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990-PF

Department of the Treasury internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

For calendar year 2012 or tax year beginning 09/01 , 2012, and ending 08/31, 2013 Name of foundation A Employer identification number SARKES AND MARY TARZIAN FOUNDATION INC. 45-5354049 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (812) 332-7251 205 NORTH COLLEGE AVE 8TH FLR STE 800 City or town, state, and ZIP code C If exemption application is pending check here • • BLOOMINGTON, IN 47404 G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization. X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method X Cash Fair market value of all assets at end Accrual If the foundation is in a 60-month termination Other (specify) of year (from Part II, col. (c), line under section 507(b)(1)(B), check here _ > 6,245 (Part I, column (d) must be on cash basis) 16) ▶ \$ Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per may not necessarily equal the amounts in income income purposes books column (a) (see instructions)) (cash basis only) 106,773. Contributions, grifts, grants, etc. received (attach schedule) if the foundation is **not** required to Check ▶ ____ attach Sch B Interest on savings and temporary cash investments Dividends and interest from securities b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . Net short-term capital gain Income modifications -Gross sales less returns and allowances . . . b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 106,773 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc 14 Other employee salanes and wages Expenses 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 2,060. 2,060 b Accounting fees (attach schedule)ATCH 1 Administrative c Other professional fees (attach schedule) . . . 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings Printing and publications 22 Operating 468. 468. 23 Other expenses (attach schedule) ATCH .2. 24 Total operating and administrative expenses. 2,528 2,528. Add lines 13 through 23 98,000. 98,000. Contributions, gifts, grants paid 100,528 100,528. 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 6,245. a Excess of revenue over expenses and disbursements . . b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)

JSA For Paperwork Reduction Act Notice, see instructions.

V 12-7.10

103-1136115-1136115

Б	art II	Rajance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
تنا	artii	Dalance Sileets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beam	ng		6,245.	6,245.
	2		cash investments	_ _		
	3					
		Less. allowance for dou	btful accounts ▶			
	4	Pledges receivable			'	
	-	Less allowance for dou	btful accounts ▶			
	5					
	6		officers, directors, trustees, and other			
			tach schedule) (see instructions)			
	7		eceivable (attach schedule)			
	•		btful accounts	•		
Ø	8			, ,		
ssets	9	Proposed expenses and d	e			
Asi			eferred charges			
-			e government obligations (attach schedule).		<u>-</u>	
			stock (attach schedule)	· · · · · · · · · · · · · · · · · · ·		
	11 ^C	Investments - corporate Investments - land, buildings	bonds (attach schedule)			
		and equipment basis Less accumulated deprecia				
		(attach schedule)				
	12	Investments - mortgage	loans	-		
	13 14	Investments - other (atta Land, buildings, and	nch schedule)			
			tron >			
		(attach schedule)	tion			
	15	Other assets (describe	- ⁾			
	16		completed by all filers - see the			
_			age 1, item I)	0	6,245.	6,245.
	17	Accounts payable and a	ccrued expenses			
	18				<u>.</u>	
ies	19					
Liabilities	20		rs, trustees, and other disqualified persons			
jab	21	Mortgages and other no	tes payable (attach schedule)			
_	22	Other liabilities (describe	· ▶)			
_	23		s 17 through 22)	0	0	
			ow SFAS 117, check here ▶ 🔲 📗			
S		and complete lines 2	24 through 26 and lines 30 and 31.			
nces	24	Unrestricted				
ala	25	Temporarily restricted .				
Net Assets or Fund B	26	Permanently restricted .				
5		Foundations that do	not follow SFAS 117,			
ř		check here and com	plete lines 27 through 31. $\blacktriangleright X $			
8	27	Capital stock, trust princ	cipal, or current funds			
set	28	Paid-in or capital surplus, or	land, bldg , and equipment fund			
As	29	Retained earnings, accumu	ilated income, endowment, or other funds 🚬		6,245.	
let	30	Total net assets or fund	balances (see instructions)	0	6,245.	
_	31	Total liabilities and	net assets/fund balances (see			
		instructions)		0	6,245.	
Р	art II	Analysis of Cha	inges in Net Assets or Fund I	Balances		
1			alances at beginning of year - Part	, ,	• • •	
	end-	of-year figure reported	l on prior year's return)		1	0
2		r amount from Part I, I				6,245.
3	Othe	r increases not include				
4	Add	lines 1, 2, and 3			1 4 1	6,245.
5	Decr		l 0 /4 N		1 - 1	
6	Tota	net assets or fund ba	lances at end of year (line 4 minus l	ine 5) - Part II, column (b), line 30 6	6,245.

