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Return of Private Foundation

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

▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No	1545-0052
20	13

		evenue Service Information about Form	990-PF and its separate	e instructions is at ww	/w.irs.gov/form990pf	Open to Public Inspection
_		endar year 2013 or tax year beginning		, 2013, and er		, 20
	Name	of foundation			1 '	ntification number
	KAM:	<u>INSKI SYLVESTER & TESSIE FDN</u>	480051010			3-7355916
	Numb	er and street (or P O box number if mail is not delivered	d to street address)	Room/s	suite B Telephone nu	mber (see instructions)
_	<u>P.O</u>	. BOX 1602			····	574-235-2793
	City or	town, state or province, country, and ZIP or foreign po-	stal code		C #	.1
					C If exemption appending, check	here • • • • • • • • • • • • • • • • • •
		TH BEND, IN 46634				. \Box
G	Che	ck all that apply: Initial return		of a former public ch	- I rorongin organ	nizations, check here
		Final return Address change	Amended re			nizations meeting the eck here and attach
_	Cho	ck type of organization: X Section 501(Name chang		computation	
Ϊ	_	ection 4947(a)(1) nonexempt charitable trust		ivate foundation		ation status was terminated
Ť			unting method: X C			07(b)(1)(A), check here • •
•			ther (specify)		•	n is in a 60-month termination 07(b)(1)(B), check here .
			column (d) must be o			,
P		Analysis of Revenue and Expenses (The	(a) Revenue and	4		(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net investment income	(c) Adjusted net income	for charitable purposes
_		column (a) (see instructions).)	books	Moone	Miconie	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule) .	50			
	2	Check Check If the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	16,328	16,328	3. 16,32	8. STMT 1
	5 a	Gross rents				
	ь	Net rental income or (loss)				
e	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	27,959			
Revenue	"	assets on line 6a		07.05		
æ	7	Capital gain net income (from Part IV, line 2).		27,959	' : 	
	8	Net short-term capital gain				
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·				
	_	and allowances · · · ·				
		Gross profit or (loss) (attach schedule)				
	11					
	12	Other income (attach contect) Total. Add lines 1 through 1	44,337	44,287	7. 16,32	8.
_	13	Compensation of officers directors trustees de	8,137			
	14	Other employee stand wages	,			
ses	15	Pension glers, employee benefits				
ě	16a					
Š	b	Legal fees (attack, sobjected)	1,500	. 1,500). NO	NONE NONE
Ş	С	Other professional fees (attach schedule)				
rati	17	Interest				
iist	18	Taxes (attach schedule) (see instructions) STMT. 3.	156			
ᆵ	19	Depreciation (attach schedule) and depletion.			 .	
A	20	Occupancy				
Pu	21	Travel, conferences, and meetings				
т О	22	Printing and publications	0.050		-	
Operating and Administrative Expenses	23	Other expenses (attach schedule) STMT. 4.	8,050	 		
era	24	Total operating and administrative expenses.	17 042	E 22/	NO	NIE MAND
Ö		Add lines 13 through 23	17,843 36,531	5,320	, NC	NE NONE
	25	Contributions, gifts, grants paid	54,374	5,320) NTC	36,531. ONE 36,531.
_	26 27	Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12	54,3/4	3,320	, <u>, , , , , , , , , , , , , , , , , , </u>	<u>nva 30,331</u> .
			-10,037			
	ı	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	10,037	38,96	7.	
	i	Adjusted net income (if negative, enter -0-).		1 30,50	16,32	28.
					_ ,	

JSA For Paperwork Reduction Act Notice, see instructions.
3E1410 1000 DHD320 A491 05/12/2014 13:03:10

Form **990-PF** (2013)

23-7355916

	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	Enc	d of year
Ľ	art II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	•	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
	•	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less: allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As		Investments - U S and state government obligations (attach schedule).			
		investments - corporate stock (attach schedule). STMT .5.		345,59	5. 474,035
		Investments - corporate bonds (attach schedule) STMT 6		386,45	
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)		300,13.	3017003
	12	Investments - mortgage loans			
	13 14	Investments - other (attach schedule) STMT 7. Land, buildings, and equipment basis		6,62	7. 6,627
		(attach schedule)	-		
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
_		instructions Also, see page 1, item I)	748,472.	738,67	7. 862,271
	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)		NO!	<u>N₿</u>
ces	24	Foundations that follow SFAS 117, check here . ▶ and complete lines 24 through 26 and lines 30 and 31.			
ğ	25	Unrestricted	1		
Ba	26	Permanently restricted · · · · · · · · · · · · · · · · · · ·			
or Fund Balances	20	Foundations that do not follow SFAS 117, > X			
3		check here and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	748,472.	738,67	7
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	710,172.	730701	
SS	29	Retained earnings, accumulated income, endowment, or other funds			-
it A	30	Total net assets or fund balances (see instructions)	748,472.	738,67	7
Net	31	Total liabilities and net assets/fund balances (see	740,472.	130,01	
	"	instructions)	748,472.	738,67	7
В	art II	Analysis of Changes in Net Assets or Fund		130,01	7 •
		al net assets or fund balances at beginning of year - Part		must agree with	
•		of-year figure reported on prior year's return)			748,472.
2					
2		er amount from Part I, line 27a	 TRMRNT 8	3	
-	Doo	I lines 1, 2, and 3	 TRMRNT 9	5	
		al net assets or fund balances at end of year (line 4 minus)			
	100	or not assets of fund balances at end of year fine 4 minus	ino or - raitin, column (t	,,	, 130,011.

