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### Form 990-PF

### **Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

Fo	r calen	dar year 2013 or tax year beginning			, and	ending		
Na	me of fou	indation				A Employe	r Identification numbe	r
RC	BERT	W HEMELGARN MEMORIAL FOUNDATION						
Nu	mber and	street (or PO box number if mail is not delivered to street address)		Room	n/suite		93-1216871	l
472	25 SOL	JTH HOLLADAY BLVD, #210				B Telephone	number (see instruction	ns)
City	or town		ZIP co	ode				
SA	LT LAK	KE CITY UT	8411	7				
For	eign cou	ntry name Foreign province/state/county	Foreign postal code C If exemption application is pending, check his					ng, check here 🕨 🗌
G	Check	call that apply 🔲 Initial return 🔲 Initial return o	of a former pu	iblic c	charity	D 1. Foreig	n organizations, check	here ►
		Final return Amended ret				2. Foreig	n organizations meeting	g the 85% test,
		Address change Name change					here and attach compu	
Н	Check	type of organization 💢 Section 501(c)(3) exempt pri	vate foundation	on			foundation status was t 07(b)(1)(A), check here	erminated under
	Sectio	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxa	able private fo	unda	ition	Section 50	or (b)(1)(A), check here	
1	Fair m	arket value of all assets at J Accounting method	X Cash		Accrual	E If the four	ndation is in a 60-month	termination
	end of	f year (from Part II, col (c),					tion 507(b)(1)(B), chec	
	line 16	6) ▶ \$ 19,118 (Part I, column (d) must be	e on cash basi	s)				
P	art l	Analysis of Revenue and Expenses (The total of	(a) Revenue	and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily	expenses p			t investment ncome	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions).)	books		<u> </u>			(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)		3,700				
	2	Check ▶☐ if the foundation is <b>not</b> required to attach Sch B						A . T. T
	3	Interest on savings and temporary cash investments				· · · · · · · · · · · · · · · · · · ·		
	4	Dividends and interest from securities	<u> </u>	<del>{</del>	•			
	5a	Gross rents , .		ľ	NEU	CIVEL		
	b	Net rental income or (loss) // ½	1				70	
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	27	<u> </u>	AAY 2	7 2014	18	
	b	Gross sales price for all assets on line 6a		1_		- MW17	این	
	7	Capital gain net income (from Part IV, line 2)		$\overline{}$	(2)		1 <u>%</u>	
Re	8	Net short-term capital gain .		<u> </u>	MUI	<u>"N, U</u>		
	9	Income modifications						, , , , , ,
	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold .						
	, C	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)			<del></del>		_	
	12	Total. Add lines 1 through 11		3,700		0		
Ś	13	Compensation of officers, directors, trustees, etc						<u> </u>
enses	14	Other employee salaries and wages						
	15	Pension plans, employee benefits				<del></del>		
X	16a	Legal fees (attach schedule)	<del></del>	007	-	707		200
<b>%</b>	b	Accounting fees (attach schedule)		997	<del>                                     </del>	797		200
Operally and Administrative so	17 C	Other professional fees (attach schedule)		390	-	312		78
	17	Interest Taxes (attach schedule) (see instructions)	L	J90	<del>                                     </del>	312		1
<b>€</b>	18 19	Depreciation (attach schedule) and depletion .			<del>                                     </del>	_	<del> </del>	1
≢ٍ≥	20	Occupancy	·		1			
<b>F</b>	21	Travel, conferences, and meetings	_		<del>                                     </del>	· · ·		
<b>₹</b>	22	Printing and publications	-		<del>                                     </del>			<del> </del>
SE SE	23	Other expenses (attach schedule)	-	708	t	566		142
Ď	24	Total operating and administrative expenses.	,		t			1
<b>*</b>		Add lines 13 through 23	2	2,095		1,675		420
කි	25	Contributions, gifts, grants paid		3,800		.,	<u>-</u>	3,800
ğ	26	Total expenses and disbursements. Add lines 24 and 25		5,895		1,675	(	
<u> </u>	27	Subtract line 26 from line 12	<del></del>	,, <del>,,,,,,,</del>	<del>                                     </del>	1,070		1,220
	a a	Excess of revenue over expenses and disbursements		2,805	1			
	b	Net investment income (if negative, enter -0-)	<i>-</i>	_,	<del>                                     </del>	0	<u> </u>	<u> </u>
	C	Adjusted net income (if negative, enter -0-)	· -					
			<u> </u>				<b>`</b>	

For Paperwork Reduction Act Notice, see instructions.

