizations, check here . >
		Final return	Amended ret	urn	·	ganizations meeting the
		Address change	Name change	e		check here and attach
ŀ	1 Ch	eck type of organization. X Section 501(	c)(3) exempt private for	oundation		ndation status was terminated
_		Section 4947(a)(1) nonexempt charitable trust	Other taxable pri			507(b)(1)(A), check here
ı	Fai	r market value of all assets at end 💹 🗸 🗘 🗸 🗸 🗸 🗸 🗸 🗸 🗸 🗸	unting method <sup>.</sup> X Ca	ash Accrual	F If the foundat	tion is in a 60-month termination
	of y	year (from Part II, col. (c), line U	her (specify)		under section	507(b)(1)(B), check here . >
	16	<b>) ▶ \$</b> 592,558. (Part I,	column (d) must be or	cash basis )		
	<u>Part</u>	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net investment	(c) Adjusted ne	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	income	income	purposes
_		column (a) (see instructions) )	books			(cash basis only)
	1	Contributions, gifts, grants etc., received (attach schedule)				
×	2	Check ► if the foundation is not required to attach Sch B				
۲0!% د	3	Interest on savings and temporary cash investments	2.	2.		STMT 1
J	4	Dividends and interest from securities	14,819.	14,819.		STMT 2
9	1	Gross rents				
₹		Net rental income or (loss)	10 (5)			
؛ د	b 6 6	Net gain or (loss) from sale of assets not on line 10 Offices sales price for all	10,656.			
		assets on line 6a 42, 211.	<del></del>	10,656	* 41.4	
		Capital gain net income (from Part IV, line 2) .		10,0301	-RECE	<del>IV⊕D</del> —
불	8	Net short-term capital gain				
喜	10 a	Gross sales less returns	<del></del>		SFP 9.	
<u> </u>	١,	and allowances · · · · · · · · · · · · · · · · · · ·			O SEF &	
<b>あ</b>	1	Gross profit or (loss) (attach schedule)	<del></del>			
	11	Other income (attach schedule)	1,105.		OGDE	N, UI STMT 3
	12	Total. Add lines 1 through 11	_26,582.	25,477.		
•	13	Compensation of officers, directors, trustees, etc	5,554.			1,944.
	14	Other employee salaries and wages		NONE	Ŋ	ONE
	15	Pension plans, employee benefits		NONE	N	ONE
		Legal fees (attach schedule)				
Ĺ	Ď t	Accounting fees (attach schedule) STMT 4	800.	NONE	N	NONE NONE
	<u>u</u>   d	Other professional fees (attach schedule)	<del></del>			
3	17	Interest				
	17 18 19 20	Taxes (attach schedule) (see instructions) ${ m STMT.5}$ .	3,560.			
	19	Depreciation (attach schedule) and depletion,				
		Occupancy				10117
7	21	Travel, conferences, and meetings		NONE		NONE
		Printing and publications	· · · · · · · · · · · · · · · · · · ·	NONE	<u>r</u>	VONE
	23	Other expenses (attach schedule)	ļ <del></del>	<del> </del>		
	24	Total operating and administrative expenses.	0.014	2 (10	,	JONES 1 044
Ċ	- I .	Add lines 13 through 23	9,914. 30,000	3,610.	<u>-</u>	NONE 1,944.
	25	Contributions, gifts, grants paid	39,914	2 610	,	30,000 NONE 31,944
	26	Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12	37,314.	3,610.	<u></u>	NONE 31,944.
	1	3 Excess of revenue over expenses and disbursements	-13,332			
		b Net investment income (if negative, enter -0-)	13,332	21,867.		
		c Adjusted net income (if negative, enter -0-).				
				··-		

JSA For Paperwork Reduction Act Notice, see instructions.

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Form, 990-PF (2012)

Part II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
Title 12	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 0	Cash - non-interest-bearing		NONE NONE	
2 5	Savings and temporary cash investments	11,335.	28,958.	28,958
3 /	Accounts receivable			
լ	Less allowance for doubtful accounts			
	Pledges receivable			
Ì	Less allowance for doubtful accounts			
	Grants receivable			
	Receivables due from officers, directors, trustees, and other			
, ا	disqualified persons (attach schedule) (see instructions)			
	Other notes and loans receivable (attach schedule)			<del></del>
	Less allowance for doubtful accounts ►NONE			
	Inventories for sale or use			*
	Prepaid expenses and deferred charges			
¥ 10 2 1	Investments- U.S. and state government obligations (attach schedule).			
	Investments - corporate stock (attach schedule)	216,941.	208,259.	317,007
1	Investments - corporate stock (attach schedule)	259,178.	236,905.	246,593
11	Investments - land, buildings, and equipment basis  Less accumulated depreciation (attach schedule)	233,170.	230,303.	240,333
13	Investments - mortgage loans			
	Other assets (describe			
	Total assets (to be completed by all filers - see the			
-	instructions Also, see page 1, item I)	487,454.	474,122.	592,558
$\neg \neg \neg$	Accounts payable and accrued expenses			
	Grants payable			
	Deferred revenue			
.91	Loans from officers, directors, trustees, and other disqualified persons			
E 21	Mortgages and other notes payable (attach schedule)			
3 22	Other liabilities (describe			
	Office applications of Table 1	·		
23	Total liabilities (add lines 17 through 22)		NONE	
s	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		NONE	
24	Unrestricted ,			
24 25	Temporarily restricted			
120	Permanently restricted			
	Foundations that do not follow SFAS 117,	Į.		
2	check here and complete lines 27 through 31. $\blacktriangleright X$	_		
	Capital stock, trust principal, or current funds	487,454.	474,122.	
Assets 58	Paid-in or capital surplus, or land, bldg , and equipment fund			
	Retained earnings, accumulated income, endowment, or other funds			
30 Set	Total net assets or fund balances (see instructions)	487,454.	474,122.	
31	Total liabilities and net assets/fund balances (see			
	instructions)	487,454.	474,122.	
Part III	Analysis of Changes in Net Assets or Fund E	Balances		
	net assets or fund balances at beginning of year - Part I		-	·— — -
end-o	of-year figure reported on prior year's return)			487,454.
2 Enter	amount from Part I, line 27a		2	-13,332.
3 Other				
	lines 1, 2, and 3		4	474,122.
5 Decre	eases not included in line 2 (itemize) ▶		<u> </u>	
6 Total	net assets or fund balances at end of year (line 4 minus lin	e 5) - Part II, column (b),	line 30 6	474,122.