2-story brick warehouse; or common stock, 200 shs. MLC Co.) 1a PUBLICLY TRADED SECURITIES b c d e (e) Gross sales price (f) Depreciation allowed (or allowable) (or a	7 , 959 .
TRADED SECURITIES b c d e (e) Gross sales price (f) Depreciation allowed (or allowable) (or allowable) c c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V as of 12/31/69 (ii) F.M.V as of 12/31/69 (iii) F.M.V as of 12/31/69 (iii) F.M.V as of 12/31/69 (iv) Gains (Col (h) gain or col (h) over col (j), if any (iv) F.M.V as of 12/31/69 (iv) Gains (Col (h) gain or col (h) over col (j), if any (iv) Gains (Col (h) gain or col (h) over col (j), if any (iv) Gains (Col (h) gain or col (h) over col (j), if any (iv) Gains (Col (h) gain or col (h) over col (j), if any 2 b c d d e 2 Capital gain net income or (net capital loss) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 Part I, line 8, column (c) (see instructions) 12(loss), enter -0- in Part I, line 7 3 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	7,959. ninus -0-) or)) 7,959.
to d	7,959. ninus -0-) or)) 7,959.
c d d d d d d d d d	7,959. ninus -0-) or)) 7,959.
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Gains (Col (h) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iii) Gains (Col (h)) gain method (h), if any (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), if any (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) gain method (h), but not less than Losses (from col (h)) as of 12/31/69 (iii) Gains (Col (h)) as of 12/3	7,959. ninus -0-) or)) 7,959.
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (e) plus (f) minus (g) a 102,957. 74,998. 2 b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (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 col (k), but not less than Losses (from col (h) e col (k), but not less than Losses (from c	7,959. ninus -0-) or)) 7,959.
(e) gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) a 102,957. 74,998. 2 b c d c d d d d d d d d d d d d d d d d	7,959. ninus -0-) or)) 7,959.
a 102,957. 74,998. 2 b c d d d d d d d d d d d d d d d d d d	7,959. ninus -0-) or)) 7,959.
b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V as of 12/31/69 (j) Adjusted basis as of 12/31/69 (j) Adjusted basis over col (j), if any 2 b c d e Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 2 2 Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 2 2 Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 2 2 Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 2 2 2 Capital gain net income or (net capital loss) (l) Gains (Col (h) gain model (k), but not less than Losses (from col (h)) 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ninus -0-) or)) 7 , 959 .
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V as of 12/31/69 (j) Adjusted basis as of 12/31/69 (j) Adjusted basis over col (j), if any 2 b c d e Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 7 Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	-0-) or)) 7 , 959 .
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col (l) col (k), but not less than Losses (from col (h)) a b c d e Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 7 Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	-0-) or)) 7 , 959 .
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V as of 12/31/69 (ii) F.M.V as of 12/31/69 (ij) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any 2 b c d e Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 7, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	-0-) or)) 7 , 959 .
(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 2 b Capital gain net income or (net capital loss) (li) Adjusted basis as of 12/31/69 (li) Excess of col (i) over col (ji), if any (li) Excess of col (ii) col (ki), but not less than cover col (ji), if any (li) Excess of col (ii) col (ki), but not less than col (ki) excess of col (ii) col (ki), but not less than col (ki) excess of col (ii) col (ki), but not less than col (iii) col (ki).	-0-) or)) 7 , 959 .
(i) F.M.V as of 12/31/69 as of 12/31/69 over col (j), if any Losses (from col (h) c d e Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 7 Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income)) 7,959
b c d e Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	
b c d e Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	7,959
d e Capital gain net income or (net capital loss) Recapital gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in loss, enter -0-	7,959
Capital gain net income or (net capital loss) Capital gain net income or (net capital loss)	7,959
Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 2 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 3 3 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	7,959
Recapital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	7,959
Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	<i>1,959</i>
If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	
Part I, line 8	
Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	
"Yes," the foundation does not qualify under section 4940(e). Do not complete this part.	es X N
1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) (d)	
Base period years (D) (C) Distribution ratio	/-\\
Calendar year (or tax year beginning iii)	053530
	06453
	07500
	07912
2008 81,501. 940,625. 0.	08664
2. Tables line 4. selven (d)	25005
Protal of line 1, column (d)	35885
number of years the foundation has been in existence in less than 5 years	07177
	07177
	07177 .8,379
Enter the net value of noncharitable-use assets for 2013 from Part X, line 5	.8,379
Enter the net value of noncharitable-use assets for 2013 from Part X, line 5 4 81 Multiply line 4 by line 3 5	8,379
Enter the net value of noncharitable-use assets for 2013 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) 6	8,379 8,735 390
Enter the net value of noncharitable-use assets for 2013 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) 6	8,379
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 5	.8,379 .8,735 .390 .9,125
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate Part VI instructions.	.8,379 .8,735 .390 .9,125