Part II		Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End of	f year		
Г 6 —	للتت	Daiance Sheets	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash—non-interest	-bearing	16,313	19,118	19,118		
1	2	Savings and tempor	rary cash investments .					
	3	Accounts receivable						
		Less allowance for	doubtful accounts					
	4	Pledges receivable						
			doubtful accounts					
	5	Grants receivable			· · · · · ·			
	6	Receivables due fro	om officers, directors, trustees, and other		-			
		disqualified persons						
	7	•	receivable (attach schedule)					
		Less allowance for dou						
হ	8	Inventories for sale						
Assets	9	· · · · · • · · · · · · · · · · · · · ·	and deferred charges					
As	10a	•	state government obligations (attach schedule)					
`	b		prate stock (attach schedule) .					
	C	•	prate bonds (attach schedule)					
	11		dings, and equipment basis	-				
	"							
	12	Investments—mort	, , , , , , , , , , , , , , , , , , , ,		-			
	13	-	•			<del> </del>		
		Investments—other	ulamenti hanin					
	14	Land, buildings, and eq			- <del></del>			
	45	· · · · · · · · · · · · · · · · · · ·	reciation (attach schedule)					
	15	Other assets (descr						
	16	•	completed by all filers—see the	40.040	40 440	40 440		
	4=	instructions Also, se		16,313	19,118	19,118		
Se	17	• •	nd accrued expenses					
	18	Grants payable	•					
Liabilities	19	Deferred revenue	· · · · · · · · · · · · · · · · · · ·					
اق	20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule)				Ì			
ا≝			-					
	22	Other liabilities (des						
	23		d lines 17 through 22)	0	0			
s			ollow SFAS 117, check here					
<u>8</u>		•	s 24 through 26 and lines 30 and 31.					
alances	24	Unrestricted .		ļ				
Ba	25	Temporarily restricted				ì		
ם	26	Permanently restric						
Net Assets or Fund Ba			do not follow SFAS 117, check here					
<u>ب</u>		and complete lines	_			1		
0	27	-	principal, or current funds	<u> </u>				
ets	28	•	irplus, or land, bldg , and equipment fund	<u></u>				
SS	29	<del>-</del> '	ocumulated income, endowment, or other funds	16,313	19,118			
۲	30		fund balances (see instructions) .	16,313	19,118			
Pe	31	Total liabilities and	i net assets/fund balances (see					
		instructions)		16,313	19,118			
	rt III		anges in Net Assets or Fund Balances					
1	Total	net assets or fund ba	alances at beginning of year—Part II, column (a)	, line 30 (must agree v	vith			
	end-c	of-year figure reported	d on prior year's return)		1	16,313		
2	Enter	amount from Part I,	line 27a .		. 2	2,805		
3			led in line 2 (itemize)		3			
	4 Add lines 1, 2, and 3							
5	Decre	eases not included in	line 2 (itemize)		5	19,118		
	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)—Part	II, column (b), line 30	6	19,118		

Part	(a) List and describe the 2-story brick wareho		(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr )	(d) Date sold (mo , day, yr )		
1a								
<u>b</u>			_					
<u>C</u>						ļ		
d_								
e						<u> </u>	<del></del>	l
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis ise of sale			n or (loss) f) minus (g)
<u>a</u> b		***	-					
c	· · · · · · · · · · · · · · · · · · ·							<del>-</del>
d						<u> </u>		
e			. =-					•
	Complete only for assets sh	nowing gain in column (h) and owned	by the found	dation	on 12/31/69		(I) Going (Col	(h) gain minus
	(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k)	Excess	s of col (i) (j), if any		col (k), but no	t less than -0-) or rom col (h))
а								
b						<u> </u>		
C								
<u>d</u>						<u> </u>		
<u>е</u>			-1			<del>                                     </del>		
2	Capital gain net income or	(net capital loss) { If (loss)	also enter i , enter -0- i	n Parl	,	2		0
3		i or (loss) as defined in sections 1						
		line 8, column (c) (see instruction	ns). If (loss)	, ente	r-0- in }			
Part	Part I, line 8	der Section 4940(e) for Red			<u> </u>	3_		0
Was t		section 4942 tax on the distributa				e perio	od?	☐ Yes ☐ No
1	<u> </u>	ount in each column for each year				ng any	entries	
	(a)	(b)			(c)	Ĭ		(d)
Cal	Base penod years endar year (or tax year beginning in	Adjusted qualifying distributions	s Net	value o	f nonchantable-use as	ssets		tribution ratio divided by col (c))
	2012		3,816		14	4,178	\ <u></u>	0 269149
	2011	<del></del>	9,389			2,316		0 762342
	2010		7,990		1:	2,703		0 628985
	2009		8,551		1	1,498		0 743695
	2008	1	0,332		1:	2,434		0 830947
		***************************************						
2	Total of line 1, column (d)						2	3 235118
3	Average distribution ratio f	for the 5-year base period—divide	the total or	n line	2 by 5, or by the			
		lation has been in existence if les			•	.	3	0 647024
4	Enter the net value of non-	charitable-use assets for 2013 fro	om Part X, lı	ne 5			4	17,450
5	Multiply line 4 by line 3						5	11,291
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)					6	0
7	Add lines 5 and 6		•				7	11,291
8	Enter qualifying distribution	ns from Part XII, line 4					8	4,220
-		ter than line 7, check the box in F		1b, ar	nd complete that	part us	sing a 1% tax	