Part IV Capital Gain	s and Losses for Tax on Inv	estment Income			rage 3
	nd describe the kind(s) of property sold		(b) How acquired	(c) Date	(d) Date sold
2-story	P - Purchase D - Donation	acquired (mo., day, yr )	(mo , day, yr.)		
a PUBLICLY TRADED	SECURITIES				
b OTHER GAINS AND	LOSSES				
<u>c</u>					
<u>d</u>					
<u>e</u>	<del></del>	<del></del>	ļ		<u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a 41,612.		31,555.			10,057.
<b>b</b> 599.		31/333.			599.
c		<del></del>			
d					
е					
	showing gain in column (h) and owned	by the foundation on 12/31/69	///	Gains (Col. (h) g	ain minus
(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		(k), but not less Losses (from co	than -0-) <b>or</b>
•		· · · · · · · · · · · · · · · · · · ·	<del> </del>		10,057.
<u>a</u> b			<del>                                     </del>		599.
C			<u> </u>	<del></del>	
d		1			
e					
2 Capital gain net income o		f gain, also enter in Part I, line 7  f (loss), enter -0- in Part I, line 7	2		10,656.
	n or (loss) as defined in sections 12	222(5) and (6).			107030.
_	art I, line 8, column (c) (see ins		3		
Part V Qualification	Under Section 4940(e) for Rec	duced Tax on Net Investment I	ncome		
If "Yes," the foundation does	not qualify under section 4940(e).	, see the instructions before making	<u>.                                    </u>	·	X Yes No
Base period years Calendar year for tax year beginning in	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution r (col (b) divided by	
2011					
2010					
2009	<u> </u>				
2008			ļ		
2007	<u> </u>	<u></u>	<u> </u>		
	o for the 5-year base period - divide	e the total on line 2 by 5, or by the s than 5 years	3		
4 Enter the net value of no	oncharitable-use assets for 2012 fro	om Part X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distribu If line 8 is equal to or of Part VI instructions.	tions from Part XII, line 4	ın Part VI, line 1b, and complete	8 that part	using a 1% ta	ox rate. See the
JSA				For	rm 990-PF (2012
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Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and

orm	990-PF (20	12) 35-6398629		1	Page <b>5</b>
Pari	VII-A	Statements Regarding Activities (continued)			
11	At any	time during the year, did the foundation, directly or indirectly, own a controlled entity within the	T		
		of section 512(b)(13)? If "Yes," attach schedule (see instructions	11		Х
12		foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
		ad advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13		oundation comply with the public inspection requirements for its annual returns and exemption application?		Х	
		address ► N/A			
14	The book	s are in care of ▶ FIRST MERCHANTS TRUST COMPANY Telephone no. ▶ (765)751-1	831		
	Located	et ► 200 E JACKSON ST, MUNCIE, IN ZIP+4 ► 47305			
15		1947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	
		r the amount of tax-exempt interest received or accrued during the year			
16		time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
		nk, securities, or other financial account in a foreign country?	16		Х
		instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign	gn country			
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required			
	File For	m 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During th	ne year did the foundation (either directly or indirectly)			
	(1) Enga	ge in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borr	ow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		ualified person?			
		ish 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?			
	(5) Tran	sfer any income or assets to a disqualified person (or make any of either available for			
	the l	penefit or use of a disqualified person)?	}		
	(6) Agre	e to pay money or property to a government official? (Exception. Check "No" if the			
	foun	dation agreed to make a grant to or to employ the official for a period after			ļ
	term	ination of government service, if terminating within 90 days)	]	1	1
b	If any a	nswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 5	i3.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b	<u> </u>	<u> </u>
	Organiza	tions relying on a current notice regarding disaster assistance check here		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 2012?	. <u>  1c</u>	ļ	<u>X</u>
2	Taxes o	n failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	
	operating	g foundation defined in section 4942(j)(3) or 4942(j)(5))		1	
а		and of tax year 2012, did the foundation have any undistributed income (lines 6d and			
		XIII) for tax year(s) beginning before 2012?			
		list the years $\blacktriangleright$ 2007,		1	Ì
b		re any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			j
		to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			١
	•	listed, answer "No" and attach statement - see instructions.)	. <u>2b</u>	<del> </del>	X
C		ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3 <i>a</i>		oundation hold more than a 2% direct or indirect interest in any business enterprise			
		me during the year?			
t		did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or		ļ	ļ
		ned persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	İ	1	
		sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	1		
		, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		1	
_		on had excess business holdings in 2012 )		+	<del>  </del>
		oundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	· <u>  4a</u>	+-	<del>  X</del>
t		foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	۱		l v
	cnaritab	e purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?			(2012)
			rorm 3	JUTE	12012)

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Par	t VII-B Statements Regarding Activities f	or Which Form 47	20 May Be Requ	ired (continued)		
5a	During the year did the foundation pay or incur any am-	ount to				
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	4945(e))?	. Yes X No	.   .	
	(2) Influence the outcome of any specific public e	election (see section 4	4955); or to carry o	n,	1 1	- 1
	directly or indirectly, any voter registration drive?.			. Yes X No	.	
	(3) Provide a grant to an individual for travel, study, or	other similar purposes?		. Yes X No		
	(4) Provide a grant to an organization other than	a charitable, etc., org	ganization described	n		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?	(see instructions)		. Yes X No		
	(5) Provide for any purpose other than religious,	charitable, scientific,	literary, or educations	al		
	purposes, or for the prevention of cruelty to children	n or animals?		. Yes X No		
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the	e transactions fail to	qualify under the e	xceptions described in	.	
	Regulations section 53 4945 or in a current notice rega	arding disaster assistanc	ce (see instructions)?		5b	
	Organizations relying on a current notice regarding disa	ester assistance check h	nere			
c	If the answer is "Yes" to question 5a(4), does the	e foundation claim ex	emption from the ta	×		
	because it maintained expenditure responsibility for the	grant <sup>7</sup>		Yes No	. ] ]	Ì
	If "Yes," attach the statement required by Regulations so	-				
6a	Did the foundation, during the year, receive any fu		ctly, to pay premium	ıs		
	on a personal benefit contract?	•		Yes X No	, }	
ь	Did the foundation, during the year, pay premiums, dire			•	. 6b	Х
_	If "Yes" to 6b, file Form 8870	, on , on management, on o p				
7a	At any time during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?	Yes X No	,	
	If "Yes," did the foundation receive any proceeds or have	•	· · ·		7b	
	t VIII Information About Officers, Directo					
1	and Contractors	managers and their	componentian Isaa	instructions		
		(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 allo	
IRS	ST MERCHANTS TRUST COMPANY	TRUSTEE				
200	E JACKSON STREET, MUNCIE, IN 47305		5,554	-0		- 0 -
		_				
		_				
2	Compensation of five highest-paid employee "NONE."	s (other than thos	se included on lin	e 1 - see instruction	ons). If no	ne, enter
	NOIVE,	(b) Title, and average	I	(d) Contributions to		
(8	a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expensi	account,
		devoted to position		compensation		
NONE	B	_				
	· · · · · · · · · · · · · · · · · · ·		NONE	NONE	NO	ONE
<b>-</b>		_				
		_				
	·					
		_				
						<u>.</u> -
		_				
		1	1	1		

Total number of other employees paid over \$50,000 . . . . . . . . .