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X

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X

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Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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3 Five hi	ghest-paid independent contractors for professional services (see instruc	tions). If none, enter "NONE	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			NONE
NONE			NONE
Total numbe	er of others receiving over \$50,000 for professional services	▶	NONE
Part IX-A	Summary of Direct Charitable Activities		
List the foun organizations	dation's four largest direct charitable activities during the tax year. Include relevant statistical and other beneficiaries served, conferences convened, research papers produced, etc	nformation such as the number of	Expenses
1NONE_			
		. 	
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instructions)		
	two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2	Amount
1NONE			
2			
All other pro	gram-related investments. See instructions		
зио́йЕ_			
Total Add	ines 1 through 3		

Part	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc	5.,	
	purposes:		
а	Average monthly fair market value of securities	. 1a	830,842.
b		. 1b	NONE
C	Fair market value of all other assets (see instructions)	. 1c	NONE
d		. 1d	830,842.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets	. 2	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	830,842.
4			
_	instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	. 4	12,463.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	. 5	818,379.
6	Minimum investment return. Enter 5% of line 5	. 6	40,919.
Part	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ▶ □ and do not complete this part.)	undations	
1	Minimum investment return from Part X, line 6	. 1	40,919.
2a	Tax on investment income for 2013 from Part VI, line 5	9.	
b	Income tax for 2013. (This does not include the tax from Part VI.) 2b		
C	• • • • • • • • • • • • • • • • • • • •		779.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	40,140.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4		40,140.
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	40,140.
Part	t XII Qualifying Distributions (see instructions)		
		1 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		. 1a	<u>36,531.</u>
Ь		. 1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	*	
	purposes	. 2	NONE NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а		. 3a	NONE
b		. 3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		36,531.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incom-	1 1	,
	Enter 1% of Part I, line 27b (see instructions)	. 5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		36,531.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years.	calculating	whether the foundation

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Form 990-PF (2013) Page 9 Part XIII Undistributed Income (see instructions) (d) (b) (c) (a) Years prior to 2012 2012 2013 Corpus Distributable amount for 2013 from Part XI. 40,140. Undistributed income, if any, as of the end of 2013 NONE Enter amount for 2012 only NONE Total for prior years: 20 11 ,20 ,20_ ь Excess distributions carryover, if any, to 2013: a From 2008 <u>35,280.</u> 21,980. From 2009 From 2010 20,273. 13,112. From 2011 3,387. From 2012 94,032 Total of lines 3a through e Qualifying distributions for 2013 from Part XII, line 4: ▶ \$ 36,531. NONE a Applied to 2012, but not more than line 2a . . . Applied to undistributed income of prior years NONE (Election required - see instructions) Treated as distributions out of corpus (Election NONE 36,531 Applied to 2013 distributable amount NONE Remaining amount distributed out of corpus . . 3,609 3,609. Excess distributions carryover applied to 2013 (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: 90,423 Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract NONE line 4b from line 2b Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) NONE tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions NONE Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount - see NONE f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) NONE Excess distributions carryover from 2008 not 31,671 applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2014. 58,752 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: 21,980 Excess from 2009 . . . 20,273. b Excess from 2010 . . . 13,112. Excess from 2011 . . . 3,387 Excess from 2012 . . .

Form 990-PF (2013)

Excess from 2013 . . .

Pai	t XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, question	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private opera	iting	
	foundation, and the ruling	is effective for 2013, en	ter the date of the ruling		▶∟	
b	Check box to indicate who	ether the foundation is a	private operating founda	tion described in section	49420	(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010	<u> </u>
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
C	Qualifying distributions from Part					
	XII, line 4 for each year listed					+
u	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test - enter	:				
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more				İ	
	exempt organizations as provided in section 4942		:			
	(j)(3)(B)(m)		<u> </u>			
	(3) Largest amount of sup- port from an exempt					
	organization					
Da	(4) Gross investment income . rt XV Supplemer	ntary Information (Complete this par	t only if the found	lation had \$5,000	or more in assets
па		e during the year - s		comy in the round	.aa 40,000	0. 111010 111 433013
1	Information Regarding	Foundation Manage	rs:	······		
а	List any managers of	the foundation who	have contributed mor	e than 2% of the total	al contributions rece	ived by the foundation
	before the close of any	y tax year (but only if t	hey have contributed r	more than \$5,000). (S	ee section 507(d)(2).)
	N/A		<u></u>			
b	List any managers of			•	•	lly large portion of the
	ownership of a partner	ramp or other entity) 0	i willon the foundation	inas a 1076 of greater	mtorest.	
	N/A					
2	N/A Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ▶ if 1	the foundation only	makes contributions	to preselected char	itable organizations	and does not accept
	unsolicited requests for other conditions, compared to the conditions of the conditi	or funds. If the found	lation makes gifts, gr	ants, etc. (see instruc	tions) to individuals	or organizations under
a	The name, address, ar	nd telephone number of	or e-mail address of the	e person to whom app	lications should be a	ddressed:
	N/A					
b	N/A The form in which app	olications should be su	bmitted and informati	on and materials they	should include:	
	37/3					
	N/A Any submission dead	inee:				
C	- Wilk ampitiissioti deadi					
	N/A Any restrictions or I					
C	I Any restrictions or I factors:	imitations on awards	, such as by geogra	aphical areas, charita	ible fields, kinds of	institutions, or other
_	N/A					
10.6						