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)						
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1  Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check						
	here ▶ ☐ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0				
3	Add lines 1 and 2 .		0				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		0				
6	Credits/Payments						
a	2013 estimated tax payments and 2012 overpayment credited to 2013  Exempt foreign organizations—tax withheld at source  6b  6b						
b	Tax paid with application for extension of time to file (Form 8868) . 6c						
c d	Backup withholding erroneously withheld . 6d 6d						
7	Total credits and payments Add lines 6a through 6d . 7		0				
8	Enter any penalty for underpayment of estimated tax. Check here						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . • 9		0				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .		Ö				
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11		0				
Part \	VII-A Statements Regarding Activities	<del></del>					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No			
	participate or intervene in any political campaign?	1a		<u> </u>			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?						
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities						
С							
d	and the second s						
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶\$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers > \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities	2		X			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles						
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 4a	-	X			
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?	4a 4b	N/A				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	1077	X			
•	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that						
	conflict with the state law remain in the governing instrument?	6	Х				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	UT If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	35					
3	or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If						
	"Yes," complete Part XIV						
10	in the second se						
	names and addresses	10	<u> </u>	Х			
		000	DE				

Part	VII-A Statements Regarding Activities (continued)						
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the						
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		<u> </u>			
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified						
	person had advisory privileges? If "Yes," attach statement (see instructions).	12		X			
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	L			
	Website address ► N/A						
14	The books are in care of ► SERVICE SPECIALTIES Telephone no ► (801) 27	2-521	4				
	Located at ► 4725 HOLLADAY BLVD, #210 SALT LAKE CITY\ UT ZIP+4 ► 84117						
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ ∐			
4.0	and enter the amount of tax-exempt interest received or accrued during the year .   15   15		V	No			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority	1 40	Yes	No			
	over a bank, securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of	16_		<u> </u>			
	the foreign country						
Dart	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u></u>	-				
rait	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No			
10	During the year did the foundation (either directly or indirectly)			-110			
1a	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?						
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a						
	disqualified person?	}					
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			]			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?						
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			ļ			
	the benefit or use of a disqualified person)?						
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the						
	foundation agreed to make a grant to or to employ the official for a period after						
	termination of government service, if terminating within 90 days)						
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			لـــــا			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here	1b	N/A				
_				1			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?	1c		X			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		<u> </u>			
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			İ			
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and						
•	6e, Part XIII) for tax year(s) beginning before 2013?			]			
	If "Yes," list the years   20 , 20 , 20 , 20						
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)						
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	<u> </u>					
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A				
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here						
	<b>▶</b> 20, 20, 20						
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise						
_	at any time during the year? Yes X No						
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or						
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the						
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse						
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3b	N/A				
40	foundation had excess business holdings in 2013 )  Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	17/	X			
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?  Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			<del>-^-</del>			
D	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		X			
		<del></del>		<u> </u>			

Part	VII-B	Statements Regarding Activities	tor Wh	iich Form	4/20 N	nay Be Re	quire	a (contin	uea)			
5a	During the (1) Carry	e year did the foundation pay or incur any on propaganda, or otherwise attempt to in	amount	t to e legislation (	section	4945(e))?		☐ Yes	X No			
		nce the outcome of any specific public ele y or indirectly, any voter registration drive		ee section 49	955), or	to carry on		Yes	No			
	(3) Provid	le a grant to an individual for travel, study,	, or othe	er sımılar pur	poses?			☐ Yes	X No			
	(4) Provid	de a grant to an organization other than a n 509(a)(1), (2), or (3), or section 4940(d)	charitab (2)? (se	ole, etc., orga e instruction	anızatıor s) .	n described	in	☐ Yes	X No			
		de for any purpose other than religious, ch ses, or for the prevention of cruelty to chil			terary, c	or education	nal	☐ Yes	X No			
b	If any ans	wer is "Yes" to 5a(1)–(5), did any of the tr	ransacti	ons fail to qu	alify un	der the exc	eptions	describe	d ın			
		ns section 53 4945 or in a current notice i								5b	N/A	
С	If the ans	tions relying on a current notice regarding wer is "Yes" to question 5a(4), does the fo	oundatio	n claım exen			•	☐ Yes	► □			
		It maintained expenditure responsibility fo	_		E(~!\			□ 1es				
_	•	attach the statement required by Regulation										
6a		undation, during the year, receive any fur onal benefit contract?	ias, aire	ctly or indire	cuy, to p	bay premiur	ns	☐ Yes	X No			
	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal be If "Yes" to 6b, file Form 8870						efit con	_	(Z) 110	6b		X
ь							ient wi	ill act r		- 00		^
7a		<i>If "Yes" to 6b, file Form 8870</i> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the						Yes	X No			'
b							e transa		Z	7b	N/A	
		nformation About Officers, Directo							aid Em	ploye	es,	
		and Contractors		-		•						
1	List all of	fficers, directors, trustees, foundation r	nanage	rs and their	compe	ensation (s	ee insti	ructions).				
		(a) Name and address	hour	, and average is per week ed to position	i (lf r	mpensation not paid, nter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	ense ac allowan	
RONA	LD HEME	LGARN	PRES									
			MINIM	AL								
HELE	N HEMEL	GARN	VP									
			MINIM	AL								
RHON	IDA HEME		SEC									
			MINIM		ļ <u>—</u>							
AMY I	HEMELGA		TREAS									
			MINIM		- 1 1 1				-> 16			
2	"NONE."	sation of five highest-paid employees (	otner tr	nan tnose in	ciuaea	on line 1—	-see ins			ne, ent	er	
	(a) Name ar	nd address of each employee paid more than \$50,000		(b) Title, and a hours per v devoted to pe	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	ense ac allowan	
NONE												
						_						
Total	number of	other employees paid over \$50,000	1			<u> </u>		L				

