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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.
Information about Form 990 and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning , 2014, and ending ,

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C CHARLIE TIPPMANN FOUNDATION CHARITABLE TRUST
3518 ADAMS CENTER ROAD
FORT WAYNE, IN 46806

D Employer identification number

20-0924354

E Telephone number

260-441-9603

G Gross receipts \$ 2,445,457.

F Name and address of principal officer DENNIS J TIPPMANN SR

SAME AS C ABOVE

H(a) Is this a group return for subordinates? Yes ☐ No ☒H(b) Are all subordinates included? If 'No,' attach a list (see instructions) Yes ☐ No ☐I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no.) 4947(a)(1) or 527

J Website: N/A

H(c) Group exemption number

K Form of organization ☐ Corporation ☒ Trust ☐ Association ☐ Other

L Year of formation 2004

M State of legal domicile IN

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE TRUST IS ORGANIZED AND OPERATED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS AND EDUCATIONAL PURPOSES BY SUPPORTING THE PURPOSES OF VARIOUS QUALIFIED CHARITABLE ORGANIZATIONS.		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	8
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	8
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34		7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)		
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	158,404.	462,791.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	158,404.	462,791.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	154,200.	579,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25)		
Expenses	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	22,185.	32,465.
	18	Total expenses. Add lines 13 through 16 (must equal Part IX, column (A), line 25)	176,385.	611,465.
	19	Revenue less expenses. Subtract line 18 from line 12	-17,981.	-148,674.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
Net Assets or Fund Balance	21	Total liabilities (Part X, line 26)	8,389,372.	8,439,271.
	22	Net assets or fund balances. Subtract line 21 from line 20	0.	0.
			8,389,372.	8,439,271.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer *Dennis J Tippmann Jr* Date 6-10-15
DENNIS J TIPPMANN JR PRESIDENT
Type or print name and title

Paid Preparer Use Only: Print/Type preparer's name NON-PAID PREPARER Preparer's signature Date 6/04/15 Check ☐ if self-employed PTIN
Firm's name Firm's address Firm's EIN Phone no

May the IRS discuss this return with the preparer shown above? (see instructions) Yes ☐ No ☐

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 05/28/14

Form 990 (2014)

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SCANNED JUL 09 2015

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III. ☐

1 Briefly describe the organization's mission:

THE TRUST IS ORGANIZED AND OPERATED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS AND
 EDUCATIONAL PURPOSES BY SUPPORTING THE PURPOSES OF VARIOUS QUALIFIED CHARITABLE
 ORGANIZATIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 579,000. including grants of \$ 579,000.) (Revenue \$)

THE TRUST IS ORGANIZED AND OPERATED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS AND
 EDUCATIONAL PURPOSES BY SUPPORTING THE PURPOSES OF VARIOUS QUALIFIED CHARITABLE
 ORGANIZATIONS. THE TRUST SUPPORTED VARIOUS ORGANIZATIONS IN 2012, SEE SCHEDULE I
 DETAIL.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 579,000.

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
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		X
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		X
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		X
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? If 'Yes,' complete Schedule D, Part I		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
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		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
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		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI		X
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		X
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		X
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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		X
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		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII		X
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
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		X
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		X
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? If 'Yes,' complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
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		X
20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III		X
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? If 'Yes,' complete Schedule J		X
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		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I		X
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		X
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 'Yes,' complete Schedule L, Part II		X
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? If 'Yes,' complete Schedule L, Part III		X
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):		
a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV		X
c 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? If 'Yes,' complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II		X
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? If 'Yes,' complete Schedule R, Part I		X
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		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2		X
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		X
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	X	

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Form 990 (2014)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V. ☐

	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1 a	0
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1 b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	
2 a 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.	2 a	0
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).	2 b	
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.	3 b	
4 a 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)?	4 a	X
b If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c	
6 a 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?	6 a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	
7 Organizations that may receive deductible contributions under section 170(c).		
a 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?	7 a	X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year.	7 d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g	N/A
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h	N/A
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	N/A
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a	N/A
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	N/A
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12.	10 a	N/A
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10 b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders.	11 a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b	
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a	N/A
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12 b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13 a	N/A
b 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.	13 b	
c Enter the amount of reserves on hand.	13 c	
14 a Did the organization receive any payments for indoor tanning services during the tax year?	14 a	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	14 b	