Dan	_	3
row	ਢ	•

Part IV Capital Gains					Page 3
	s and Losses for Tax on Inv	vestment Income			
	nd describe the kind(s) of property sold brick warehouse, or common stock, 200	. •	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr.)
1a		<u> </u>	D - Donation	(, ==3, 3, 7	
b					
		~			
d					
е					
(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) minu	
		-			
b					
C	· · · ·				
d					· -
e					· · · · · · · · · · · · · · · · · · ·
	s showing gain in column (h) and own	ed by the foundation on 12/31/69		Cara (Cal (b) a	
(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		Gains (Col. (h) ga (k), but not less t Losses (from co	han -0-) or
		0 to 0 to 0, 11 dily		· · · · · · · · · · · · · · · · · · ·	
b				1.	·
С					
					-
е					
0 0		f gain, also enter in Part I, line 7			
2 Capital gain net income of		lf (loss), enter -0- in Part I, line 7	2		
3 Net short-term capital gail	n or (loss) as defined in sections 1	,			
		structions). If (loss), enter -0- in			
	<u> </u>		3		
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net Investment in	ncome	-	
		he section 4940(a) tax on net investi		me)	*
(
If section 4940(d)(2) applies	leave this part blank				
If section 4940(d)(2) applies	, leave this part blank				
, ,, ,	•	ibutable amount of any year in the b	ase penoc	1?	Yes X No
	•	ibutable amount of any year in the b) Do not complete this part	ase penoc	1?	Yes X No
Was the foundation liable for If "Yes," the foundation does	r the section 4942 tax on the distri s not qualify under section 4940(e)				Yes X No
Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a)	r the section 4942 tax on the distri s not qualify under section 4940(e)) Do not complete this part		es (d)	
Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am	r the section 4942 tax on the distri s not qualify under section 4940(e) nount in each column for each yea	Do not complete this part ar; see the instructions before making	any entr	es (d) Distribution ra	atio
Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base period years	r the section 4942 tax on the distri not qualify under section 4940(e) nount in each column for each yea (b)	Do not complete this part ar; see the instructions before making (c)	any entr	es (d)	atio
Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base period years Calendar year (or tax year beginning in) 2011	r the section 4942 tax on the distri not qualify under section 4940(e) nount in each column for each yea (b)	Do not complete this part ar; see the instructions before making (c)	any entr	es (d) Distribution ra	atio
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Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base period years Calendar year (or tax year beginning in) 2011 2010 2009 2008 2007 2 Total of line 1, column (d) 3 Average distribution ratio number of years the foundation with the foundation of the column of	the section 4942 tax on the district not qualify under section 4940(e) nount in each column for each year (b) Adjusted qualifying distributions Adjusted qualifying distributions For the 5-year base period - divided and ation has been in existence if less ancharitable-use assets for 2012 from the companion of the column	Do not complete this part ar; see the instructions before making (c) Net value of nonchantable-use assets de the total on line 2 by 5, or by the ss than 5 years com Part X, line 5	2 3 4 5	es (d) Distribution ra	otto col (c))
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Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2011 2010 2009 2008 2007 2 Total of line 1, column (d 3 Average distribution ratio number of years the foundation with the foundation of the column of t	the section 4942 tax on the district and qualify under section 4940(e) nount in each column for each year (b) Adjusted qualifying distributions I) of for the 5-year base period - divided addition has been in existence if less incharitable-use assets for 2012 from the formula of the column of	Do not complete this part ar; see the instructions before making (c) Net value of nonchantable-use assets de the total on line 2 by 5, or by the ss than 5 years com Part X, line 5	2 3 4 5	es (d) Distribution ra (col (b) divided by	0 5,859.