Part XV Supplementary Information 3 Grants and Contributions Paid Duri	(continued)	oved for E	uture Payment	
Recipient	If recipient is an individual,	Foundation		
Name and address (home or business)	if recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	Toopicit		
a raid during the year		Ì		
SEE STATEMENT 28				36,531.
OBE STATEMENT 20				
				ì
				1
			ĺ	
			i	
	<u> </u>			
Total			▶ 3a	36,531.
b Approved for future payment				
		İ		
Total			▶ 3b	<u> </u>

Part XVI-	A Analysis of Income-Produ					
J	amounts unless otherwise ındicated.	(a)	(b)	(c)	(d)	(e) Related or exempt function income
1 Program	service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions)
						·
				-		
_				<u> </u>		
-						
e f						<u> </u>
	and contracts from government agencies				-	
_	ship dues and assessments					
	n savings and temporary cash investments					
4 Dividend	Is and interest from securities			14	16,328.	
5 Net renta	al income or (loss) from real estate:			_		
	financed property					
	debt-financed property					
	l income or (loss) from personal property .					
	vestment income			18	27,959.	
· ·	oss) from sales of assets other than inventory		<u></u>	10	21,333.	
	me or (loss) from special events	i				
	ofit or (loss) from sales of inventory venue: a			-		
	venue. a					
				1		
е						
	. Add columns (b), (d), and (e)				44,287.	
13 Total. A	dd line 12, columns (b), (d), and (e)				13	44,287.
	eet in line 13 instructions to verify calc					
Part XVI-	B Relationship of Activities	to the Ac	complishment of E	xempt Purp	oses	
Line No.	Explain below how each activi-	ty for whic	h income is reported	ın column (e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundati	on's exemp	ot purposes (other than	n by providing	g funds for such purpose	s). (See instructions.)
				_		
				· · · · ·		
						
<u></u>			NOT APPLICAB	LE		
			_			
					··	
			= • •			· · · · · · · · · · · · · · · · · · ·
						
						
						
	1					
						
	1					

Part XVII	Information Regarding	Transfers	To and Transactions	and Relationships Wi	th Noncharitable
	Exempt Organizations				

1	in secti			ngage in any of the followin action 501(c)(3) organization					Yes	No
а	_		g foundation to a	noncharitable exempt organ	zation of:					
	(1) Cas	sh	· · · · · · · · · · ·		. 			1a(1)		X_
								1a(2)		X
b	Other t	transactions:								
	(1) Sal	les of assets to a non-	charitable exemp	t organization				1b(1)		<u>X</u>
	(2) Pur	rchases of assets fror	m a noncharitable	exempt organization	. .			1b(2)		<u>X</u>
	(3) Rer	ntal of facilities, equip	oment, or other as	ssets				1b(3)		X
	(4) Rei	imbursement arrange	ements					1b(4)		X
								1b(5)		X
				or fundraising solicitations				1b(6)		X
			_	other assets, or paid emplo				1c		X
d				complete the following s			•			
		•		s given by the reporting for						
	-			ment, show in column (d) t						
(a) L	ine no	(b) Amount involved	(c) Name of non	charitable exempt organization	(d) Descri	iption of transfe	rs, transactions, and shar	ıng arra	ngeme	nts
					1.				_	
		=			 					
										
					<u> </u>					
								· · · · · ·		
	+									
								<u> </u>		
	-						· · ·			
							·			
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		<u> </u>					
						-		-		
			<u> </u>				·			
2-	la tha	foundation directly	or indirectly offili	iated with, or related to, or	o or more	tay ayamat	organizations			
Za				er than section 501(c)(3)) or				\neg	es 🗔	X No
h		," complete the follow	•	er man section 50 (c/(5// 0)	111 36661011	3271		' '	cs	<u>140</u>
	11 165	(a) Name of organizatio		(b) Type of organization	1		c) Description of relation	ship	_	
		,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>				
									-	
										
		•••								
	Unde	r penalties of perjury, I decla	are that I have examine	d this return, including accompanying	schedules and s	statements, and t	o the best of my knowled	ge and l	belief, it	is true,
Sig	- 1	ct, and complete Declaration o		payer) is based on all information of which	preparer has an	ny knowledge				
_		Krom Add	ums, Art	15/14/14	► H	4 4	May the IR	S discu: reparer		return below
Her	e Tsig	nature of officer or trustee	7. 1	Date	Title		(see instructio		Yes	No
<u> </u>		Print/Type preparer's na	ime	Preparer's signature		Date	Check If	PTIN		
Paid							self-employed			
Pre	parer	Firm's name					Firm's EIN			
Use	Only	Firm's address	•							
		<u> </u>					Phone no			
							Fc	rm 99	0-PF	(2013)