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

Check if Schedule O contains a response or note to any line in this Part VI

☒**Section A. Governing Body and Management**

	Yes	No
1 a 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.		
1 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? SEE SCHEDULE O	X	
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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7 a 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? SEE SCHEDULE O	X	
7 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?		X
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 SEE SCHEDULE O	X	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10 a Did the organization have local chapters, branches, or affiliates?		X
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?		
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O		
12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done		X
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
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?		
a The organization's CEO, Executive Director, or top management official		X
b Other officers or key employees of the organization		X
If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).		
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed IN

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ 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 SEE SCHEDULE O

20 State the name, address, and telephone number of the person who possesses the organization's books and records

DEB BRENNEMAN 3518 ADAMS CENTER ROAD FORT WAYNE IN 46806 260-441-9603

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** 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, and 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DENNIS J TIPPMANN SR CHAIRMAN	0.1 0	X		X				0.	0.	0.
(2) DENNIS J TIPPMANN JR PRESIDENT	0.1 0	X		X				0.	0.	0.
(3) MARY A TIPPMANN VICE PRESIDENT	0.1 0	X		X				0.	0.	0.
(4) WILLIAM D SWIFT SECRETARY	0.25 0	X		X				0.	0.	0.
(5) DEBRA BRENNEMAN TREASURER	1.6 0	X		X				0.	0.	0.
(6) CRAIG R FINLAYSON TRUSTEE	0.1 0	X						0.	0.	0.
(7) CAMILLE GRABLE TRUSTEE	0.25 0	X						0.	0.	0.
(8) BILL SULLIVAN TRUSTEE	0.1 0	X						0.	0.	0.
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										

1 b Sub-total

0. 0. 0.

c Total from continuation sheets to Part VII, Section A

0. 0. 0.

d Total (add lines 1b and 1c)

0. 0. 0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f				
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f					
Program Service Revenue	Business Code					
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)		372,823.			372,823.
	4 Income from investment of tax-exempt bond proceeds.					
	5 Royalties					
	6 a Gross rents	(i) Real (ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)		89,968.	89,968.		
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue Business Code						
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions		462,791.	89,968.	0.	372,823.	

Part IX Statement of Functional Expenses

Section 501(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 ☐

Do not include amounts reported on lines 6b, 7b, 8b, 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 domestic organizations and domestic governments. See Part IV, line 21	579,000.	579,000.		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	1,913.		1,913.	
c Accounting	15.		15.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	27.		27.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
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				
23 Insurance				
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.)				
a <u>INVESTMENT FEES</u>	28,101.		28,101.	
b <u>FOREIGN TAXES PAID</u>	2,409.		2,409.	
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	611,465.	579,000.	32,465.	0.
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)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash – non-interest-bearing	15,937.	1	10,141.
	2 Savings and temporary cash investments.		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	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		
	b Less: accumulated depreciation	10b	10c	
	11 Investments – publicly traded securities	8,373,435.	11	8,429,130.
	12 Investments – other securities See Part IV, line 11		12	
	13 Investments – program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34).	8,389,372.	16	8,439,271.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	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 related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☒ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds	8,389,372.	32	8,439,271.
	33 Total net assets or fund balances	8,389,372.	33	8,439,271.
34 Total liabilities and net assets/fund balances	8,389,372.	34	8,439,271.	

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Form 990 (2014)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	462,791.
2	Total expenses (must equal Part IX, column (A), line 25)	2	611,465.
3	Revenue less expenses. Subtract line 2 from line 1	3	-148,674.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,389,372.
5	Net unrealized gains (losses) on investments	5	198,573.
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	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8,439,271.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? 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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
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?		X
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		

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Form 990 (2014)

SCHEDULE A
(Form 990 or 990-EZ)

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.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization **CHARLIE TIPPMMANN FOUNDATION CHARITABLE TRUST**

Employer identification number
20-0924354

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.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ 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: _____
- 5 ☐ 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.)
- 9 ☐ An organization that normally receives: (1) more than 33-1/3% 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 33-1/3% 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).**
- 11 ☒ 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b ☒ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations 45
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A) SEE PART VI						
(B)						
(C)						
(D)						
(E)						
Total					579,000.	0.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2014