Part VIII	Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	tion Managers, Highly Paid Er	nployees,
3 Five	highest-paid independent contractors for professional services (see	instructions). If none, enter "NO	VE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total numbe	er of others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
List the found	dation's four largest direct chantable activities during the tax year. Include relevant statistical in and other beneficianes served, conferences convened, research papers produced, etc	formation such as the number of	Expenses
1	N/A		
2			
3			
		•	
4			
Part IX-B			<del> </del>
	two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1	NONE		
	NONE		
2			
All other prog	gram-related investments. See instructions	·····	
3			
			•
Total Add II	nes 1 through 3		-

Form 990-PF (2013)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundation	ns,
_	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities .	1a	
b	Average of monthly cash balances .	1b	17,716
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	17,716
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	17,716
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	266
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	17,450
6	Minimum investment return. Enter 5% of line 5	6	873
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here   ☐ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	873
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	873
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	873
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	873
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	4,220
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,220
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,220
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the foun	dation
	qualifies for the section 4940(e) reduction of tax in those years		

Form 9		ELGARN MEMORIA	AL FOUNDATION	· · · · · · · · · · · · · · · · · ·	93-1	216871 Page <b>9</b>
Part	XIII Undistributed Income	(see instructions)				
1	Distributable amount for 2013 from	n Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013 873
2	Undistributed income, if any, as of	the end of 2013				5,0
а	Enter amount for 2012 only .				0	
b	Total for prior years 20,	20, 20				
3	Excess distributions carryover, if a	ny, to 2013				
а	From 2008	9,710				
b	From 2009 .	7,976				
C	From 2010	7,355				
d	From 2011	8,773				;
е	From 2012	3,107				
f	Total of lines 3a through e	<u>_</u>	36,921			
4	Qualifying distributions for 2013 from time 4. • \$ 4,220	om Part XII,				
а	Applied to 2012, but not more than	line 2a				
	Applied to undistributed income of					
_	(Election required—see instruction					!
С	Treated as distributions out of corp	· —				
	required—see instructions)					1
d	Applied to 2013 distributable amou	unt				873
e	Remaining amount distributed out		3,347			
5	Excess distributions carryover app	· -				
	(If an amount appears in column (c					
	amount must be shown in column	·				
6	Enter the net total of each colum	ın as				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e S	Subtract line 5	40,268			
b	Prior years' undistributed income	Subtract				
	line 4b from line 2b			0		
С	Enter the amount of prior years' un					
	income for which a notice of deficie	•				,
	been issued, or on which the section	on 4942(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxal	ble				
	amount—see instructions					
е	Undistributed income for 2012 Su					1
	4a from line 2a Taxable amount—	see			_	
_	instructions .	:			0	
f	Undistributed income for 2013 Su					
	4d and 5 from line 1 This amount	must be				0
_	distributed in 2014 .					0
7	Amounts treated as distributions o					
	to satisfy requirements imposed by	1				
	170(b)(1)(F) or 4942(g)(3) (see ins					
8	Excess distributions carryover from applied on line 5 or line 7 (see inst		9,710			,
9	Excess distributions carryover to		- 9,710			
3	Subtract lines 7 and 8 from line 6a		30,558			
10	Analysis of line 9	·	30,330			
а	Excess from 2009 .	7,976				
b	Excess from 2010	7,355				
C	Excess from 2011	8,773				:
d	Excess from 2012	3,107				
_	Excess from 2013	3.347				