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Part VIII Information About Officers, Directors, Trustees, Foundation Mana and Contractors (continued)	agers, Highly Paid Employe	ees,
3 Five highest-paid independent contractors for professional services (see instruc	tions). If none, enter "NONE	m
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		NONE
	_	
Total number of others receiving over \$50,000 for professional services		NONE
Part IX-A Summary of Direct Charitable Activities		-
List the foundation's four largest direct charitable activities during the tax year include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc	information such as the number of	Expenses
1 NONE		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
2		-
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	<del></del>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2	Amount
1 NONE		
2		
All other program-related investments. See instructions		
3 NONE		
Total. Add lines 1 through 3		

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	n foundat	ions,
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	NONE
ь		1b	156.
C	Fair market value of all other assets (see instructions)	1c	571,583.
d		1d	571,739.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	3	571,739.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	8,576.
5		5	563,163.
6	Minimum investment return. Enter 5% of line 5	6	28,158.
Pa	nt XI Distributable Amount (see Instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here 🕨 🦳 and do not complete this p	art )	
1	Minimum investment return from Part X, line 6	1	28,158.
2 a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	437.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	27,721.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	27,721.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	27,721.
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	31,944.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	31,944.
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	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	31,944.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatives for the section 4940(e) reduction of tax in those years.		

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	990-PF (2012)  XIII Undistributed Income (see instruction)	ions)			Page S
1	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
	line 7				27,721.
	Undistributed income, if any, as of the end of 2012				
а	Enter amount for 2011 only			26,982.	
b	Total for prior years 20_10_,20,20		4,609.		
3	Excess distributions carryover, if any, to 2012				
а	From 2007 NONE			,	
b	From 2008 NONE				
	From 2009 NONE				
d	From 2010 NONE				
e	From 2011 NONE				
f	Total of lines 3a through e	NONE			
	Qualifying distributions for 2012 from Part XII,		- ,	- 1	
	line 4 ▶ \$31,944.			,	
а	Applied to 2011, but not more than line 2a			26,982.	
b	Applied to undistributed income of prior years				
	(Election required - see instructions)		4,609.		
c	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
	Applied to 2012 distributable amount			····	353
	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2012	NONE			NON
	Enter the net total of each column as indicated below:				
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
А	Subtract line 6c from line 6b Taxable				
u	amount - see instructions				
е	Undistributed income for 2011. Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				27,368
,					2,,500
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE			
8	Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	NONE			
10	Analysis of line 9				
	Excess from 2008 NONE				
	Excess from 2009 NONE				
	Excess from 2010 NONE				
	Excess from 2011 NONE				
	Excess from 2012 NONE				

Pa	A XIV Private Oper	ating Foundations (	see instructions and	Part VII-A, question	9)	NOT APPLICABLE
1a	16 11 11 11 1					
	foundation, and the ruling	is effective for 2012, en	ter the date of the ruling		. ▶∟	
b	Check box to indicate who				4942(j)	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
2.0	justed net income from Part	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) 10tai
	I or the minimum investment return from Part X for each					
	year listed					
Ь	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					
<b>L</b>	4942(j)(3)(B)(i)					
U	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
r	"Support" alternative test - enter	<del></del>				
·	(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 sup-					
	port from an exempt organization					
_	(4) Gross investment income.	L	I.,		<u> </u>	<u></u>
E		ary  Information  (C during the year - se		only if the founda	ation had \$5,000	or more in assets
	Information Regarding					<del></del>
' a	List any managers of	,		e than 2% of the tota	contributions receive	ed by the foundation
	before the close of any					,
	NONE					
_b	List any managers of	the foundation who	own 10% or more of	the stock of a corpo	oration (or an equally	large portion of the
	ownership of a partner	rship or other entity) o	f which the foundation	n has a 10% or greater	ınterest	
	NONE					
					<u>.</u>	
2	Information Regarding					
		the foundation only				
	unsolicited requests for other conditions, compared to the conditions, compared to the conditions of t			ints, etc. (see instruct	ions) to individuals o	r organizations under
	The name, address, ar			to whom applications	chould be addressed:	<del></del>
o		·	or e-mail or the person	to whom applications	should be addressed	
h	SEE STATEMENT The form in which app		bmitted and information	on and materials they	should include	
	SEE ATTACHED S			on one motoriols tricy		
	CHP WITHCHED O	INIDEDITION D	11111 4			
c	Any submission deadl	ines	<del></del>			
	SEE ATTACHED S	TATEMENT FOR L	INE 2			
d	Any restrictions or I factors:	imitations on awards	s, such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other
		Mampunim === -	T.V.D. 0			
JSĀ		TATEMENT FOR L	INE Z	<del></del>		Form 990-PF (2012)
	000					FORD 330TF (2012)

3 Grants and Contributions Paid Durin	continued)  g the Year or Appr		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
RUN SUNDARAM	-			
01 WEST BAYSWATER MUNCIE IN 47304	NONE	n/a	GENERAL SCHOLARSHIP	10,000
NDSEY KIRKPATRICK				
O W SECOND STREET APT 304 KANSAS CITY MO 6	NONE	n/a	GENERAL SCHOLARSHIP	10,000
TIE ANN MORRIS				
06 W QUILLING DRIVE MUNCIE IN 47304	NONE	N/A	GENERAL SCHOLARSHIP	10,000
	-	-		
Total			≯ 3a	30,000
b Approved for future payment				
			1	
			1	

er gross amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
<del>-</del>					(See Instructions.)
					<del>-</del>
d			<u> </u>		
					<del></del>
e			<u> </u>		
g Fees and contracts from government agencies			<del>                                     </del>		
Membership dues and assessments		·	<u> </u>		
Interest on savings and temporary cash investments		<u> </u>	14	2.	
Dividends and interest from securities			14	14,819.	
Net rental income or (loss) from real estate		<del></del>	<b></b>		
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property		<del></del>			
Other investment income					
Gain or (loss) from sales of assets other than inventory		* -	18	10,656.	<del></del>
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory.					
Other revenue a	ļ		1		
b REFUNDS				1,105.	
c					
d					
		"			
e			1		
			<del></del>	26,582.	·
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calcu	ulations.)				26,58
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated XVI-B Relationship of Activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated and the columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated and the columns (b), (d), and (e)  Explain below how each activity accomplishment of the foundation	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities  ne No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities are No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities are No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcutable and the substitution of activities e No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcutable and the substructions of Activities e No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the substitution of activities.  Relationship of Activities e No Explain below how each activities.	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities are No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities are No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities  ne No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities  ne No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities  ne No Explain below how each activities	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)	ulations.)  to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to