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

ADJUSTED NET INCOME	135. 1,338. 1,388. 273. 6,473. 6,473. 2,003. 1,825. 536. 1,399.	16,328.
NET INVESTMENT INCOME	135. 1,338. 1,388. 273. 6,473. 6,473. 2,003. 1,825. 1,825. 1,399.	16,328.
REVENUE AND EXPENSES PER BOOKS	1,338. 1,388. 1,388. 273. 6,473. 2,003. 2,003. 1,825. 536. 1,399.	16,328.
DESCRIPTION	FIDELITY CONTRA FUND #022 ISHARES INDEX 500 ISHARES MSCI EAFE ETF ISHARES CORE S&P SMALL-CAP ETF MAINSTAY MARKETFIELD FUND-I METROPOLITAN WEST TOTAL RETURN BD-I FEDERATED TREASURY OBLIGA-SS NEW WORLD FUND-F2 ROBECO BP A/CAP VALUE-IS T. ROWE PRICE MID-CAP GROWTH FUND TEMPLETON GLOBAL BOND FUND-AD VANGUARD SHORT-TERM CORP FD #39 PORTFOLI VANGUARD S/T INVEST GR-ADM VIRTUS EMERGING MKTS OPPOR-I	TOTAL

STATEMENT

•,`

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	NONE
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	1,500. 1,500.
REVENUE AND EXPENSES PER BOOKS	1,500.
	TOTALS
DESCRIPTION	TAX PREPARATION FEES

FORM 990PF, PART I - TAXES

REVENUE
AND
EXPENSES
PER BOOKS

DESCRIPTION

=========

FOREIGN TAXES

156.

TOTALS

156.

STATEMENT 3

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND EXPENSES

DESCRIPTION

EXPENSES PER BOOKS

OTHER EXPENSES

8,050.

TOTALS

8,050.

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KAMINSKI SYLVESTER & TESSIE FDN 480051010

CORPORATE STOC	
1	
ART II	
PA	11
FORM 990PF,	

ENDING ENDING BOOK VALUE FMV	19,980. 23,925. 42,361. 73,952. 12,764. 27,273. 77,932. 106,238. 39,615. 50,138. 30,376. 35,681. 79,430. 107,142. 27,980. 35,593. 15,157. 14,093.
	TOTALS
DESCRIPTION	MAINSTAY MARKETFIELD FUND ISHARES S&P 500 INDEX FUND ISHARES TR SMALL CAP 600 INDEX FIDELITY CONTRA #022 ISHARES MSCI EAFE INDEX FD NEW WORLD FUND ROBECO BP A/CAP VALUE T ROWE PRICE MID CAP GROWTH VIRTUS EMERGING MKTS OPPOR

STATEMENT

ENDING BOOK VALUE	212,732. 45,166. 42,107. 86,450.
DESCRIPTION	METROPOLITAN WEST TR BOND TEMPLETON GLOBAL BOND VANGUARD SHORT TERM CORP #39 WASATCH INCOME FUND

211,758. 43,512. 41,873. 84,466.

ENDING FMV ---

381,609.

386,455.

STATEMENT

23-7355916		
KAMINSKI SYLVESTER & TESSIE FDN 480051010	FORM 990PF, PART II - OTHER INVESTMENTS	

ENDING	FMV	1 1	6,627.	# # !! !! !! !!
ENDING	BOOK VALUE		6,627.	6,627.
COST/ FMV	C OR F	1 1 1 1	ت	TOTALS
	DESCRIPTION	; ; ; ; ; ;	FEDERATED TREAS OBLIG MMF	

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR F	UND BALANCES
======================================	=========
DESCRIPTION	AMOUNT
01/02/2013 METEROPOLITAN WEST INCOME TIMING DIFFERENCE	567.
01/02/2013 VANGUARD SHORT TERM CORP TIMING DIFFERENCE	67.
ROUNDING DIFFERENCE	1.
TOTAL.	
TOTAL	635.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND	BALANCES
DESCRIPTION	AMOUNT
1/2/2014 METROPOLITAN WEST INCOME TIMING 01/02/2014 VANGUARD SHORT TERM INCOME TIMING	320. 73.
TOTAL	393.

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

OFFICER NAME:

1ST SOURCE BANK

ADDRESS:

P O BOX 1602

SOUTH BEND, IN 46634

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 8,137.

OFFICER NAME:

IRENE BENTKOWSKI

ADDRESS:

5131 COPPERFILED DRIVE E SOUTH BEND, IN 46614-6857

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

ELAINE DULCET

ADDRESS:

59845 SYCAMORE ROAD

NORTH LIBERTY, IN 46554-9787

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

CAROL EVANS

ADDRESS:

P O BOX 848

MISHAWAKA, IN 46546-0848

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

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

OFFICER NAME:

MARK KLOTA

ADDRESS:

19447 KERN ROAD

SOUTH BEND, IN 46614-5724

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

NORMAN MATUSZAK

ADDRESS:

2701 OAK LEAF CIRCLE

SOUTH BEND, IN 46628-3443

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

MARY PLUTA

ADDRESS:

57299 PEGGY DR

SOUTH BEND, IN 46619

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

TOTAL COMPENSATION:

8,137.