Part	XIV Private Operating Foundat	ions (see instruc	ctions and Part V	/II-A, question 9		N/A
1a	If the foundation has received a ruling o	r determination let	ter that it is a privat	te operating		
	foundation, and the ruling is effective for	r 2013, enter the d	ate of the ruling	. •		
b	Check box to indicate whether the found	dation is a private o	perating foundation	n described in sec	tion	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	-	
	income from Part I or the minimum investment return from Part X for	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
	each year listed .					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII,					
•	line 4 for each year listed					0
d	Amounts included in line 2c not used directly					
_	for active conduct of exempt activities					0
е	Qualifying distributions made directly				-	
·	for active conduct of exempt activities					
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the					
•	alternative test relied upon					
а	"Assets" alternative test—enter					
_	(1) Value of all assets					0
	(2) Value of assets qualifying under					· · · · · · · · · · · · · · · · · · ·
	section 4942(j)(3)(B)(i) .	:				0
b	"Endowment" alternative test-enter 2/3	-		· · · · · ·		
	of minimum investment return shown in Part X, line 6 for each year listed					l o
С	"Support" alternative test—enter					
C	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from	-:-				
	an exempt organization					0
	(4) Gross investment income					0
Part		n (Complete thi	s part only if the	e foundation ha	d \$5.000 or mo	
	any time during the year—				40,000 01 1110	
1	Information Regarding Foundation M					<del></del>
a	List any managers of the foundation wh		more than 2% of t	he total contribution	ns received by the	foundation
	before the close of any tax year (but on					
NONE	· · ·					
b	4.1.4.4.1	o own 10% or mor	e of the stock of a	corporation (or an	equally large portion	n of the
~	ownership of a partnership or other enti					
NONE	· · · ·			_		
2	Information Regarding Contribution,	Grant, Gift, Loan,	Scholarship, etc.	Programs:		
	Check here ► X if the foundation on		-	-	ations and does no	ot accept
	unsolicited requests for funds If the fou					
	under other conditions, complete items	2a, b, c, and d				
а	The name, address, and telephone num	ber or e-mail addr	ess of the person t	o whom applicatio	ns should be addre	ssed
-			,	, ,		
b	The form in which applications should b	e submitted and in	formation and mat	erials they should	nclude	
-				,		
c	Any submission deadlines					•
-	,					
d	Any restrictions or limitations on awards	s, such as by geog	raphical areas, cha	intable fields, kinds	of institutions, or o	other
	factors	, , , , , ,	·	•	•	

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year MICHIGAN STATE UNIVERSITY NONE PC **SCHOLARSHIPS** 500 MI PC LOURDES UNIVERSITY NONE **SCHOLARSHIPS** 1,000 MI MONROE COMMUNITY COLLEGE NONE PC **SCHOLARSHIPS** 1,000 MI MASON CONSOLIDATED SCHOOL DISTRICT NONE PC SCHOOL DONATION 300 ST JOSEPH CATHOLIC SCHOOL NONE PC SCHOOL DONATION 500 MI PC THE JUDE NONE HOSPITAL 500 ΜI Total 3a 3,800 **b** Approved for future payment Total 0

Pai	t XVI-A Analysis of Income-Producing A	ctivities				
	r gross amounts unless otherwise indicated		isiness income	Excluded by sect	ion 512, 513, or 514	(-)
1	Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
•	_					
			<del>-</del>			
	e				<del></del>	
	g Fees and contracts from government agencies					
2	Membership dues and assessments	-		· · · · · · · · · · · · · · · · · · ·		
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
	a Debt-financed property .	·				
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					-
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
	b					_
	c					
	d					
	e			_		
12	Subtotal Add columns (b), (d), and (e)		0		0	
13	Total. Add line 12, columns (b), (d), and (e)			•	13	. 0
(See	e worksheet in line 13 instructions to verify calculation					
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the	Accomplishm				
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm ne is reported in o	column (e) of Part	XVI-A contributed	I importantly to the	one )
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons )
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm ne is reported in o	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons )
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons )
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons )
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(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	l importantly to the ses) (See instruction	ons)
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons )
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(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons )
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons )
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(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
(Sec	worksheet in line 13 instructions to verify calculation  Relationship of Activities to the A  e No. Explain below how each activity for which incor	Accomplishm me is reported in or poses (other than	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)

Print/Type preparer's name

Roger A Dibb, CPA, PC

P O Box 17868, Salt Lake City, UT 84117

Paid

Preparer Use Only

٠.									
Form 99	0-PF (			EMORIAL FOUNDATION		93-121		Pa	ge <b>13</b>
Part	XVII	Information Exempt Org	-	sfers To and Transaction	s and Relationship	s With Nonchari	table		
1	Did	the organization d	rectly or indirectly er	ngage in any of the following v	vith any other organiza	tion described		Yes	No
		, <i>,</i>	e Code (other than se	ection 501(c)(3) organizations	) or in section 527, rela	iting to political			
	_	inizations?							
а		•	orting foundation to	a noncharitable exempt organ	ization of				
		Cash		•		•	1a(1)		X
		Other assets	•		•		1a(2)		_X_
b		er transactions					45/43		
			a noncharitable exer				1b(1)		X
				ble exempt organization	•		1b(2) 1b(3)		X
			equipment, or other	assets .	•		1b(3)		$\frac{\hat{x}}{x}$
		Reimbursement ar	-		•		1b(5)		X
		oans or loan guar		p or fundraising solicitations	•		1b(6)		$\frac{\hat{x}}{x}$
С	. ,			s, other assets, or paid emplo		•	1c		X
				nplete the following schedule. Co		show the fair market			
•	valu	e of the goods, othe	er assets, or services of	given by the reporting foundation	. If the foundation receiv	ed less than fair mark	et		
		<del></del>	1-	nt, show in column (d) the value					: -
(a) Line	no	(b) Amount involved	(c) Name of nonc	chantable exempt organization	(d) Description of transf	ers, transactions, and share	nng arrar	ngemen	nts -
		<del>-</del>				<del> </del>			
						<u> </u>			
		<del></del>		<del>-</del>					
-	<b>-</b> ∤	<del></del>							
					-				
					_				
	$\neg$		· <del>-</del>		· · · · · · · · · · · · · · · · · · ·				
		·							
	$\neg$								
									•
2a				ited with, or related to, one or ther than section 501(c)(3)) or		nizations	Yes	Πи	lo.
				ther than section 30 1(c)(3)) or	111 3000011 027	ц	100	<u> </u>	
b	II Y		following schedule	(b) Type of omanization		(c) Description of relation	nehin		
	_	(a) Name of organ	III AUOII	(b) Type of organization		(o) Description of relation	July		
						<del></del>			
		<del>_</del>							
			<del></del>			<del></del>			
			- W						
	Und	er penalties of penury, I dec	lare that langue examined this re	I eturn, including accompanying schedules and	statements, and to the best of my k	nowledge and belief, it is true,			-
Sign Here	сол	ect, and complete Declarati	on of preparer (other than taxpa	lyer) is based on all information of which prepared in the state of th	erer has any knowledge	May the IR with the pre (see instruc	parer sho		<u>~</u>
	I Si	gnature of officer or trus	ste#	Date ∜ Title					

