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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

OMB No 1545-0047

2013

Open to Public

IIILEIIIAI	revenue.	Service	► Information about Form 9	90 and its instructions is at <u>www.</u>	.IRS.gov/form	<u>1990</u>			Inspection
A Fo	r the 2	2013 cale	endar year, or tax year beginni	ng 01-01-2013 , 2013, and endir	ng 12-31-2013	3			
B Che	ck if ap	pplicable	C Name of organization WESTERN INDIANA COMMUNITY F	OLINDATION INC			D Emplo	yer ider	ntification number
┌ Add	ress cha	ange		OUNDATION INC			35-18	14927	7
┌ Nar	ne char	nge	Doing Business As						
┌ Inıt	al retur	m	Number and street (or P.O. hox if	mail is not delivered to street address) F	?oom/suite		E Tabada		L
┌ _{Ten}	mınated	d	135 S STRINGTOWN ROAD PO BOX		toom, saice		E Telepho	ne num	ber
· — Am	ended r	return	City or town, state or province, co	untry, and ZIP or foreign postal code			(765)	793-0	702
		pending	COVINGTON, IN 47932	,,			• •		2 240 702
, App	ileation	pending	E Name and address of a	unainal officer	1			-	3,210,703
			F Name and address of pr KEVIN MARTIN	пстрат оптсег	H(a		s a group dinates?	return	for
			135 S STRINGTOWN ROA	D PO BOX 175					,,
			COVINGTON, IN 47932		H(b		ll subordi	nates	┌ Yes ┌ No
T Tax	r-exem	pt status	▼ 501(c)(3)	(insert no)	7	includ If "No		a list	(see instructions)
	- 4-:4-	· • \		(, , , , , , , , , , , , , , , , , ,		_			
	ebsite	: F- VV VV	/W WICF-INC ORG		H(c) Grou	p exempt	ion nur	nber ►
			Corporation Trust Associat	ion Cother 🕨	LY	ear of for	mation 19	90 M	State of legal domicile IN
Pa	rt I	Sum	mary						
		•	-	ion or most significant activities					
aı .	-	HELPIN	IG PEOPLE IMPROVE OUR C	SMMUNITY					
Ě	_								
Ē	-								
9.Ye	2 (Check th	nis box দ if the organization o	discontinued its operations or disp	osed of more	e than 2	5% of its	net as	sets
Activities & Governance	3 N	Number	of voting members of the gover	ning body (Part VI, line 1a) .			_	з	26
ፈን ያያ				s of the governing body (Part VI, I				4	26
Ě				n calendar year 2013 (Part V, line				5	3
Į.				necessary)				6	29
Q.	7 a ⊺	Γotal unr	related business revenue from	Part VIII, column (C), line 12 .				7a	C
	ЬΝ	Net unre	lated business taxable income	from Form 990-T, line 34				7b	C
						Prio	r Year		Current Year
_	8	Contril	butions and grants (Part VIII,	line 1 h)			447,6	36	1,149,083
	9	Progra	m service revenue (Part VIII,	line 2g)		5,681			0
Revenue	10			column (A), lines 3, 4, and 7d)			448,3	338	580,518
т.	Other revenue (Part VIII, column (A), li				· —			0	0
	12			1 (must equal Part VIII, column (901,6	555	1,729,601
	13			t IX, column (A), lines 1-3) .			275,1	51	302,002
	14			IX, column (A), line 4)			·	0	0
	15	Salarıe	es, other compensation, emplo	yee benefits (Part IX, column (A),	lines				
Expenses		5-10)					108,2		113,734
<u>₹</u>	16a		sional fundraising fees (Part I)		· ·			0	0
五	Ь		ndraising expenses (Part IX, column (\ <u>\</u>	,
	17			, lines 11a-11d, 11f-24e)			101,3	-	106,284
	18 19			ust equal Part IX, column (A), line			484,7		522,020
- e7	13	Keven	ue iess expelises. Subtract line	e 18 from line 12		eginning	416,8 of Curre		1,207,581
Not Assets or Fund Balances					"		ear		End of Year
9889 8889	20	Totala	assets (Part X, line 16)				10,457,3	381	13,442,321
정말	21	Total I	iabilities (Part X, line 26) .				46,8	313	61,325
	22			t line 21 from line 20			10,410,	568	13,380,996
	t II	_	ature Block						
my kr	owled	lge and b		xamined this return, including acc implete Declaration of preparer (o					
		****	**			20	14-10-09		
Sign		Signa	ture of officer			Da			
Here			N MARTIN BOARD PRESIDENT						
		Type							
		<u> </u>	or print name and title						
Paid			or print name and title rint/Type preparer's name HIL MUEHL	Preparer's signature	Date		ck l if	PTIN P00622	2760