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstruc	tions	;)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	_		
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ▶ X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0
6	Credits/Payments:			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a			
	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 6c			
d	Backup withholding erroneously withheld 6d			1
7	Total credits and payments Add lines 6a through 6d		-	0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c		x
	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers. > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
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	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
	with the state law remain in the governing instrument?	6	<u> </u>	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			,
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete			1
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
	addresses ATCH 3	10		Х
	F	om 99	0-PF	(2012)

	devoted to position	 compensation	other anowances
NONE			
Total number of other employees paid over \$50,000 .		 	

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundati	ons,
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	
b	Average of monthly cash balances	1b	5,948.
C	Fair market value of all other assets (see instructions)	1c	<u> </u>
đ	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and	1d	5,948.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	5,948.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		<u> </u>
		4	89.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	5,859.
6	Minimum investment return. Enter 5% of line 5	6	293.
Pa	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	part)	
1	Minimum investment return from Part X, line 6	1	293.
2a	Tax on investment income for 2012 from Part VI, line 5		
ь		1	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	293.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	293.
6	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	293.
Pa	rt XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	**
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	100,528.
b	Program-related investments - total from Part IX-B	1b	···· ,
2	Program-related investments - total from Part IX-B 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.		
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	100,528.
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	100,528.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	lculating whe	

Form 990-PF (2012) Page 9 Part XIII Undistributed Income (see instructions) (b) (a) (c) (d) Corpus Years prior to 2011 2012 2011 Distributable amount for 2012 from Part XI, 293. Undistributed income, if any, as of the end of 2012 a Enter amount for 2011 only Total for pnor years 20 10 20 09 20 08 Excess distributions carryover, if any, to 2012. From 2007 From 2008 c From 2009 d From 2010 e From 2011 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ 100,528. a Applied to 2011, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election d Applied to 2012 distributable amount 293. 100,235. e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 100,235. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c 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 d Subtract line 6c from line 6b Taxable 4a from line 2a Taxable amount - see f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 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 2007 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2013. 100,235. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2008 . . . b Excess from 2009 . . . c Excess from 2010 . . . d Excess from 2011 . . . 100,235.

Form 990-PF (2012)

e Excess from 2012 . . .

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ► 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, complete items 2a, b, c, and d.

The name, address, and telephone number or e-mail of the person to whom applications should be addressed.

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

JSA 2E1490 1 000

factors:

Page 11

Form 990-PF (2012) Part XV Supplementary Inform	ation (continued)			Page 11
Part XV Supplementary Inform 3. Grants and Contributions Pair	d During the Year or Appr	oved for E	itura Paymont	·
Recipient	If recipient is an individual	Foundation	nui e rayment	
3 Grants and Contributions Pai Recipient Name and address (home or busin	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	Of Substantial Contributor	, , , , , , , , , , , , , , , , , , ,		
_				
ATCH 5				
]		
Total			▶ 3a	98,000.
b Approved for future payment			Ja	30,000.
				!
ATCH 6				
		•		
		1	İ	
Total				42.000
Total	<u> </u>		▶ 3b	43,250.

Page **12**

Part XVI	Analysis of income-produ					
Enter gross	amounts unless otherwise indicated	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						
_						
c						
f				7.	_	
o Fees	and contracts from government agencies					
	ship dues and assessments			 		
	on savings and temporary cash investments			1	-	
	ds and interest from securities			-		
	tal income or (loss) from real estate					
		<u> </u>				<u> </u>
	-financed property					
	debt-financed property	 				
	il income or (loss) from personal property			 		
	vestment income			 		
	loss) from sales of assets other than inventory	<u> </u>		 		
	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory			<u> </u>		
11 Other re	venue a					
ь						
c						-
						<u> </u>
e			-			
12 Subtotal	Add columns (b), (d), and (e)					
	dd line 12, columns (b), (d), and (e)			**	13	
	heet in line 13 instructions to verify calc					
Part XVI-			complishment of Ex	empt Purp		····
			- -			***
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purposes) (See instructions)
					, <u>-</u>	
		-				
			·			

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			· · · · · · · · · · · · · · · · · · ·			
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	<u> </u>					-
					 -	
						