Preparer signatu

self-employed P00014275

06-1091227

801-278-2497

Check X if

Firm's EIN

Phone no

Date

5/16/2014

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

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

OMB No 1545-0047

2013

**Employer identification number** 

ROBERT W HEMELGARN M	IEMORIAL FOUNDATION	93-1216871
Organization type (check on	e)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private four	dation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on
	501(c)(3) taxable private foundation	
Ob all if	and the the Constal Bule of a Consial Bule	
· · · · · · · · · · · · · · · · · · ·	covered by the <b>General Rule</b> or a <b>Special Rule</b> . ), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
General Rule		
	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or se contributor. Complete Parts I and II	more (in money or
Special Rules		
sections 509(a)(1) an	3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test d 170(b)(1)(A)(vi) and received from any one contributor, during the year, a % of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	contribution of the greater
the year, total contrib	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any utions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scier is, or the prevention of cruelty to children or animals. Complete Parts I, II, an	ntific, literary, or
the year, contribution total to more than \$1, year for an exclusivel	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any s for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions that were receive religious, charitable, etc., purpose. Do not complete any of the parts unless that the parts unles	ubutions did not eved during the ess the <b>General Rule</b>
Caution. An organization that	s is not covered by the General Rule and/or the Special Rules does not file	Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
ROBERT W HEMELGARN MEMORIAL FOUNDATION

Employer identification number 93-1216871

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is r	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VARIOUS SEE ATTACHED SCHEDULE Foreign State or Province Foreign Country.	\$8,700	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province: Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
ROBERT W HEMELGARN MEMORIAL FOUNDATION

Employer identification number 93-1216871

Part II	Noncash Property (see instructions) Use duplicate of	opies of Part II if additional space	ce is needed
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of or					Employer identification number 93-1216871		
Part III	V HEMELGARN MEMORIAL FOUNDATION Exclusively religious, charitable, etc., in	dividual contrib	utions to section !	501(c)(7)	<del></del>		
Part III	total more than \$1,000 for the year. Com						
	For organizations completing Part III, enter						
	contributions of \$1,000 or less for the year		-				
	Use duplicate copies of Part III if additional	space is needed	<u>.</u>				
(a) No.					d) Description of how gift is hold		
from Part I	(b) Purpose of gift	(c) (	Jse of gift	'	d) Description of how gift is held		
				<b>-</b>			
		(a) Tra	insfer of gift				
		( <del>e</del> ) 11a	msier or gift				
	Transferee's name, address, and a	ZIP + 4	Relatio	nship of	transferor to transferee		
	,			<del>'</del>			
(a) No.	For Prov Country			1			
from	(b) Purpose of gift	(c) l	Jse of gift	(4	d) Description of how gift is held		
Part I							
	(e) Transfer of gift						
	Transferee's name, address, and a	<u> </u>	Relatio	nsnip or	transferor to transferee		
	For Prov Country						
(a) No. from	(b) Purpose of gift	(c) l	Jse of gift	(	d) Description of how gift is held		
Part I	(4,1 11,1 11,1 11,1 11,1 11,1 11,1 11,1			<u> </u>	<u> </u>		
		(e) Tra	insfer of gift				
	Transferee's name, address, and 2	ZIP + 4	Relatio	nship of	transferor to transferee		
	For Prov Country						
(a) No. from	(b) Purpose of gift	(c) I	Use of gift		d) Description of how gift is held		
Part I	(b) Furpose of gift	(6)					
		(e) Tra	ansfer of gift	<u>-</u>			
	Transferee's name, address, and	ZIP + 4	Relatio	nship of	transferor to transferee		
	For Prov Country						