Firm's address ► 2 E MAIN ST SUITE 120

May the IRS discuss this return with the preparer shown above? (see instructions)

Preparer

Use Only

Phone no (217) 442-1643

✓ Yes ☐ No

orm	1990 (2013)				Page 2
Par		nent of Program Servic f Schedule O contains a respo	ce Accomplishments nse or note to any line in this Pa	art III	
UN	PING PEOPLE DS WITHIN THE	FOUNDATIONS INTO WHI	CH THEY CAN CONTRIBUTE A	BUSINESSES, AND NONPROFIT G VARIETY OF ASSETS TO BE USE T ORGANIZATIONS AND STUDE!	D FOR CHARITABLE
2			nt program services during the y	rear which were not listed on	┌ Yes ┌ No
	If "Yes," descr	ribe these new services on Sc	nedule O		
3	services? .		ake significant changes in how it	conducts, any program	┌ Yes ┌ No
4	Describe the o	tion 501(c)(3) and 501(c)(4)	accomplishments for each of its	s three largest program services, as port the amount of grants and alloca	
4a	(Code COMMUNITY PRO) (Expenses \$ OGRAMS AND SCHOLARSHIPS FOR SI	304,813 including grants of \$	302,002) (Revenue \$ ORT FROM THE ENTIRE COMMUNITY	0)
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program	n services (Describe in Scheo inclu	lule O) dıng grants of \$) (Revenue \$)
4e	Total progran	n service expenses ►	304,813		

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part 1</i>	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

FCI	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0		163	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	•		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
Ī	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		Νo
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Νo
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νo
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	1.		
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

56	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	- · · · · · · · · · · · · · · · · · · ·			
-	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	Yes	
a	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official			
a	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a 15b	Yes Yes	
a b	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official			
a b 16a	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official			No
a b 16a	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15b		No
a b 16a b	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15b		No
a b 16a b	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15b		No
a b 16a b	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15b		No

Own website Another's website Upon request Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ►DALE WHITE 135 STRINGTOWN ROAD
 COVINGTON,IN 47932 (765) 793-0702

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot rect	not box h ar or/ti	chec k, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) BETH MASON	1 00	×						0	0	0	
DIRECTOR		<u> </u>									
(2) DICK MINNETTE DIRECTOR	1 00	х						0	0	0	
(3) KEVIN MARTIN	1 00										
PRESIDENT		X		Х				0	0	0	
(4) DALE WHITE	40 00										
EXECUTIVE DIRECTOR		X						64,152	0	2,344	
(5) JOHN SHAMBACH	1 00										
DIRECTOR		X						0	0	0	
(6) RAQUEL STULTZ	1 00	X		х				0	0	0	
TREASURER - COVINGTON											
(7) BOB WRIGHT DIRECTOR	1 00	х						0	0	0	
(8) SUSAN REYNOLDS	1 00										
DIRECTOR		X						0	0	0	
(9) TOM MCGURK JR	1 00								0		
DIRECTOR		X						0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	han o	one both	box, an d	heck unless officer stee)	į	(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W	-	(F) Estima amount of compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	0	rganizati relate organiza	ed
1b c	Sub-Total		oction /		•			*						
d	Total (add lines 1b and 1c) .	•		` .	٠.	٠.		·		64,152		0		2,344
2	Total number of individuals (ii \$100,000 of reportable comp	ncluding but not	lımıted				d abov	e) w	ho receive	d more th	ian	-		
3	Did the organization list any f	iormer officer du	ector o	r truc	taa	kav	emplo		or highes	t compen	sated employee		Yes	No
•	on line 1a? If "Yes," complete							•		• •	· · · ·	3		No
4	For any individual listed on lin organization and related organ individual											4		No
5	Did any person listed on line : services rendered to the orga									anızatıon	or individual for	5		No No
<u>S</u> €	ction B. Independent Co Complete this table for your fi compensation from the organi	ıve hıghest comp											tax year	
		(A) Name and business									(B) cription of services		(C Comper)
												#		
												\downarrow		
2	Fotal number of independent co	ontractors (inclu	dına but	not	lımıt	ed to	those	e list	ed above)	who rece	ived more than	-		