			····			
	·		· · · · · · · · · · · · · · · · · · ·			

Part 2	XVII.	Exempt Organ		ansters to and t	ransactio	ons and	d Relation	ships With Non	chari	table	•
1 D	ıd the			engage in any of the	e following	with an	v other orga	nization described	T	Yes	No
			-	section 501(c)(3) or	_		-			1.5	
OI	rganız	ations?			-	•		.			
a To	ransfe	rs from the reportin	g foundation to	o a noncharitable exe	mpt organi	zation of					
(1	l) Casi	h							1a(1)		Х
									1a(2)		Х
ЬΟ	ther tr	ansactions									
(1	I) Sale	es of assets to a no	ncharitable exe	empt organization					1b(1)		Х
(2	2) Pure	chases of assets fro	om a noncharit	able exempt organizat	ion				1b(2)		Х
(3	3) Ren	tal of facilities, equi	pment, or other	rassets					1b(3)		Х
(4	l) Reir	nbursement arrang	ements						1b(4)		Х
(5	i) Loa	ns or loan guarantee	es						1b(5)		Х
				hip or fundraising soli					1b(6)		X
				sts, other assets, or p					1c_	<u>_</u>	<u> </u>
				es," complete the fo nces given by the re							
				gement, show in col							
(a) Line		(b) Amount involved		noncharitable exempt organ				ers, transactions, and shai			
(a) Line	-	N/A	(c) realise or	nononariable exempt organ	inzation	N/A	arption of trainsi	ers, transactions, and situ	ing ana	ingenter	
		21,722				,				_	
							_	•			

_											
								- -			
				filiated with, or relat					_		1
				other than section 50°	1(c)(3)) or II	n section	5277	l	Ye	es X] No
D IT	"Yes,	complete the follow (a) Name of organization		(h) Time of an				a) December of relations			
		(a) Name of organization		(b) Type of on	yanızadon			c) Description of relations	nib		
								.			
			^		<u>.</u>						
			/ \	_				**			
•	Under	penalties of penual I decia	e that have exam	aned this return, including actaxpayer) is based on all informations	companying sch	edules and	statements and t	o the best of my knowledg	e and b	elief, it	is true,
Sign	correct.	and complete Degraration	preparer to ther than	taxpayer) is based on all inform	fation of which pr	eparer has a	ny knowledge				
Here		.(flust)	////ai6t/	1 1/14/2	2014))Ire	ctor/TRE	asurce May the IRS	discus:		return below
	Sign	ature of officer or trustee	D -	Date /	7	Title		(see instruction	s)? X	7 6	No
	<u> </u>										
Paid	\Box	Print/Type preparer's	name	Preparer's signatui	re /		Date	Check if	NIT		
. a.a Prepa		Mary A. Ho.	n	1/Y ary a	Harn		1/8/14	self-employed	2001	3727	7
_	- 1	Firm's name ► BK		· · U				Firm's EIN ▶ 44-0	6026	60	
Use C	וחיק			COOMFIELD ROAD							_
		BL	OOMINGTON,	IN		474	103	Phone no 812-33	36-85	550	

Schedule B

(Form 990, 990-EZ, ог 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization		Employer identification number	
SARKES AND MARY TARZI	AN FOUNDATION INC.		
Organization type (check one)		45-5354049	
Organization type (check one)			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation	
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private founda	ition	
	501(c)(3) taxable private foundation		
	vered by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See	
General Rule			
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 e contributor. Complete Parts I and II.	or more (in money or	
Special Rules			
under sections 509(a)	3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support of (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 200 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form II.	e year, a contribution of	
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.			
during the year, contrinot total to more than year for an exclusively applies to this organiz	7), (8), or (10) organization filing Form 990 or 990-EZ that received from abutions for use exclusively for religious, charitable, etc., purposes, but the \$1,000. If this box is checked, enter here the total contributions that were religious, charitable, etc., purpose. Do not complete any of the parts unlessation because it received nonexclusively religious, charitable, etc., contributions.	ese contributions did e received during the ss the General Rule butions of \$5,000 or	
990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file S answer "No" on Part IV, line 2 of its Form 990; or check the box on line F , to certify that it does not meet the filing requirements of Schedule B (For	of its Form 990-EZ or on	
		B (Form 990, 990-EZ, or 990-PF) (2012)	

Name of organization SARKES AND MARY TARZIAN FOUNDATION INC.