==========

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______________________________ RECIPIENT NAME: AMERICAN RELIEF - FREE POLAND C/O DOLORES LIWOSZ ADDRESS: 2941 JAMESTOWN COURT N MISHAWAKA, IN 46545 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID 325. RECIPIENT NAME: CHOPIN FINE ARTS CLUB ADDRESS: 57310 PEACHSTONE DRIVE SOUTH BEND, IN 46619 **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID 500. RECIPIENT NAME: CORPUS CHRISTI PARISH ADDRESS:

2822 CORPUS CHRISTI DRIVE

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______

RECIPIENT NAME:

FOOD BANK OF NORTHERN INDIANA

ADDRESS:

702 CHAPIN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

FOREVER LEARNING INSTITUTE

ADDRESS:

54191 IRONWOOD ROAD

SOUTH BEND, IN 46635

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

500.

RECIPIENT NAME:

HOLY FAMILY CHURCH

ADDRESS:

56405 MAYFLOWER ROAD

SOUTH BEND, IN 46619

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 500.

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: LOGAN CENTER ADDRESS: 2505 EAST JEFFERSON BOULEVARD SOUTH BEND, IN 46615 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: NONE 500. RECIPIENT NAME: M.R. FALCONS NEST 4 ADDRESS: 3212 KELLER SOUTH BEND, IN 46628 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: NONE 750. RECIPIENT NAME: REINS OF LIFE ADDRESS: 55200 QUINCE ROAD

RELATIONSHIP: NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

SOUTH BEND, IN 46619

FOUNDATION STATUS OF RECIPIENT:

NONE

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: SOUTH BEND SYMPHONY ORCHESTRA ADDRESS: 127 N. MICHIGAN STREET SOUTH BEND, IN 46601 **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: 1,956. AMOUNT OF GRANT PAID RECIPIENT NAME: SOUTH BEND CIVIC THEATRE ADDRESS: 403 NORTH MAIN STREET SOUTH BEND, IN 46601 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: 500. AMOUNT OF GRANT PAID RECIPIENT NAME: ST. AUGUSTINE'S SOUP KITCHEN ADDRESS: 1501 WEST WASHINGTON

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

500. AMOUNT OF GRANT PAID

23-7355916 KAMINSKI SYLVESTER & TESSIE FDN 480051010 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: ST. JOSEPH CARE CENTER ADDRESS: 326 CHAPIN STREET SOUTH BEND, IN 46601 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: NONE 500. AMOUNT OF GRANT PAID RECIPIENT NAME: ST. MARY'S PARISH ADDRESS: 159 NORTH SUMMIT DRIVE SOUTH BEND, IN 46619 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT: NONE RECIPIENT NAME: ST. PIUS X CHURCH ADDRESS: 52553 FIR ROAD

AMOUNT OF GRANT PAID

STATEMENT

GRANGER, IN 46530

CHARITABLE CONTRIBUTION FOUNDATION STATUS OF RECIPIENT:

RELATIONSHIP:

PURPOSE OF GRANT:

NONE

NONE

16

500.

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ST. STANISLAUS KOSTKA CHURCH

ADDRESS:

55756 TULIP ROAD

NEW CARLISLE, IN 46552

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

ST. VINCENT DE PAUL

ADDRESS:

520 CRESCENT AVENUE

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

WOMAN'S CARE CENTER

ADDRESS:

P.O. BOX 1230

MISHAWAKA, IN 46546

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

WVPE

ADDRESS:

2424 CALIFORNIA ROAD

ELKHART, IN 46514

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

Z.B. FALCONS NEST 80

ADDRESS:

YOUTH FUND

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

COLIN CRAWFORD

ADDRESS:

2201 RIVERSIDE DR

SOUTH BEND, IN 46616

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

KAMIŅSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
MICHAEL KOLKOT
ADDRESS:
15347 ROSCOMMON LANE
GRANGER, IN 46530
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
NONE

RECIPIENT NAME:
ANITA WEBER
ADDRESS:
27432 US HIGHWAY 20
SOUTH BEND, IN 46628
RELATIONSHIP:
NONE
PURPOSE OF GRANT:

CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE

RECIPIENT NAME:
ALEAXANDRIA HARMACINSKI
ADDRESS:
51638 MEDFIELD TR
SOUTH BEND, IN 46628
RELATIONSHIP:

NONE
PURPOSE OF GRANT:
CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE AMOUNT OF GRANT PAID ..

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NATALIE MEERT ADDRESS: 15787 JACKSON ROAD MISHAWAKA, IN 46544 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: CHRISTOPHER MEERT ADDRESS: 15787 JACKSON ROAD MISHAWAKA, IN 46544 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE

RECIPIENT NAME:

ANNA UJDAK

ADDRESS:

1702 BERGAN ST

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

AMOUNT OF GRANT PAID

1,500.

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
BENJAMIN PRZYBYLSKI
ADDRESS:

2314 PINE CREEK CT SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

BERNDAN MAKOWSKI

ADDRESS:

4732 SCENIC DRIVE

SOUTH BEND, IN 46619

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

SYDNEY SWARTZ

ADDRESS:

58088 HARITAGE POINTE DR

SOUTH BEND, IN 46619

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: JORDAN KONSTANTY ADDRESS: 909 N. WILBUR ST SOUTH BEND, IN 46628 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 500. RECIPIENT NAME: ALEXIS FELTY ADDRESS: 21417 MAYS DR. SOUTH BEND, IN 46628 RELATIONSHIP: NONE CHARITABLE NONE 500.