\$100,000 of compensation from the organization $\blacktriangleright 0$

Part V	/++1	Statement o	of Revenue ule O contains a respo	nce or note to any liv	o in this Dort VIII			
		Check if Schedi	ule O Contains a respo	inse of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 22	1a	Federated cam	paigns 1a					
ang ang	ь	Membership du	ıes 1b					
بة ور ا	С	Fundraising eve	ents 1 0	:				
ffs, ⊏A	d	Related organiz	zations 1d					
<u>⊒</u>		Government grants						
Contributions, Giffs, Grants and Other Similar Amounts	e							
를 들	f	similar amounts no	ons, gifts, grants, and 1f ot included above	1,149,083				
ributi Other	g	Noncash contribute	ons included in lines		į			İ
Cont	h		s 1 a - 1 f		1,149,083			
				Business Code				
Program Serwce Revenue	2a			Busiliess Code				
9. Se	ь							
ά Œ	c							
¥.	d							
ૐ ⊆	e	-						
la l	f	All other progra	am service revenue					
Š	g	Total Add lines	s 2a-2f					
	3		come (including dividen					
		and other simil	aramounts)	🟲	245,183			245,183
	4		stment of tax-exempt bond	·				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(I) Keal	(II) F el Solidi				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental inco	me or (loss)					
		Weet remaining	(i) Securities	(II) Other				
	7a	Gross amount from sales of assets other	1,816,437					
	ь	than inventory Less cost or other basis and sales expenses	1,481,102					
	С	Gain or (loss)	335,335					
	d	Net gain or (los	ss)		335,335			335,335
Other Revenue	8a		luding s reported on line 1c)					
er Re		See Part IV, lin	a					
돌	l		penses b (loss) from fundraising					
•		Gross income f	from gaming activities ne 19					
	_	المحمد	a h					
	l		penses b (loss) from gaming acti					
		Gross sales of						
		returns and allo						
	<u> </u>		a					
	b c		oods sold b (loss) from sales of inv	entory •				
	Ť	Miscellaneous		Business Code				
	11a							
	ь		_					
	С		_					
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	🕨				
	12	Total revenue.	See Instructions .			_	_	