Part	XVII	Information R Exempt Organ		ansfers To and	Transacti	ons ar	nd Relationshi	ps With None	hari	table	:
		organization direct				-				Yes	No
		on 501(c) of the Co	de (other than	section 501(c)(3)	organization	s) or in	section 527, relat	ting to political			I
	organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of.										1
	(1) Cash										Х
	(2) Other assets —										X
		ansactions:							1.5,5,		
(	1) Sale	s of assets to a non	charitable exer	npt organization .					1b(1)		X
(	2) Purc	chases of assets from	m a noncharital	ble exempt organiz	ation				16(2)		<u>X</u>
		tal of facilities, equip							1b(3)		X
		nbursement arrange							1b(4)		X
		ns or loan guarantee							1b(5)	-	X
		ormance of services of facilities, equipm							1b(6) 1c	<del>  -  </del>	X
		enswer to any of th								fair m	
		f the goods, other									
	value ir	any transaction of	r sharing arran	gement, show in o	column (d) ti	ne value	of the goods, of	ther assets, or s	ervice	s rece	eived.
(a) Lin	e no.	(b) Amount involved	(c) Name of	noncharitable exempt or	ganization	(d) De	scription of transfers, t	ransactions, and shar	ing arra	ngeme	nts
		<u>-</u>									
		···-									
			ļ								
	-+	<del></del>									
			ļ	<del></del>							
			1	<del></del>							
						<u> </u>					
						<u> </u>					
	-+					<del></del>	<del></del>				
					···		<del></del>				
								<del></del>			
2a	s the 1	foundation directly	or indirectly a	ffiliated with, or re	elated to, on	e or mo	ore tax-exempt or	ganizations			
	describ	ed in section 501(c)	of the Code (d	other than section !	501(c)(3)) or	ın sectio	on 527 <sup>7</sup>		Y	es 🔃	No
b	If "Yes,'	complete the follow		1			<del></del>				
		(a) Name of organization	on .	(b) Type of	forganization		(c) D	escription of relation	ship		
			<del> </del>			<del></del>					
					41.						
		<u> </u>	<u> </u>							_	
_		penalties of perjury, I decl., and complete Declaration of	are that I have exam	nined this return, including	accompanying s	chedules ar	nd statements, and to th	e best of my knowled	ge and	belief it	is true
Sign	Confect	Your of the	n preparer totrier than つる	Laxpayer, is based on all ill	1)	preparer na	s any knowledge	May the IR	S discu	ss this	return
Here		wyz col	JR	9-12-	13	VP/	TRUST OFF		reparer		below
	1 -	ature of officer or trustee		Date		Title		(see instructio	ns)? [_}	Yes	No
	TO	RY M. COOK  Print/Type preparer's	s name	. Preparer's signy	flure/		Date		PTIN		
Paid		TRACY O. OSE		1	11 dh	لبهب	SEP 1 1 20	13 Cueck []"	P000	1544	07
Prep	arer			AX SERVICES,	LLC		E.,		3747		<u> </u>
Use	Only	Firm's address ▶ 4 (			SUITE 2	00		5 LIN F 2/3	217		

Phone no. 765-288-3651

MUNCIE,

IN

## Form 4720

Department of the Treasury Internal Revenue Service

# Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

(Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4965, 4966, and 4967) ► Information about Form 4720 and its separate instructions is at www.irs.gov/form4720

OMB No. 1545-0052

For calen-	dar year 2012 or other tax year beginning	06/01	,2012, and ending	05/31/	2013 ,20		
Name of	organization or entity			Em	ployer identification n	umber	
DR F	FERRELL DUNN MEMORIAL	FUND TRUST 002429			35-6398629		
Number,	street, and room or suite no (or P O. box)	mail is not delivered to street address)		Chi	eck box for type of annu	al return	
200	EAST JACKSON STREET				Form 990	Form 99	0-EZ
	wn, state, and ZIP code			Х			
MINO	CIE, IN 47305			1	Form 5227		
					1 10111 3227	Yes	No
A Is	the organization a foreign privat	e foundation within the meaning	of section 4948(h)?			103	
	as corrective action been taken						
10	orm? (Enter "N/A" if not applicable	٠,				السبا	
	"Yes," attach a detailed descrip						
	alue of any property recovered as		122-11		. If "No," (i.e., any i	uncorre	cted
	cts or transactions), attach an ex						
Part I		(Sections 170(f)(10), 664(c)(2), 59, 4965(a)(1), and 4966(a)(1))		, 4943(a), 	4944(a)(1),		
1 Ta	ax on undistributed income - Sch	edule B, line 4		1			
2 Ta	ax on excess business holdings -	Schedule C, line 7		2	!		
	ax on investments that jeopardize						
	ax on taxable expenditures - Scho				<del>-  </del>		
	ax on political expenditures - Sch				<del></del>		
	ax on excess lobbying expenditu						
	ax on disqualifying lobbying expe				<del></del>		
	ax on premiums paid on persona				<del></del>		
	ax on being a party to prohibited						
	ax on taxable distributions - Sche				···		
	ax on a charitable remainder trus						
	ax on failure to meet the require				<del></del>		
	otal (add lines 1-12)				<del></del>		
Part I		If-Dealers, Disqualified Pers				ons	
	<del>_</del>	944(a)(2), 4945(a)(2), 4955(a)(2), 4				Ulis	
		Name and address of person subject to ta			(b) Taxpayer identificat	ion numb	——— Pr
					(-) (-) (-) (-) (-) (-) (-) (-) (-) (-)		<del>-</del>
<u></u>		<del></del>			<del></del>		
<u>c</u>	1	(d) Tax on investments that jeopardize				<del></del> -	
	(c) Tax on self-dealing- Schedule A, Part II, col. (d), and Part III, col. (d)	charitable purpose - Schedule D,	(e) Tax on taxable expenditue Schedule E, Part II, col. (d.		(f) Tax on political exp Schedule F, Part II,	enditures	•
	, , , , , , , , , , , , , , , , , , , ,	Part II, col. (d)		<del>-</del>			
<u>a</u>				-+	·		
<u>b</u>							
<u>c</u>							
Total	ļ	(1) 7					
	(g) Tax on disqualifyinglobbying ex-	(h) Tax on excess benefit transactions - Schedule I, Part II, col	(i) Tax on being a party to proh tax shelter transactions - Scheo		(j) Tax on taxable dist		-
	penditures - Schedule H, Part II, col. (d)	(d), and Part III, col. (d)	Part II, col (d)		Schedule K, Part II,	, col (d)	
<u>a</u>					· · · · · · · · · · · · · · · · · · ·		
<u>b</u>							
<u>c</u>							
Total							
	(k) Tax on prohibited benefits - Sch L, Part II, col (d), and Part III, col (d)				(I) Total - Add cols (c)	through (	k)
<u>в</u>	<del>                                     </del>			$\vdash$	<del></del>		
	<del>                                     </del>						
C	<del> </del>			<u> </u>			
Total For Priv	vacy Act and Panerwork Reduction	Art Notice see the concests !	mtions			4720	12012

35-6398629 Form 4720 (2012) Page 2 Part II-B Summary of Taxes (See Tax Payments in the instructions.) Enter the taxes listed in Part II-A, column (I), that apply to managers, self-dealers, disqualified persons, donors, donor advisors, and related persons who sign this form. If all sign, enter the total amount from Part II-A, column (I) . . . . . . 2 Total tax, Add Part I, line 13, and Part II-B, line 1. Total payments including amount paid with Form 8868 (see instructions). 3 Tax due. If line 2 is larger than line 3, enter amount owed (see instructions) . . 5 Overpayment. If line 2 is smaller than line 3, enter the difference. This is your refund 5 SCHEDULE A - Initial Taxes on Self-Dealing (Section 4941) Acts of Self-Dealing and Tax Computation Part I (a) Act (b) Date (c) Description of act number 1 5 (d) Question number from Form 990-PF. (q) Tax on foundation managers (if (f) Initial tax on self-dealing (10% of col. (e)) (e) Amount involved in act applicable) (lesser of \$20,000 or 5% of applicable to the act col (e)) Summary of Tax Liability of Self-Dealers and Proration of Payments (d) Self-dealer's total tax liability (add amounts in col. (c)) (b) Act no from (c) Tax from Part I, col. (f), (a) Names of self-dealers liable for tax or prorated amount (see instructions) Part III Summary of Tax Liability of Foundation Managers and Proration of Payments (d) Manager's total tax liability (c) Tax from Part I, col. (g), (b) Act no. from (a) Names of foundation managers liable for tax (add amounts in col (c)) (see instructions) SCHEDULE B - Initial Tax on Undistributed Income (Section 4942) Undistributed income for years before 2011 (from Form 990-PF for 2012, Part XIII, line 6d) Undistributed income for 2011 (from Form 990-PF for 2012, Part XIII, line 6e) 2 Total undistributed income at end of current tax year beginning in 2012 and subject to tax under section 4942 (add lines 1 and 2) Tax - Enter 30% of line 3 here and on Part I, line 1 . . Form 4720 (2012)