Employer identification number 45-5354049

Part I	Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1_	SARKES TARZIAN, INC. 205 N. COLLEGE AVENUE, SUITE 800 BLOOMINGTON, IN 47404	\$ 106,773.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				

Name of organization SARKES AND MARY TARZIAN FOUNDATION INC.

Employer identification number

45-5354049

Part II	Noncash Property (see instructions). Use duplicate copies of F	additional space is field	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - ,		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization SARKES AND MARY TARZIAN FOUNDATION INC.

Employer identification number

			<u>45-535404</u> 9
Part III E	<i>xclusivel</i> y religious, charitable, etc., hat total more than \$1,000 for the ye	individual contributions to section 5 ar. Complete columns (a) through (e	501(c)(7), (8), or (10) organizations a) and the following line entry.
C	or organizations completing Part III, er ontributions of \$1,000 or less for the lse duplicate copies of Part III if additio	year. (Enter this information once. Se	charitable, etc., ee instructions.) ►\$
(a) No.	(h) Purpose of gift	(c) Use of gift	(d) Description of how wife in hold

		orial opass is tresas		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd 7ID ± 4	Polatio	nship of transferor to transferee
	Transletce's name, address, at	IU ZIF T 4	Kelatio	nship of transferor to transferee
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	T1	- 1 710 · 4		
	Transferee's name, address, ar	10 ZIP + 4	Kelatio	nship of transferor to transferee
			-	
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
	Transfer D Hame, Balances, an		Relation	or danseror to danseree
				
		·		
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	<u> </u>	(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
ļ				

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	2,060.	2,060.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	2,060.	2,060.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT 1

SARKES AND MARY TARZIAN FOUNDATION INC.

ATTACHMENT 2

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION BANK FEES OTHER FEES

EXPENSES
PER BOOKS
461. REVENUE AND

468.

468.

TOTALS

CHARITABLE
PURPOSES
461.

103-1136115-1136115

V 12-7.10

ATTACHMENT 2

SARKES AND MARY TARZIAN FOUNDATION INC.

- NEW SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10 FORM 990PE, DIRECT PUBLIC SUPPORT

DATE

NAME AND ADDRESS

106,773.

SUITE 800 SARKES TARZIAN, INC. 205 N. COLLEGE AVENUE, BLOOMINGTON, IN 47404

08/31/2013

TOTAL CONTRIBUTION AMOUNTS

106,773.

ATTACHMENT 3

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

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	
TOM TARZIAN 205 NORTH COLLEGE AVE 8TH FLR STE 800 BLOOMINGTON, IN 47404	PRESIDENT 1.00	0	0	0	
ROBERT DAVIS 205 NORTH COLLEGE AVE 8TH FLR STE 800 BLOOMINGTON, IN 47404	SECRETARY-TREASURER 1.00	0	0	0	
CATHERINE STEELE 205 NORTH COLLEGE AVE 8TH FLR STE 800 BLOOMINGTON, IN 47404	DIRECTOR 1.00	0	0	0	
	GRAND TOTALS	0	0	0	

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
TEAM ELITE INDIANA BLOOMINGTON, IN	NONE 501 (C) (3)	GENERAL	2,000.
CRISIS PREGNANCY CENTER BLOOMINGTON 808 N. COLLEGE AVENUE BLOOMINGTON, IN 47404	NONE 501 (C) (3)	GENERAL	11,000.
MOTHER HUBBARDS CUPBOARD 1100 W. ALLEN STREET BLOOMINGTON, IN 47403	NONE 501 (C) (3)	GENERAL	25,000.
FRANCISCANS OF THE IMMACULATE 8210 WEST STATE ROAD 48 BLOOMINGTON, IN 47404	NONE 501 (C) (3)	GENERAL	2,000.
AVOCA BAPTIST CHURCH 21 CENTER STREET AVOCA, IN 47420	NONE 501(C)(3)	GENERAL	1,000.
ST. CHARLES BORROMEO CHURCH 2222 E. THIRD STREET BLOOMINGTON, IN 47401	NONE 501(C)(3)	GENERAL	1,000.