	,	
Part IX	Statement of Functional Expenses	
Section 50	1(c)(3) and $501(c)(4)$ organizations must complete all columns	All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX		<u></u>	г
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	214,890	214,890		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	87,112	87,112		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	66,496		66,496	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	26,719		26,719	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits	12,257		12,257	
10	Payroll taxes	8,262		8,262	
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,905		1,905	
c	Accounting	9,250		9,250	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	46,620		46,620	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	11,929		11,929	
14	Information technology				
15	Royalties				
16	Occupancy	4,475		4,475	
17	Travel	1,373		1,373	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,477		3,477	
23	Insurance	2,591		2,591	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	MISCELLANEOUS	14,245		14,245	
b	DONOR DEVELOPMENT	5,902			5,902
c	PROGRAM EXPENSE	2,811	2,811		
d	EQUIPMENT RENTAL AND MA	1,706		1,706	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	522,020	304,813	211,305	5,902
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or note to any line in t	IIIS Pari		(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			265,359		312,245
	2	Savings and temporary cash investments			25,804		25,779
	3	Pledges and grants receivable, net			20,001	3	25,775
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, di				_	
		employees, and highest compensated employees Complete Pa	rt II of			5	
Assets	6	Loans and other receivables from other disqualified persons (as section $4958(f)(1)$), persons described in section $4958(c)(3)(60)$ 0 employers and sponsoring organizations of section $501(c)(9)$ 0 beneficiary organizations (see instructions) Complete Part II or		6			
8	7	Notes and loans receivable, net				7	
₫	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	156,186			
	ь	Less accumulated depreciation	10b	77,707	81,826	10c	78,479
	11	Investments—publicly traded securities	-		7,523,174	11	9,549,463
	12	Investments—other securities See Part IV, line 11			1,856,261	12	2,869,581
	13	Investments—program-related See Part IV, line 11		13	<u> </u>		
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11			704,957	15	606,774
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			10,457,381	16	13,442,321
	17	Accounts payable and accrued expenses				17	2,898
	18	Grants payable			46,813	18	58,427
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Sche				21	
IIIties	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualif	rs, trus				
Liabilit		persons Complete Part II of Schedule L				22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relat and other liabilities not included on lines 17-24) Complete Par					
		D				25	
	26	Total liabilities. Add lines 17 through 25			46,813	26	61,325
ري ط		Organizations that follow SFAS 117 (ASC 958), check here	√ and c	omplete			
ည		lines 27 through 29, and lines 33 and 34.			007.045		000 700
<u>ਨ</u>	27	Unrestricted net assets	• •		297,345		389,799
ŭ	28	Temporarily restricted net assets		•	2,218,382	28	5,062,921
₹	29	Permanently restricted net assets		_ • .	7,894,841	29	7,928,276
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	,				
£	30	Capital stock or trust principal, or current funds				30	
φ	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other for				32	
₹	33	Total net assets or fund balances			10,410,568	33	13,380,996
_	34	Total liabilities and net assets/fund balances			10,457,381	34	13,442,321

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI			,	৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,7	729,601
2	Total expenses (must equal Part IX, column (A), line 25)	2		į	522,020
3	Revenue less expenses Subtract line 2 from line 1	3		1,7	207,581
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		10,4	410,568
5	Net unrealized gains (losses) on investments	5			382,833
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		- :	119,986
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		13,3	380,996
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. F
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	<u> </u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493300012154

SCHEDULE A Pu

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization
WESTERN INDIANA COMMUNITY FOUNDATION INC

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

hospital's name, city, and state
An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)

6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)

8 A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)

An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)

10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a Type I **b** Type II **c** Type III - Functionally integrated **d** Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii)

and (III) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the supported organization(s)

Yes No

11g(i)

11g(ii)

11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		the organiz	(v) Did you notify the organization in col (i) of your support?		the on in anized S ?	(vii) A mount of monetary support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 207,244 170,195 339,533 447,636 1,149,083 2,313,691 include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 207,244 170,195 339,533 447,636 1,149,083 2,313,691 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 680,762 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from 1,632,929 line 4 Section B. Total Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 207,244 170,195 339,533 447,636 1,149,083 2,313,691 Amounts from line 4 Gross income from interest, dividends, payments received on 262,915 272,154 171,325 252,151 245,183 1,203,728 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 3,517,419 through 10) **12** Gross receipts from related activities, etc (see instructions) 12 31,221 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 46 420 % Public support percentage for 2012 Schedule A, Part II, line 14 15 47 180 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┢┎ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction					
	Facts And Circumstances Test						
Retu	ırn Reference	Explanation					
		Schodulo A / Form 000 o	000 E7) 201				