Form 4720 (2012)	0011501	W. F. G					98629 Page
D Ualdi		JLE C - Initial Tax on	Exce	ess Bus	iness Holdin	gs (Section 494	3)
	ngs and Comp				-441-		
instructions for e	ach line item befo	gs in more than one busir ore making any entries.	iess e	enterprise	, aπach a separa	ate schedule for ea	ch enterprise. Heter to the
	of business enterpri						
							· · · · · · · · · · · · · · · · · · ·
Employer identifi	cation number .	· · · · · · · · · · · · · · · · · · ·	<u></u>	<u></u>	<u> </u>	<u></u>	
Ff						_	
Form of enterpris	e (corporation, pa	artnership, trust, joint vent	ure, s	ole propr	· · ·		<del></del>
				Vot	(a) ng stock	(b) Value	(c) Nonvoting stock
				4	interest or	*810E	(capital interest)
				benefic	ial interest)		
1 Foundation I	holdings in busine	ess enterprise	1		%	%	
						- "	
2 Permitted ho	oldings in busines	s enterprise	2		%	%	
			_				
		isiness enterprise	3				<del></del>
	_	disposed of within 90 excess holdings not					
•		ax (attach explanation)	4				
		business enterprise -					
line 3 minus	line 4		5				
6 Tax-Enter 1	0% of line 5		6		-		
		on line 6, columns (a), and on Part I, line 2	7				
		on Investments Tha		onardiz	e Charitable	Purpose (Section	n 4944\
	tments and Tax			<del>opului</del>	<u> </u>	Tulpose (occine	71 40447
(a) Investment		<u> </u>				(e) Initial tax on	(f) Initial tax on foundation
number	(b) Date of investment	(c) Description of in	vestme	nt	(d) Amount of investment	foundation (10% of col (d))	managers (if applicable) - (lesser of \$10,000 or 10%
						33 (3//	of col (d))
1							
2							
4							<del></del>
5							
Total - column (e	). Enter here and	on Part I, line 3					
Total - column (f	). Enter total (or p	rorated amount) here and	ın Pa	rt II, colur	nn (c), below		
Part II Sumi	mary of Tax Lia	bility of Foundation Ma	nage	ers and l	Proration of Pa	yments	
(a) Nam	nes of foundation mana			estment m Part I.		, col. (f), or prorated	(d) Manager's total tax liability (add amounts in col. (c))
				(a)			(see instructions)
		-		-	<del>_</del>		
		}-		-			
		-					
						· · · · · · · · · · · · · · · · · · ·	
		<u> </u>					
		1					İ

		SCHEDULE E -	Initial Taxes	s on Taxable I	<u>Expend</u>	itures (Se	ction 4945)	
Part I	Expenditures a	nd Computation						
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) N	lame and address of	recipient		(e) Description	of expenditure and purposes for which made
1	 							
2	ļ						· <del></del>	
3								
<b>-</b>	<del></del>							
	tion number from Form 9 227, Part VI-B, applicabl		(g) In	intial tax imposed on (20% of col. (b)		n	manager	tax imposed on foundation s (if applicable) - (lesser of 000 or 5% of col. (b))
Total - co	olumn (g). Enter he	re and on						
	e 4					j		
Total - co	olumn (h). Enter to	tal (or prorated am	ount) here and	d in Part II, colur	mn (c),			
		<u> </u>				<u></u> .		
Part II		x Liability of For					ents	
	(a) Names of founda	ation managers liable for	tax	(b) Item no from Part I, col (a)	(c)	Tax from Pari prorated a		(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
		<del> </del>						
		724						
		SCHEDULE F	- Initial Taxe	s on Political	Expend	litures (Se	ection 4955)	
Part I	Expenditures a	nd Computation	of Tax					10.1
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description	on of political expen	diture	organizati	tax imposed on on or foundation 6 of col. (b))	(f) Initial tax imposed on managers (if applicable) (lesse of \$5,000 or 2 1/2% of col. (b)
<u>1</u>								·
<del>3</del>			<del> </del>					
<del>-</del>								<u> </u>
	olumn (e). Enter he	ere and on Part I, lin	ne 5	-				
		al (or prorated amo		I in Part II. colur	nn (c). b	elow		
Part II							gers and Prora	ation of Payments
	(a) Names of o	rganization managers or nanagers hable for tax		(b) Item no from Part I, col (a)	1	:) Tax from Par prorated a	rt I, col (f), or	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
								-
								-
				<u></u>				-
				1				1

Form 4720 (2			_				35-6	398	629 Pag	e 5
	SO	CHEDULE G - T	ax on Exce	ss Lobbying	Expe	nditures	(Section 491	1)		_
990 c 2 Exces	or 990-EZ), Part II ss of lobbying ex	expenditures ove -A, column (b), line penditures over lo mn (b), line 1i). (So	e 1h). (See the obbying nonta	instructions be xable amount (f	fore ma	aking an e chedule C	entry.) (Form 990 or	1 2	LL	_
3 Taxal	ole lobbying expe	nditures - enter the	e larger of line	1 or line 2				3	, , , , , , , , , , , , , , , , , , ,	
4 Tax -		3 here and on Pa				-				
		OULE H - Taxes		lifying Lobb	ying E	xpendit	ures (Section	491	12)	
Part I		nd Computation	of Tax	<del></del>		1			Tax imposed on organization	
number	(b) Amount	incurred	(d) Description	n of lobbying expend	itures		posed on organization 5% of col. (b))		managers (if applicable) - (5% of col (b))	
1 2	a	-				-		<del> </del>		
3				<del>.</del>		<del>                                     </del>		-		—
4										
5						<u> </u>	-	╄		_
Total - colu	ımn (e). Enter her	e and on Part I, lin	<u>ie</u> 7	<u></u>						1
	10.5									_
		l (or prorated amo								—
		ation managers liable for		(b) Item no. from Part I, col (a)		c) Tax from F	Part I, col. (f), or d amount	(d)	) Manager's total tax liabili (add amounts in col. (c)) (see instructions)	ly
								-		
										_
								-		
				<del>  </del>				+		_
								1		
		24.11					<del>_</del>		<del></del>	
	SCH	EDULE I - Initia	I Taxes on	Excess Bene	efit Tr	ansactio	ons (Section 4	958	3)	
Part I	Excess Benefit	Transactions a	nd Tax Com	putation						<u> </u>
Transaction number	(b) Date of transaction			(c) De	scription	of transacti	on			
1										
2										_
<u>3</u> 4									<del></del>	
5			·- <u></u>							_
(d) Amount of excess benefit (e) Initial tax on disqualified persons (f) Tax on organization (if applicable) (less (25% of col. (d)) \$20,000 or 10% of (				ble) (lesser of	_					
							<del></del> ·-			—
										_
			<u> </u>				<u> </u>		r 4330	
									Form 4720 (26	112)