## Robert W. Hemelgarn Foundation Contributors for year 2013

Name, address, zip	Total Amount
Angelo & Diana Frole 8835 Patterson Rd Hilliard, OH 43026-8431	500
Amy & Chad Hemelgarn-Mauder 2565 W. Stein Road LaSalle, MI 48145	50
Emanuel M. Evola 2367 Oakdale Ave Temperance, MI 48182	50
Paul J Steinman 9111 Forestview Temperance, MI 48182	50
Carlos & Evon Herrera 2027 Creston Dr Erie, MI 48133	50
Robert C Layman 3309 Quail Hollow Dr Lambertville, MI 48144	50
Edward & Sandra Sulier 7127 Maplewood Dr Temperance, MI 48182	50
Derek & Tracy Bowman 3588 Kelly road laSalle MI 48145	50
Mark & Judy Hall 3295 Addlebrook Dr Findlay, OH 45840	50
Local Union #8 807 Lime City Road Rossford, OH 43460-1693	100
Karen & William Declercq 2193 Castlewood Toledo, OH 43613	100
Black Oak Building Co 2950 Centennial Rd Toledo, OH 43617	50
Curtis Construction Company, LLC 1982 Lotus Drive Erie, MI 48133	100

PAGE TOTAL \$ 1,250.00

## Robert W. Hemelgarn Foundation Contributors for year 2013

Name, address, zip	Total Amount
Benore Logistic Systems, Inc. PO Box 853 Erie, MI 48133	50
Olde Schoolhouse Commons LLC 8336 Monroe Rd Lambertville, MI 48144	50
Erie Mason Touchdowners P.O. Box 42 Erie, MI 48133	50
Jeremy Joyner 7129 Sandy Springs Maumee, OH 43537	50
Dale & Carol Morin 1805 E. Temperance Road Erie, MI 48133	50
Leigh A Russow 1388 Laurelhurst Temperance MI 48182	50
Rodney & Thelma Jacobs 4076 Mc Collum Lake Rd Curran, MI 48728	50
Filmtec, Inc 1120 Sandusky St Fostoria, OH 44830	100
American Manufacturing, Inc 2375 Dorr St Toledo, OH 43607	100
Phillips Metals Inc PO Box 385 Plainfield, IL	50
Cooper Alliance LLC 4375 Stonewood CT Rochester, MI 48308	50
James & Kathleen Faulkner 2206 Grantwood Dr. Toledo, OH 43613	100
Cutting Edge Countertops 1300 Flagship Dr Perrysburg, OH 43581	50
PAGE TOTAL	800

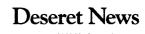
# Robert W. Hemelgarn Foundation Contributors for year 2013

Name, address, zip	<b>Total Amount</b>
Andrew Brown-proceeds from golf outing 4161 Clegg Rd	6,250.00
Lambertville, MI 48144	
Nelson Excavating, Inc 2727 E. Substation road	100
Erie, MI 48133	
Dennis & Mary Stark 2044 Creston Drive	50
Erie, MI 48133	
Andrew Hudak	50
3490 Woodmont Dr Lambertville, MI 48144	
Robert & Martha Green	50
816 Shore Dr Fostoria, OH 44830	
Aya Downtown LLC	50
3490 Woodmont Dr Lambertville, MI 48144	
Erie Welding & Mechanical Contractors	J 50
9776 S. Dixie Hwy Erie, MI 48133-0254	
Erie Fire-Fighters, Inc	50
Erie, MI 48133 PAGE TOTAL	6,650
GRAND TOTAL	8,700.00

4770 S 5600 W. P O BOX.704005 WEST VALLEY CITY. UTAH 84170 FED TAX I D.# 87-0217663 801-204-6910

### The Salt Lake Tribune





PROOF OF PUBLICATION

CUSTOMER'S COPY

CUSTOMER NAME AND ADDRESS	ACCOUNT NUMBER	DATE
DIBB,ROGER	9001454511	5/7/2014
4725 SO HOLLADAY BLVD #200		
SALT LAKE CITY UT 84117		

ACCOUN	IT NAME	]
DIBB,R		
TELEPHONE	ADORDER# / INVOICE NUMBER	]
8012782497	0000956765 /	
SCHE	DULE	1
Start 05/07/2014	End 05/07/2014	
CUST, R	REF. NO	
Helmelgarn		
CAP	TION	1
PUBLIC NOTICE Public notice is hereby given	that the annual report of the Robert W Hemelga	PUBLIC NOTICE
SI	ZE	Public notice is hereby given that the annual report of the Robert W. Hemelgarn Memo-
20 Lines	1 00 COLUMN	from Foundation is available for inspection at the accounting office during regular business hours by any officer
TIMES	RATE	who requests inspection within
2		notice is published The address and phone number of the Foundation accounting office is 4725 Holladay Blvd, Holladay, UT 84117, 801-278-2497 The person to control for extractors as Para
MISC. CHARGES	AD CHARGES	278-2497 The person to contact for inspection is Roger Dibb 956765 UPAXLP
		<u> </u>
	TOTAL COST	Ţ
	30 00	