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493300012154

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

	me of the organization STERN INDIANA COMMUNITY FOUNDATION INC		Employer identification number
			35-1814927
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		nds or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	
2	Aggregate contributions to (during year)	0	
3	Aggregate grants from (during year)	0	
4	Aggregate value at end of year	688,200	
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		radvised Ves No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?		
Pa	rt II Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an h Preservation of a ce	nistorically important land area ertified historic structure e form of a conservation
	easement on the last day of the tax year	_	
		_	Held at the End of the Year
а	Total number of conservation easements	_	2a
b	Total acreage restricted by conservation easements	_	2b
С	Number of conservation easements on a certified histo	` '	2c
d	Number of conservation easements included in (c) acq historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferr	ed, released, extinguished, or terminated	by the organization during
	the tax year ▶		
4	Number of states where property subject to conservat	ion easement is located ►	_
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, handl	ing of violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easeme	ents during the year
7	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easements	during the year
,	▶ \$,,	g ,
В	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of secti	on 170(h)(4)(B)(ı)
9	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial s	
Par	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, o	r Other Similar Assets.
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its revenuts held for public exhibition, education, or	r research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education, or	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		► \$

b Assets included in Form 990, Part X

Par	TITE Organizations Maintaining Co	<u>llections of Art, I</u>	<u>Histo</u>	<u>rical Tı</u>	reasur	<u>es, or Ot</u>	<u>her S</u> i	<u>imilar Ass</u>	ets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records	, chec	k any of	the follo	wing that ar	e a sigi	nıfıcant use	of its	
а	Public exhibition		d [Loan	or exch	ange progra	ms			
b	Scholarly research		е Г	Othe	r					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how th	ney furthe	er the or	rganızatıon's	s exemp	ot purpose ır	1	
5	During the year, did the organization solicit	or receive donations o	fart, h	nstorical	treasur	es or other	sımılar			
	assets to be sold to raise funds rather than t	o be maintained as pa	rt of t	he organ	ızatıon's	collection?)		Yes	☐ No
Pai	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					answered	"Yes"	to Form 99	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermedı	ary fo	r contribi	utions o	r other asse	ts not	Γ	_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing	g table						
								Am	ount	
С	Beginning balance					1	Lc			
d	Additions during the year					<u> 1</u>	ld			
е	Distributions during the year					1	le			
f	Ending balance					_ 1	Lf			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21?					Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the e	xplana	ition has	been pr	ovided in Pa	art XIII			Γ
Pa	rt V Endowment Funds. Complete									
		(a)Current year		r year		o years back			(e) Four y	ears back
1 a	Beginning of year balance	9,817,908		9,204,594		8,944,723		8,534,653		7,784,903
b	Contributions	885,231		245,204	-	114,839		136,524		109,253
С	Net investment earnings, gains, and losses	2,074,589		632,219)	282,501		665,573		997,887
d	Grants or scholarships	304,002		264,109		137,469		170,195		278,451
e	Other expenditures for facilities and programs							221,832		78,939
f	Administrative expenses									
g	End of year balance	12,473,726		9,817,908		9,204,594		8,944,723		8,534,653
2	Provide the estimated percentage of the cur	ent year end balance	(line 1	.g, colum	nn (a)) h	eld as				
а	Board designated or quasi-endowment ►	0 %								
ь	Permanent endowment ► 63 050 %									
C	Temporarily restricted endowment > 36 9 The percentages in lines 2a, 2b, and 2c shows the second se	950 % uld equal 100%								
3a	Are there endowment funds not in the posses		on tha	t are hel	d and ac	dministered	for the		_	
	organization by	_							Yes	No
	(i) unrelated organizations							3a(i		No
	(ii) related organizations							. 3a(ii		No
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the	· ·						3b		<u> </u>
	rt VI Land, Buildings, and Equipme				n answ	ered 'Yes'	to For	m 990 Par	rt TV lı	ne
	11a. See Form 990, Part X, line		o orge	arnzacio	11 4115	crea res	10 1 01	iii 550, i ai	(14, 11	
	Description of property			(a) Cost of basis (inve		(b)Cost or o basis (othe		c) Accumulated depreciation	(d) B	ook value
	Land		$\neg \dagger$			33,	885		+	33,885
	Buildings		F				441	41,20	06	43,235
	Leasehold improvements		.			<u> </u>		· ·		· ·
	Equipment		.			37,	860	36,50	01	1,359
е	Other		ľ					· · ·		
	II. Add lines 1a through 1e <i>(Column (d) must e</i>		columr	(B), line	10(c).)			►		78,479
	•	· · ·						Schedule D	(Form 9	90) 2013