Table Sumr	nary of Tay Liahi	ility of Discussified Pa	orenne and D	roration of Paymente			
	mes of disqualified person		(b) Trans no from Part I, col (a)	roration of Payments (c) Tax from Part I, col. (e), or prorated amount	(d) Disqualified person's total tax hability (add amounts in col. (c)) (see instructions)		
art III Sumr	nary of Tax Liab	ility of 501(c)(3), (c)(4)	& (c)(29) Org	ganization Managers and	Proration of Payments		
		zation managers liable for tax	(b) Trans no from Part I, col (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)		
	SCHEDULE J - Ta	axes on Being a Party	y to Prohibite	ed Tax Shelter Transaction	ons (Section 4965)		
	instructions)	er Transactions (P15)	ı) and lax in	nposed on the Tax-Exem	pt Entity		
(a) Transaction number	(b) Transaction date	(c) Type of transaction 1 - Listed 2 - Subsequently listed 3 - Confidential 4 - Contractual protection	(d) Description of transaction				
1							
2							
3							
4							
5							
(e) Did the tax-exem have reason to know was a PTST when it the transaction? Ar	w this transaction became a party to	(f) Net income attributable to the PTST	(g)	75% of proceeds attributable to the PTST	(h) Tax imposed on the tax-exempt entity (see instructions)		
<del></del>							
		<del></del>					

Part II	Tax Impos	ed on Entity Managers (Se	ction 4965)	<u>Con</u> tin	ued			
	<u> </u>	me of entity manager	(b) Transact number fro Part I, col (	ion m	(c) Tax - enter \$20, transaction listed in manager in	col (b) for each	(d) Manager's total tax liability (add amounts in col. (c))	
_								
							-	
	-	<del></del>				<del></del>		
					<del></del>		_	
		<del></del>						
							-	
						<u></u>		
							_	
				-				
							]	
<del></del>	SCHE	DULE K - Taxes on Taxable	Distribution	s of Si	nonsoring Orga	nizations Mai	ntaining Donor	
		Advised Fu	unds (Section	4966	). See the instri	uctions.		
Part I	Taxable D	(b) Name of sponsoring organiza		•••				
tem number		donor advised fund				(c) Description of	of distribution	
1			<del></del>		<del> </del>			
2								
	-							
3				<del></del>				
4								
(d) Date of d	listribution	(e) Amount of distribution			(f) Tax imposed on organization (20% of col (e))		(g) Tax on fund managers (lesser of 5% of col. (e) or \$10,000)	
	<del></del>				· · · · · · · · · · · · · · · · · · ·		<del></del>	
							Portugues and was arrest. The second arrest arrest arrest arrest arrest arrest arrest arrest arrest arrest arr	
		er here and on Part I, line 10. er total (or prorated amount) he		II, colu	ımn (c), below .			
		of Tax Liability of Fund Ma				s		
	(a) Name of fund managers liable for tax		(b) Item no fro Part I, col (a	4	(c) Tax from Part I, col amoun		(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)	
			-			· · · · · · · · · · · · · · · · · · ·	-	
			<u> </u>	-			-	
					<del></del>	· · · · · · · · · · · · · · · · · · ·		
							Form 4720 (20)	

### SCHEDULE L - Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967). See the instructions.

art I	Prohibited Benefits an	d Tax Computat	ion	
(a) Item number	(b) Date of prohibited benefit		(c) [	Description of benefit
1				
2				
3			<del></del>	
4				
5				
(d) Amou	nt of prohibited benefit		ed benefit (125% of col. (d))	(f) Tax on fund managers (if applicable) (lesser of 10% of col (d) or \$10,000) (see instructions)
Part II	Summary of Tax Liabil	lity of Donors, D	onor Advisors, Related	Persons and Proration of Payments
(a) Names	of donors, donor advisor, or ed persons liable for tax	(b) Item no from Part I, col. (a)	(c) Tax from Part I, col (e) or prorated amount	(d) Donor, donor advisor, or related persons total tax liability (add amounts in coll (c)) (see instructions)
Part III	Tax Liability of Fund M	lanagers and Pr	oration of Payments	
(a) Names o	of fund managers liable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col. (f) or prorated amount	(d) Fund managers total tax liability (add amounts in col. (c)) (see instructions)
				-
				-
		L	<u> </u>	<u> </u>

# Schedule M - Tax on Failure to Meet the Community Health Needs Assessment Requirements (Section 501(r)(3)), (See instructions.)

	nequi	rements (Section 50 (()(3)), (See ()	istructions.)	
Part I	Name of Hospital Facility an	d Summary of Failure to Meet Section	n 501(r)(3)	
(a) Item number	(b) Name of facility	(d) Tax year facility last co		
1				
2				
3				
4				
5				
Part II	Computation of Tax			
		by the hospital organization that failed to note of section 501(r)(3)	· •	
2 Tax	c - Enter \$50,000 multiplied by line	1 here and on Part I, line 12	2	

Form 4720 (2012)

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

REVENUE AND EXPENSES INVE	
---------------------------	--

NET ESTMENT NCOME

TCM INTEREST

DESCRIPTION

TOTAL

17

STATEMENT

JR3366 A541 09/11/2013 14:09:33

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

NET INVESTMENT INCOME	14,819.
REVENUE AND EXPENSES PER BOOKS	14,819.
	TOTAL
DESCRIPTION	DIVIDENDS & INTEREST

002429

N

STATEMENT

. DR FERRELL DUNN MEMORIAL FUND TRUST 002429

35-6398629

FORM 990PF, PART I - OTHER INCOME

REVENUE
AND
EXPENSES
PER BOOKS

-----

DESCRIPTION

REFUND - FEDERAL TAXES

1,105.

TOTALS

1,105.

FORM 990PF, PART I - ACCOUNTING FEES 

002429

Ċ	

NONE		
8 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		

NONE

NONE

TOTALS

ACCOUNTING FEES

DESCRIPTION

CHARITABLE PURPOSES

ADJUSTED NET INCOME

INVESTMENT INCOME

EXPENSES PER BOOKS

REVENUE AND

FORM 990PF, PART I - TAXES

.

REVENUE AND EXPENSES

DESCRIPTION PER BOOKS

TAXES 3,560.

TOTALS 3,560.

# GAINS AND LOSSES FROM PASS-THRU ENTITIES

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

34.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

34.00

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NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

565.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

565.00

STATEMENT 6

\_\_\_\_\_

### RECIPIENT NAME:

First Merchant Trust Company C/O Dunn Memorial

### ADDRESS:

Foundation 200 East Jackson Street Muncie, IN 47305

FORM, INFORMATION AND MATERIALS:

Scholarship application forms

SUBMISSION DEADLINES:

April 1st of each calendar year RESTRICTIONS OR LIMITATIONS ON AWARDS:

Graduates of high schools located in Delaware County Indiana which are enrolled in any accredited pre-medical and / or medical schools in the United States.