PURPOSE OF GRANT: FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID RECIPIENT NAME:

ADDRESS: 1702 BERGAN STREET SOUTH BEND, IN 46628 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID

MAXWELL UDJAK

500.

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ------

RECIPIENT NAME: MARIA G. HITE ADDRESS: 1507 MISHAWAKA MISHAWAKA, IN 46544 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

1,500.

RECIPIENT NAME: MIKO STULAJTER ADDRESS: 1809 SOUTH MICHIGAN SOUTH BEND, IN 46613 RELATIONSHIP:

NONE PURPOSE OF GRANT: CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME: KATELIN HANSEN ADDRESS: 15199 CLEVELAND ROAD GRANGER, IN 46530 **RELATIONSHIP:** NONE PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 1,500. KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

JENNIFER BRADLEY

ADDRESS:

51536 STEEPLE CHASE COURT

GRANGER, IN 46530

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

DANA LIND

ADDRESS:

17720 STOCKBRIDGE LANE

GRANGER, IN 46530

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

CRISTIAN GARCOLAZO

ADDRESS:

219 WOODHILL LN

SOUTH BEND, IN 46619

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

23-7355916 KAMINSKI SYLVESTER & TESSIE FDN 480051010 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______

RECIPIENT NAME: SARAH HANSEN

ADDRESS:

15199 CLEVELAND ROAD GRANGER, IN 46530

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

500. AMOUNT OF GRANT PAID

RECIPIENT NAME:

JOSEPH SHINDLEDECKER

ADDRESS:

27600 INWOOD RD

NORTH LIBERTY, IN 46554

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

500. AMOUNT OF GRANT PAID

RECIPIENT NAME:

JEFFERY SHINDLENDECKER

ADDRESS:

27600 INWOOD ROAD

NORTH LIBERTY, IN 46554

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE 500. AMOUNT OF GRANT PAID

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME: ELIZABETH ARNDT

ADDRESS:

53065 FERNWOOD DRIVE SOUTH BEND, IN 46637

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

SAMANTHA UNDERLY

ADDRESS:

2725 KEPESS CT

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

RECIPIENT NAME:

HANNAH GUZICKI

ADDRESS:

1426 COLLEGE ST.

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME: ANNA KOWALSKI ADDRESS: 1759 PRAIRIE AVE SOUTH BEND, IN 46613 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE 500. AMOUNT OF GRANT PAID RECIPIENT NAME: EMERSON AUTH-JASINSKI ADDRESS: 518 S. ST. JOSEPH ST SOUTH BEND, IN 46601 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: WNIT ADDRESS: MICHIANA PUBLIC BROADCASTING CORP SOUTH BEND, IN 46601 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

500.

KAMINSKI SYLVESTER & TESSIE FDN 480051010 23-7355916 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CENTER FOR THE HOMELESS ADDRESS: 813 SOUTH MICHIGAN STREET SOUTH BEND, IN 46601 **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE 500. AMOUNT OF GRANT PAID RECIPIENT NAME: TAYLOR KOWALSKI ADDRESS: 1937 BERKLEY PL SOUTH BEND, IN 46616 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

QUEEN OF PEACE CHURCH

ADDRESS:

4508 VISTULA ROAD MISHAWAKA, IN 46544

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

TOTAL GRANTS PAID:

36,531.

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

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

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041

OMB No 1545-0092

2013

Name of estate or trust			Employeridentific	ation r	number
KAMINSKI SYLVESTER & TESSIE FDN 48005	1010		23-735	591 <i>6</i>	<u> </u>
Note: Form 5227 filers need to complete only Parts I and II.					
Part I Short-Term Capital Gains and Losses - Asse	ts Held Une Year	or Less			
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fr Form(s) 8949, Pa line 2, column	om art I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on Form(s) 8949 with Box C checked					
4 Short-term capital gain or (loss) from Forms 4684, 625	2, 6781, and 8824			4	
 Net short-term gain or (loss) from partnerships, S corpo Short-term capital loss carryover. Enter the amount Carryover Worksheet	it, if any, from lin	e 9 of the 2012	Capital Loss	5 6	()
7 Net short-term capital gain or (loss). Combine line line 17, column (3) on the back				7	
	ts neid widle Tha	ii One Teal	(-)		(h) Cain (h)
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss fi	rom	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Form(s) 8949, Pa line 2, column		column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	89,051.	74,998.			14,053
11 Long-term capital gain or (loss) from Forms 2439, 468	4, 6252, 6781, and	8824		11	
12 Net long-term gain or (loss) from partnerships, S corpo	rations, and other e	states or trusts		12	
13 Capital gain distributions				13	13,906
14 Gain from Form 4797, Part I				14	
Carryover Worksheet		column (h). Enter	here and on	15	()
line 18a, column (3) on the back				16	27,959