#### AFFIDAVIT OF PUBLICATION

AS NEWSPAPER AGENCY COMPANY. LLC dba MEDIAONE OF UTAH LEGAL BOOKER, I CERTIFY THAT THE ATTACHED ADVERTISEMENT OF PUBLIC NOTICE. Public notice is hereby given that the annual report of the Robert W. Hemelgarn Memorial Foundation is available for inspection at the accounting for DIBB, ROGER WAS PUBLISHED BY THE NEWSPAPER AGENCY COMPANY, LLC dba MEDIAONE OF UTAH, AGENT FOR THE SALT LAKE TRIBUNE AND DESERET NEWS DAILY NEWSPAPERS PRINTED IN THE ENGLISH LANGUAGE WITH GENERAL CIRCULATION IN UTAH, AND PUBLISHED IN SALT LAKE CITY, SALT LAKE COUNTY IN THE STATE OF UTAH NOTICE IS ALSO POSTED ON UTAHLEGALS COM ON THE SAME DAY AS THE FIRST NEWSPAPER PUBLICATION DATE AND REMAINS ON UTAHLEGALS COM INDEFINATELY COMPLIES WITH UTAH DIGITAL SIGNATURE ACT UTAH CODE 46-2-101, 46-3-104

PUBLISHED ON

Start 05/07/2014

End 05/07/2014

**SIGNATURE** 

DATE

5/7/2014

THIS IS NOT A STATEMENT BUT A "PROOF OF PUBLICATION"
PLEASE PAY FROM BILLING STATEMENT

VIRGINIA CRAFT

NOTARY PUBLIC - STATE OF UTAH

My Comm Exp 01/12/2018

Commission # 672963

NORMAN CUT

### **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

### Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.
Information about Form 8868 and its instructions is at www.irs.gov/form8868.

• If y	ou are filing for an Automatic 3-Month Extension ou are filing for an Additional (Not Automatic) 3 of complete Part II unless you have already bea	-Month Ex	tension, complete only Part II (on p	_		-	<b>►</b> [X]
a corp 8868 Retur	ronic filing (e-file). You can electronically file For coration required to file Form 990-T), or an addition to request an extension of time to file any of the for in for Transfers Associated With Certain Personal ctions) For more details on the electronic filing of	nal (not au orms listed Benefit Coi	tomatic) 3-month extension of time \ in Part I or Part II with the exception  ntracts, which must be sent to the IR:	ou can elect of Form 8870 S in paper fo	ronic 0, Info rmat	ally file ormatic (see	Form on
Par	Automatic 3-Month Extension of	Time. Onl	y submit original (no copies nee	ded).			
A corp	poration required to file Form 990-T and requesting	ig an autom	natic 6-month extension—check this l	box and com	plete		
Part I	•						▶ 📙
	ner corporations (including 1120-C filers), partners	ships, REM	ICs, and trusts must use Form 7004	to request an	exte	nsion (	o <b>f</b>
time t	o file income tax returns						
		<del></del> .	Y	identifying r			
Type				Employer iden	tificatio	n numbe	er (EIN) or
print	ROBERT W HEMELGARN MEMORIAL F			93-1216871			2011
File by due dat	I	box, see in	structions	Social secur	ity nu	mper (S	55N)
filing yo	ur 25 500111110EEADA1 BEVD, #210	For a foreign	addraga aga patrustiana				
return instruct		roi a ioleigi	raddress, see instructions				
	JOALI LAKE OIT I, OT OFFIT				=		
Enter	the Return code for the return that this application	n is for (file	a separate application for each retur	n)		•	04_
	ication	Return	Application				Return
Is Fo	r	Code	Is For				Code
Form	990 or Form 990-EZ	01	Form 990-T (corporation)				07
	990-BL	02	Form 1041-A				08
	4720 (ındıvıdual)	03	Form 4720 (other than individual)				09
	990-PF	04	Form 5227				10
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069				11
Form	990-T (trust other than above)	06	Form 8870				12
Te If t	is for the organization's return for  X calendar year 2013 or  Lax year beginning  If the tax year entered in line 1 is for less than 12  Change in accounting period	of business four digit of life it is for point is for corporation exempt organized months, compared to the life is	Froup Exemption Number (GEN) Part of the group, check this box  required to file Form 990-T) extension ganization return for the organization  , and ending heck reason Initial return	named abov		ar e exter	this is and attach a ansion
3a	If this application is for Forms 990-BL, 990-PF, 9	90-T, 4720,	or 6069, enter the tentative tax, less	any	2	•	^
b	nonrefundable credits See instructions If this application is for Forms 990-PF, 990-T, 472	20. or 6069	enter any refundable credits and		3a	\$	0
IJ	estimated tax payments made Include any prior				3b	\$	0
С	Balance due. Subtract line 3b from line 3a Inclu			ising			<u></u> .

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for

payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

EFTPS (Electronic Federal Tax Payment System) See instructions

0

Part I, Line 16b (990-PF) - Accounting Fees

		997	797	0	200
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	RA DIBB, CPA	624	499		125
2	SPECIALTY SERVICES	373	298		75

Part I, Line 23 (990-PF) - Other Expenses

	2	708	566	0	142
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	OFFICE EXPENSE	5	4		1
2	ADVERTISING	703	562		141