ATTACHMENT 5 (CONT'D)

SARKES AND MARY TARZIAN FOUNDATION INC.

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YEAR	
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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
AMERICAN SPECTATOR FOUNDATION 1611 NORTH KENT STREET SUITE 901 ARLINGTON, IN 22209	NONE 501 (C) (3)	GENERAL	22,500.
INDIANA RIGHT TO LIFE 9465 COUNSELORS ROW SUITE 200 INDIANAPOLIS, IN 46240	NONE 501(C) (3)	GENERAL	24,000.
CHOICES PREGNANCY CENTER CHATTANOOGA 6232 VANCE ROAD CHATTANOOGA, TN 37421	NONE 501(C)(3)	GENERAL	6, 500.
DANVILLE FIRE DEPARTMENT 77 NORTH KENTUCKY STREET DANVILLE, IN 46122	NONE 501 (C) (3)	GENERAL	500.
RICHARD SLOAN DONATION FUND 114 HAMMON AVENUE PALM BEACH, FL 33480-4710	NONE 501(C)(3)	GENERAL	2,500.

TOTAL CONTRIBUTIONS PAID

98,000.

SARKES AND MARY TARZIAN FOUNDATION INC.

FORM 990PE, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOSPICE OF CINCINNATI 4360 COOPER ROAD CINCINNATI, OH 45242	NONE 501(C)(3)	GENERAL	250.
IU HEALTH HOSPICE OF BLOOMINGTON 619 WEST FIRST STREET BLOOMINGTON, IN 47403	NONE 501(C)(3)	GENERAL	1,000.
BLOOMINGTON HOSPITAL FOUNDATION 405 NORTH ROGERS STREET BLOOMINGTON, IN 47404	NONE 501(C)(3)	GENERAL	2,500.
BOY SCOUTS OF AMERICA 1580 WEST BLOOMFIELD ROAD BLOOMINGTON, IN 47403-2075	NONE 501(C)(3)	GENERAL	1,000.
BOXS/GIRLS CLUB OF BLOOMINGTON 311 SOUTH LINCOLN STREET BLOOMINGTON, IN 47401	NONE 501(C)(3)	GENERAL	500.
CRISIS PREGNANCY CENTER 808 NORTH COLLEGE AVENUE BLOOMINGTON, IN 47404	NONE 501(C)(3)	GENERAL	5, 000.

ATTACHMENT 6 (CONT'D)

SARKES AND MARY TARZIAN FOUNDATION INC.

	l
PAYMENT	
FUTURE	
OVED FOR	
NS APPR	
TRIBUTION	
CV - CO	
PART	
M 990PF	
FOR	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SALVATION ARMY	NONE	GENERAL	1,000.
111 NORTH ROGERS STREET BLOOMINGTON, IN 47404	501 (C) (3)		
SYCAMORE LAND TRUST	NONE	GENERAL	1,000.
4898 EAST HERITAGE WOODS ROAD	501(C)(3)		
BLOOMINGTON, IN 47401			
INDIANA RIGHT TO LIFE	NONE	GENERAL	10,000.
9465 COUNSELORS ROW	501(C)(3)		
SUITE 200			
INDIANAPOLIS, IN 46240			
VOLUNTEERS IN MEDICINE	NONE	GENERAL	10,000.
811 WEST 2ND STREET	501 (C) (3)		
BLOOMINGTON, IN 47403			
NAZARETH HOUSE	NONE	GENERAL	500.
185 CAPTAINS COVE DRIVE	501 (C) (3)		
TAYLORSVILLE, KY 40071			
CONNER PRAIRIE	NONE	GENERAL	200
13400 ALLISONVILLE ROAD	501(C)(3)		
FISHERS, IN 46038			

45-5354049

FORM 990PE, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AN

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

10,000.

AMOUNT

ATTACHMENT 6 (CONT'D)

MOTHER HUBBARDS CUPBOARD 1100 WEST ALLEN STREET

BLOOMINGTON, IN 47403

RECIPIENT NAME AND ADDRESS

NONE

501 (C) (3)

GENERAL

TOTAL CONTRIBUTIONS APPROVED

43,250

ATTACHMENT 6