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2013

Sched	ule D (Form 1041) 2013				Page 2
Part			(1) Beneficiaries'	(2) Estate's	(2) Tatal
	Caution: Read the instructions before completing this pa	art.	(see instr.)	or trust's	(3) Total
17	Net short-term gain or (loss)	17			
18	Net long-term gain or (loss):				
а	Total for year	18a			27,959.
	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b			
C	28% rate gain	18c			
19	Total net gain or (loss). Combine lines 17 and 18a ▶	19			27,959.
Note	: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 , go to Part V, and do not complete Part IV. If line 19, column (3), is a n	(or Fo	rm 990-T, Part I, line	4a). If lines 18a and	19, column (2), are ne
neces		CL 105	s, complete rait iv an	u the Capital Loss Co	anyoven violksheet, a
Par					
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, li	ne 4c, if a trust), the sr		
. a	The loss on line 19, column (3) or b \$3,000			20 (1
Note Loss	: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, Carryover Worksheet in the instructions to figure your capital loss carryover.	page	1, line 22 (or Form 99	10-1, line 34), is a los	s, complete the Capit a
Par		s			
	1041 filers. Complete this part only if both lines 18a and 19 in col		2) are gains, or an a	mount is entered in	Part I or Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more				
Caut	ion: Skip this part and complete the Schedule D Tax Worksheet in the i	nstruc	ctions if:		
	ther line 18b, col. (2) or line 18c, col. (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
	990-T trusts. Complete this part only if both lines 18a and 19 a				
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part ther line 18b, col. (2) or line 18c, col. (2) is more than zero.	and c	ompiete the Schedu	HE D TAX WORKSHEE	i in the instruction
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	(4)	. 21		
22	Enter the smaller of line 18a or 19 in column (2)				
	but not less than zero				
23	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 23				
24	Add lines 22 and 23		 		
25	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g; otherwise, enter -0 25	····	-		
26	Subtract line 25 from line 24. If zero or less, enter -0-		· 		
27	Subtract line 26 from line 21. If zero or less, enter -0		·		
28	Enter the smaller of the amount on line 21 or \$2,450		·		
29	Enter the smaller of the amount on line 27 or line 28		· —	▶ 30	
30	Subtract line 29 from line 28. If zero or less, enter -0 This amount is		1 . 1		**
31	Enter the smaller of line 21 or line 26		•		
32	Subtract line 30 from line 26				
33	Enter the smaller of line 21 or \$11,950				
34	Add lines 27 and 30				
35					
36	Enter the smaller of line 32 or line 35		•	▶ 37	
37 38	Enter the amount from line 31		1 1		<u></u>
39	Add lines 30 and 36		*		
40	Subtract line 39 from line 38. If zero or less, enter -0-				
41	Multiply line 40 by 20%		•	▶ 41	
42	Figure the tax on the amount on line 27. Use the 2013 Tax Rate Schedule for		1 1		
72	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		1		
42	Add lines 37, 41, and 42		· —		
43	Figure the tax on the amount on line 21. Use the 2013 Tax Rate Schedule for		•		
44	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		1 1		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44			Schedule	
70	G, line 1a (or Form 990-T, line 36)	11616	una on Fulli 1041,	► 45	

Schedule D (Form 1041) 2013

Name(s) shown on return. (Name and SSN or taxpayer identification no not required if shown on other side)

Social security number or taxpayer identification number

Page 2

KAMINSKI SYLVESTER & TESSIE FDN 480051010

23-7355916

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- X (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired	(c) Date sold or disposed	ed Date sold or	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and	If you enter an ar enter a code	Adjustment, if any, to gain or loss. f you enter an amount in column (g), enter a code in column (f). See the separate instructions.	
(Example 100 sn X12 Co)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(f) (g) Code(s) from Amount of	combine the result with column (g)	
364.476 FIDELITY CONTRA FU	07/22/2011	03/19/2013	30,000.00	26,687.00			3,313.00	
115.407 FIDELITY CONTRA FU	07/22/2011	06/04/2013	10,000.00	8,450.00			1,550.00	
346.536 WASATCH-1ST SOURCE	05/31/2012	06/25/2013	3,500.00	3,567.00			-67.00	
173.712 FIDELITY CONTRA FU	07/22/2011	07/02/2013	15,000.00	12,719.00			2,281.00	
151.296 FIDELITY CONTRA FU	07/22/2011	<u> </u>	13,842.00	11,078.00			2,764.00	
62.276 FIDELITY CONTRA FUN	07/22/2011	12/11/2013	6,189.00	4,499.00			1,690.00	
324.806 ROBECO BP A/CAP VA	06/03/2011		6,769.00	5,116.00			1,653.00	
50.688 T. ROWE PRICE MID-C	09/15/2011		3,751.00	2,882.00			869.00	
1,01,2	03/13/2011	10/11/10/10	37732.00	2,002.00			003.00	
2 Totals. Add the amounts in c (subtract negative amounts). include on your Schedule D, checked), line 9 (if Box E abo (if Box F above is checked)	Enter each total line 8b (if Box Dove is checked),	here and above is	89,051.	74,998.			14,053.	

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2013)

DHD320 A491

E