	Saa Form UUN Dart V ling 17		
	See Form 990, Part X, line 12. a) Description of security or category	(b)Book value	(c) Method of valuation
/1 \Financial	(including name of security) derivatives		Cost or end-of-year market value
	neld equity interests		
(3)Other			
(A) MONEY DEPOSITS	MARKET FUNDS/CERTIFICATES OF	2,869,581	F
	n (b) must equal Form 990, Part X, col (B) line 12)	2,869,581	 answered 'Yes' to Form 990, Part IV, line 11c.
rait viii	See Form 990, Part X, line 13.		
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
			Cost of end of year market value
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)	▶	
	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
		on answered 'Yes' to Form 990,	, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	
	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	
	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	
	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	
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	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	
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	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	
	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	
	Other Assets. Complete if the organization	on answered 'Yes' to Form 990,	
Part IX	Other Assets. Complete if the organization (a) Description (a) Description (b) Description (c)	on answered 'Yes' to Form 990,	
Part IX Total. (Column	Other Assets. Complete if the organization (a) Described (on answered 'Yes' to Form 990, cription	(b) Book value
Part IX Total. (Column	onn (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization Form 990, Part X, line 25.	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Part IX Total. (Column	Other Assets. Complete if the organization (a) Description (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization (b) must equal Form 990, Part X, tol.(B) line	on answered 'Yes' to Form 990, cription	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Part IX Total. (Colum	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value
Total. (Colum Part X 1 Federal Inco	other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Other Liabilities. Complete if the organization of liability	on answered 'Yes' to Form 990, cription 15.) Ganization answered 'Yes' to	(b) Book value

Par		Revenue per Audited Financial Sta wered 'Yes' to Form 990, Part IV, line		nts With	n Revenue p	er R	eturn Complete If
1		ner support per audited financial statements				1	3,445,828
2	Amounts included on line 1 b	out not on Form 990, Part VIII, line 12					
a	Net unrealized gains on inves	stments	2a		1,882,833		
b	Donated services and use of	facilities	2b				
c	Recoveries of prior year gran	ts	2c				
d	Other (Describe in Part XIII)	2d		-119,986		
e	Add lines 2a through 2d		·			2e	1,762,847
3	Subtract line 2e from line 1					3	1,682,981
4	Amounts included on Form 9	90, Part VIII, line 12, but not on line 1					
а	Investment expenses not inc	cluded on Form 990, Part VIII, line 7b .	4a		46,620		
b	Other (Describe in Part XIII)	4b				
c	Add lines 4a and 4b					4c	46,620
5	Total revenue Add lines 3 ar	nd 4c. (This must equal Form 990, Part I, line	12)			5	1,729,601
Part		Expenses per Audited Financial Stanswered 'Yes' to Form 990, Part IV, line			th Expenses	per	Return. Complete
1	Total expenses and losses pe	er audited financial statements				1	475,400
2	Amounts included on line 1 b	ut not on Form 990, Part IX, line 25					
а	Donated services and use of	facilities	2a				
b	Prior year adjustments .		2b				
c	Otherlosses		2c				
d	Other (Describe in Part XIII)	2d				
e	Add lines 2a through 2d .					2e	0
3	Subtract line ${f 2e}$ from line ${f 1}$					3	475,400
4	Amounts included on Form 99	90, Part IX, line 25, but not on line 1:					
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b	4a		46,620		
b	Other (Describe in Part XIII)	4b				
c	Add lines 4a and 4b					4 c	46,620
5	Total expenses Add lines 3 a	and 4c. (This must equal Form 990, Part I, lir	ne 18)			5	522,020
Part	Supplemental In	formation					
Part		or Part II, lines 3, 5, and 9, Part III, lines 1a I, lines 2d and 4b, and Part XII, lines 2d and					de any additional
	Return Reference	Explanation					
	XI, LINE 2D - OTHER STMENTS	DECREASE IN CRUT VALUE					
PART	X, QUESTION 2	PART X, QUESTION 2, IT WAS DETERM POSITIONS SO NO FOOTNOTE WAS IN					
PART	V, QUESTION 4	PART V, QUESTION 4,THE ENDOWMEN THE ORGANIZATION ADMINISTERS AND DONOR RESTRICTIONS					