DUNNINEM

ALPHA KEY.

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070

28,957.57 / CURRENT MARKET VALUE 0.00 00.0 POWERS-STAT INV OBJ-BALANCED 25,429.63 28,957.57 246,592.79 3,527.94 28,957.57 246,592.79 101,886 13 PAGE 1.000\* 1.000\* UNIT PRICE 8.638 19.020 NON INC PROP -N REAL ESTATE -N OWN STOCK -N 00 2429 5 07 OWN TIME DEP -N COM TRUST FND-Y BUSINESS INT -N MKT VAL ADJUSTED LAST YR 0 3,528 77,673 25,430 28,95B 251,576 251,576 28,958 28,958 23 INV ONLY MKT VALUE 41.6 00 9. 4.3 9. 9. 4.9 41.6 ~ 00 17 ï COM TRUST FND-N 7 7 DATE OPENED-06/27/1985 FEE DUE -M-MAR FEE SCHED-AS RIN PWR-NONE CRITICAL DT-00/00/0000 FEE TYPE -DEDUCT TAXLOTS -YES OWN TIME DEP - PROXY OWNER-01522 OBO FEE PYMT -05/07/2013 TAX Y/E -MAY COM TRUST FND-INV INVAS -LIMITED FEE MIN TAX SV -YES REAL ESTATE - MDB ELEC -NONE OWN STOCK - STWT DUE -A-MAY FEE DISC \$ CASH SWEEP-YES BUSINESS INT - REWW DUE -A-DEC INF RPIG -APPLICABLE 1098 & 1099MISC (NONEMP COMP) CURR YLD MKT 0.0 0.0 0 3.2 3.2 0 0 1.1 CURR YLD MAT LARGE/MULTI- CAP EQUITY FUNDS EST ANNUAL INCOME 0 m 7,903 7,903 1,071 MISC CASH EQUIV-TXBL DR FERRELL DUNN MEMORIAL FUND TRUST INVESTMENT INVENTORY COST BASIS BASIS COMMON BOND FUNDS 3,528 25,430 28,958 236,905 28,958 ~236,905 73,656 28,958 0.00 00 0 3,527.94 236,904.97 25,429.63 28,957.57 28,957 57 28,957.57 236,904.97 50,415.98 INVT FGLL FULL FULL FULL S&P/ MDY RTNG \* SHARES OR PAR 28,548.582 5,356.789 25,429 63 3,527.94 \* \* 4 \* \* \* \*\*\*TOTAL FIXED INCOME SECURITIES TOTAL OTHER MISC CASH EQUIV-TXBL OTHER MISC CASH EQUIV-TXBL FED GOV'T OBLIG INCOME TOTAL MISC CASH EQUIV-TXBL NOT CLASSIFIED FEDERATED CLOVER VALUE INSTL MATURITY (0 - 5 YRS) INTERMEDIATE TERM INCOME FD FUND 05 FEDERATED GOV'T OBLIG PRIN \*\*\*FIXED INCOME SECURITIES \*\*\*TOTAL CASH EQUIVALENTS -CHAR TRUST OFFICER -COOK INV OFFICER-TERHUNE \*\*\*CASH EQUIVALENTS NO OF BENE -01 ACCT STATUS-ACTIVE FOR PERS TR ACCTS SECURITY NAME VOTNG AUTH -SOLE INVST DISC -FULL \*\*\*TOTAL CASH\*\*\* PRINCIPAL CASH INCOME CASH \*\*\*EQUITIES \*\*\*CASH\*\*\* ACCT TYPE FUND 05 BRANCH

# 3 ធា н > स स INVESTMENT PORTFOLIO

070

23 00 2429 5 07 DR FERRELL DUNN MEMORIAL FUND TRUST

317,006.93 / CURRENT MARKET VALUE 24,860.81 183,172.05 183,172.05 21,648.90 38,844.00 83,019.60 56,425.11 22,526.70 83,019.60 26,603.72 24,211.56 PAGE UNIT MARKET PRICE 58.210 124.590 132.510 103.090 90.680 46.510 215.800 ADJUSTED MKT VAL LAST YR 16,678 45,297 19,980 17,908 30,343 18,840 142,950 142,950 64,929 64,929 22,005 248,724 CURR \*
YLD MKT
MKT VALUE 30.9 30.9 Э. В 9.9 14.0 53.5 14.0 4.1 4.5 1.6 2.6 2.0 1,6 6.0 1.7 1.2 1.4 3.2 1.6 1 CURR YLD MAT EST INCOME ANNUAL INTERNATIONAL EQUITY FUNDS 1,445 3,004 488 3,004 196 5,159 196 346 848 363 402 196 SMALL CAP EQUITY FUNDS MID CAP EQUITY FUNDS INVESTMENT INVENTORY COST BASIS BASIS 20,000 16,983 14,583 26,006 41,000 134,656 134,656 24,440 56,006 15,923 24,915 231,500 41,000.00 111,415.98 20,000.00 111,415.98 208,259.25 16,983.00 14,583.03 24,439.60 56,005.63 56,005.63 15,922.86 24,914 78 INVT FULL FULL FULL FULL FULL FULL FOLL S&P/ MDY RTNG Ä 뜻 KK Ř Ŗ \* \* \* SHARES OR PAR 969 337 199.541 TOTAL LARGE/MULTI- CAP EQUITY FUNDS 1 692 210 180 170 572 TOTAL MID CAP EQUITY FUNDS NOT CLASSIFIED VANGUARD FTSE ALL WRLD EX-US VANGUARD EQUITY INCOME FUND ADMIRAL CLASS VANGUARD 500 INDEX FUND SIGNAL CLASS NOT CLASSIFIED S&P MID-CAP 400 GROWTH ETF ISHARES NOT CLASSIFIED S&P SMALL CAP 600 CORE ETF ISHARES SEP MID-CAP 400 VALUE ETF ISHARES TOTAL NOT CLASSIFIED TOTAL NOT CLASSIFIED ALPHA KEY: DUNNMEM SECURITY NAME \*\*\*TOTAL EQUITIES S&P 400 MID-CAP ETF SPDR

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# PORTFOLIO INVESTMENT REVIEW

070 PAGE 3

> 23 00 2429 5 07 DR FERRELL DUNN MEMORIAL FUND TRUST ALPHA KEY: DUNNMEM

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	SHARES OR PAR	S&P/ MDY RTNG	INVT	INVESTMENT INVENTORY COST BASIS BASIS	INVENTORY BASIS	EST ANNUAL INCOME	CURR CURR \$ YLD YLD MKT MAT MKT VALUE	R WKT	ADJUSTED MKT VAL LAST YR	UNIT MARKET PRICE	CURRENT MARKET VALUE	
TOTALS*** ACCRUED INTEREST EX-DIVIDENDS			41	474,121.79	497, 363	13,065	2.2	100.0	2.2 100.0 529,258		592,557.29 <b>V</b> 0 25 682.84	
			4	474,121.79	497,363 13,065	13,065	2.2	100 0	2.2 100 0 529,258		593,240.38	
	474,121.79	SHARES/PAR CONTROL	/PAR C	ONTROL	65,430.819	.819						
TAX YID LONG TERM G/L TAX YID MID TERM G/L TAX YID SHORT TERM G/L	10,599'66 0 00 64.99	FEES PAID Y/T/D LAST FEE PMT DATE	AID Y/'	r/D DATE	2,332.03 05/07/2013		PRIOR Y/E MARKET VALUE CONTRIBUTIONS TO DATE	AARKET V.	ALUE ATE	552,528 80 0.00	.28 80 0.00	

### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

Attach to Form 1041, Form 5227, or Form 990-T.

Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041

OMB No. 1545-0092

Employer identification number

D	R FERRELL DUNN MEMORIAL FUND	TRUST 002	429		35-639	8629	)
Vote	Form 5227 filers need to complete only Par						
Part	Short-Term Capital Gains and Los	ses - Assets	Held One Ye	ar or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo., day, yr)	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
b	Enter the short-term gain or (loss), if any, fro	m Schedule D	1, line 1b			1b_	
2	Short-term capital gain or (loss) from Forms	4684, 6252, 6	3781, and 8824	1		2	
3	Net short-term gain or (loss) from partnersh	ıps, S corporati	ons, and other	estates or trusts		3_	_34
4	Short-term capital loss carryover. Enter Carryover Worksheet			<b></b>		4	( )
5	Net short-term gain or (loss). Combine	lines 1a throug	gh 4 in colum	n (f). Enter here and	d on line 13,	5	34
Par	column (3) on the back	ses - Assets	Held More TI	nan One Year			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo , day, γr )		(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a I	ONG-TERM CAPITAL GAIN DIVIDE	NDS					210
b	Enter the long-term gain or (loss), if any, fro	m Schedule D-	1, line 6b			6b_	9,816
7	Long-term capital gain or (loss) from Forms	2439, 4684, 6	3252, 6781, ar	d 8824		7_	
8	Net long-term gain or (loss) from partnershi	ps, S corporation	ons, and other	estates or trusts		8_	565
9	Capital gain distributions					9_	31
10	Gain from Form 4797, Part I					10	
11	Carryover Worksheet	the amount, i	f any, from lu	ne 14 of the 2011	Capital Loss	11	()
12	Net long-term gain or (loss). Combine la column (3) on the back	nes 6a througl	h 11 ın colum <u></u>	n (f) Enter here and	d on line 14a,	12	10,622
For F	aperwork Reduction Act Notice, see the Instruc	tions for Form 1	041.			hedule	D (Form 1041) 2012

chedula D (Form 1041) 2012				Page 2
Part III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(3) Total
Caution: Read the instructions before completing this	$\overline{}$	(see instr.)	or trust's	
3 Net short-term gain or (loss)	13			34.
4 Net long-term gain or (loss):				
a Total for year				10,622.
<b>b</b> Unrecaptured section 1250 gain (see line 18 of the wrksht.)				<del></del>
c 28% rate gain				<del></del>
5 Total net gain or (loss). Combine lines 13 and 14a				10,656.
<b>lote:</b> If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 pains, go to Part V, and <b>do not</b> complete Part IV. If line 15, column (3), is a n	(or Fo. et los:	rm 990-T, Part I, line 4 s. complete Part IV ani	a) It lines 14a ar It he <b>Capital Lo</b> s:	nd 15, column (2), are net s Carrvover Worksheet, as
ecessary				
Part IV Capital Loss Limitation				
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P				,
a The loss on line 15, column (3) or b \$3,000		1 line 22 for Form 996	16 J. T. June 34) 15 2	loss complete the Capital
oss Carryover Worksheet in the instructions to figure your capital loss carryover	paye	i, iiile 22  Ui 1 Uiiii 530	F1, IIIC 34), IS B	ioss, complete the Capital
Part V Tax Computation Using Maximum Capital Gains Rate	s			
form 1041 filers. Complete this part only if both lines 14a and 15 in col	umn (	2) are gains, or an a	mount is entered	in Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor				
Caution: Skip this part and complete the Schedule D Tax Worksheet in the	nstruc	ctions if		
• Either line 14b, col (2) or line 14c, col (2) is more than zero, or				
• Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
F <mark>orm 990-T trusts.</mark> Complete this part <b>only</b> if both lines 14a and 15 a of Form 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this part				
f either line 14b, col. (2) or line 14c, col. (2) is more than zero.	and c	omplete the Schedul	e D lax Works	neet in the instructions
	41			<del></del>
Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4) .	17		
8 Enter the smaller of line 14a or 15 in column (2)				
but not less than zero			]	
19 Enter the estate's or trust's qualified dividends			1	
from Form 1041, line 2b(2) (or enter the qualified				
dividends included in income in Part I of Form 990-T)		<del> </del>	Ĭ	
21 If the estate or trust is filing Form 4952, enter the amount from line 4g, otherwise, enter -0-				
		,,		
		· · · <del></del>		
23 Subtract line 22 from line 17 If zero or less, enter -0	• • •	23		
24 Enter the smaller of the amount on line 17 or \$2,400		24		
24 Enter the smaller of the amount on line 17 or \$2,400		24		
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box				
		25		
No. Enter the amount from line 23		26	<del></del>	
27 Are the amounts on lines 22 and 26 the same?	• • •	20		
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or hi		27		
1 e.s. Skip lines 27 diru 30, go to line 31	16 22	27		
28 Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
Enter the amount nom more to the more to blank, and to y		26		
29 Subtract line 28 from line 27		29	l l	
14 1: 1 1 00 1 450/ / 451			30	
30 Multiply line 29 by 15% (.15) 31 Figure the tax on the amount on line 23. Use the 2012 Tax Rat				<del></del>
(see the Schedule G instructions in the instructions for Form 1041)				
,,,				
32 Add lines 30 and 31			32	
33 Figure the tax on the amount on line 17 Use the 2012 Tax Rat	e Sch	edule for Estates ar		
(see the Schedule G instructions in the instructions for Form 1041)				
34 Tax on all taxable income. Enter the smaller of line 32 or line 33				
G, line 1a (or Form 990-T, line 36)				
	<u>-:' •</u>			dule D (Form 1041) 2012

JSA 2F122O 2 000 Schedule D-1 (Form 1041) 2012 Page 2

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side **Employer identification number** DR FERRELL DUNN MEMORIAL FUND TRUST 002429 35-6398629 Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (Example 100 sh. 7% preferred of "Z" Co ) (b) Date (f) Gain or (loss) Subtract (e) from (d) (e) Cost or other basis (see instructions) (c) Date sold (d) Sales price acquired (mo., day, yr.) (mo, day, yr.) 6a 911.3 FEDERATED CLOVER VAL FUND 06/07/1989 10/22/2012 15,000.00 8,682.00 6,318.00 171.585 VANGUARD INFLATION ADMIRAL CLASS 09/30/2009 10/22/2012 5,000.00 4,223.00 777.00 757.838 VANGUARD INFLATION ADMIRAL CLASS 09/30/2009 02/13/2013 21,371.00 18,650.00 2,721.00 6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b . . . . . 9,816.00

2F1222 2 000