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

DLN: 93493300012154 OMB No 1545-0047

Inspection

Employer identification number

VESTERN INDIANA COMMU						35-	1814927
Part I General Infor Does the organization m the selection criteria use Describe in Part IV the o	aıntaın records to s ed to award the graı	nts or assistance? .	nt of the grants or as:				
						te if the organization additional space is n	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) VARIOUS LOCAL AGENCIES IN WESTERN INDIANA 135 S STRINGTOWN ROAD COVINGTON,IN 47932		501(C)(3)	214,890				BUILDING IMPROVEMENTS/TECHNOLOGY UPGRADES/FOOD PANTRY/TRAIL DEVELOPMENT
2 Enter total number of sec	ction 501(c)(3) and	ı digovernment organıza	tions listed in the line	e 1 table			<u> </u>

Enter total number of other organizations listed in the line 1 table

(a)Type of grant or assistance

(f)Description of non-cash assistance

1	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV,	line 22
	Part III can be duplicated if additional space is needed.		

(d)A mount of

non-cash assistance

(e)Method of valuation (book,

FMV, appraisal, other)

(c)A mount of

cash grant

(b) Number of

recipients

(1) SCHOLARSHIPS/BOOK REIMBURSEMENT		115	87,112			
Part IV Supplemental In	formati	on. Provide the infor	mation required in Pa	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanation					
,	GRANT PAYMENTS ARE NOT ISSUED TO GRANTEES UNLESS A PAID INVOICE IS PROVIDED PAYMENTS ARE ISSUED TO THE RESPECTIVE VENDOR WHO WILL BE PROVIDING THE SERVICE/PRODUCT SCHOLARSHIPS FOR TUITION ARE WRITTEN TO THE STUDENT AND THEIR SELECTED SCHOOL					

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2013

OMB No 1545-0047

Open to Public
Inspection

Name of the organization	Employer identification number
WESTERN INDIANA COMMUNITY FOUNDATION INC	
	35-1814927

990 Schedule O, Supplemental Information

Return Reference	Explanation		
FORM 990, PART VI, SECTION B, LINE 11			
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS DISCUSSED AT THE FIRST BOARD MEETING OF EACH CALENDAR Y EAR WHEN FORMS ARE DISTRIBUTED FOR BOARD MEMBER SIGNATURES DISCUSSIONS ALSO TAKE PLACE FR OM TIME TO TIME AT REGULAR BOARD MEETINGS		
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS APPROVES PAY ANNUALLY AND BASE THEIR RECOMMENDATIONS ON THE EMPLOYE ES PERFORMANCE, COMPARABLE DATA, AND INFLATION INCREASES THE BOARD OF DIRECTORS APPROVE THE INCREASE PRIOR TO THE CHANGE BECOMING EFFECTIVE		
FORM 990, PART VI, SECTION C, LINE 19	THE FOUNDATION'S 990 IS ON THE INTERNET AT GUIDESTAR ORG AND THE NATIONAL CENTER FOR CHARI TABLE STATISTICS THE FOUNDATION'S ANNUAL REPORT MAKES REFERENCE THAT THE AUDIT IS AVAILAB LE FOR REVIEW DURING THE OFFICE HOURS OF THE ORGANIZATION		
FORM 990, PART XI, LINE 9	DECREASE IN CRUT VALUE -119,986		
FORM 990, PART XII, LINE 2C	THE COMMITTEE HAS NOT CHANGED THEIR APPROVAL PROCESS FROM THE PRIOR YEAR		