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 in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 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 VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	%
16a 33-1/3% support test – 2014. If the organization did not check the box on line 13, and the 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 – 2013. 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 – 2014. 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 VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ ☐		
b 10%-facts-and-circumstances test – 2013. 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 VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐		

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

Calendar year (or fiscal yr beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)						
2 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 business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b 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.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11 and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17.	18	%
19a 33-1/3% support tests – 2014. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☐		
b 33-1/3% support tests – 2013. 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. ▶ ☐		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ ☐		

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. SEE PART VI		X
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)		X
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below		X
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use		
4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below		X
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document) SEE PART VI	X	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	X	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		X
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI		X
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)		X
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)		X
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI		X
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI		X
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI		X
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below		X
b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	X
b A family member of a person described in (a) above?	11b	X
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c	X

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2	

Section C. Type II Supporting Organizations

	Yes	No
SEE PART VI		
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	X

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2 Activities Test Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	
3 Parent of Supported Organizations Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C – Distributable Amount		Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

- 7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990 or 990-EZ) 2014

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section D – Distributions**

	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E – Distribution Allocations (see instructions)

	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required – see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount.			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

BAA

Schedule A (Form 990 or 990-EZ) 2014

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART I, LINE 11**NAME(S) OF SUPPORTED ORGANIZATION(S)**

NAME OF SUPPORTING ORGANIZATION	FEDERAL EIN	TYPE OF ORGANIZATION	LISTED IN GOVERNING DOCUMENTS		AMOUNT OF MONETARY SUPPORT	AMOUNT OF OTHER SUPPORT
			YES	NO		
ALASKA RADIO MISSION	26-0683471	1	X		\$ 1,000.	0.
ALLEN CO JAIL CHAPLAINCY	35-2030383	7	X		5,000.	0.
AMERICANS UNITED FOR LIFE	36-3906065	7	X		1,000.	0.
BISHOP GASSIS SUDAN RELIEF INC	52-2148976	7	X		500.	0.
BISHOP LUERS HIGH SCHOOL	35-1041555	1	X		20,000.	0.
BOYS AND GIRLS CLUB	35-1778767	7	X		1,000.	0.
CATHOLIC MEDICAL MISSION BOARD	13-5602319	1	X		2,000.	0.
CATHOLIC RELIEF SERVICES	13-5563422	1	X		231,000.	0.
CHRISTIAN APPALACHIAN PROJECT	61-0661137	9	X		1,000.	0.
COMMUNITY TRANSPORT	35-2109955	7	X		5,000.	0.
CRIME VICTIM CARE	41-2205791	7	X		2,000.	0.
ERIN'S HOUSE	35-1884264	7	X		5,000.	0.
FOOD FOR THE POOR	59-2174510	7	X		5,000.	0.
FORT WAYNE BALLET	35-6006394	7	X		10,000.	0.
GENESIS OUTREACH	35-1804389	7	X		10,000.	0.
HABITAT FOR HUMANITY	35-1687064	7	X		10,000.	0.
HANNAS HOUSE INC	35-1871289	7	X		10,000.	0.
HOLY CROSS LUTHERAN CHURCH	35-0992114	1	X		2,500.	0.
INTERFAITH HOSPITALITY	35-2089785	7	X		10,000.	0.
INTERNATIONAL CATHOLIC MIGRATION CO	52-1470887	1	X		1,000.	0.

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART I, LINE 11 (CONTINUED)
NAME(S) OF SUPPORTED ORGANIZATION(S)

NAME OF SUPPORTING ORGANIZATION	FEDERAL EIN	TYPE OF ORGANIZATION	LISTED IN GOVERNING DOCUMENTS		AMOUNT OF MONETARY SUPPORT	AMOUNT OF OTHER SUPPORT
			YES	NO		
INTERNATIONAL HEALING FOUNDATION	91-1495358	9	X		\$ 20,000.	\$ 0.
JAMES MCFADDEN RESOURCE CENTER	35-2117777	7	X		15,000.	0.
LUTHEAN CHURCH MO SYNOD HOUSING	43-0658188	1	X		10,000.	0.
MATTHEW 25	35-1484951	7	X		10,000.	0.
MISION OF HOPE	30-0149833	1	X		2,500.	0.
MUSCULAR DYSTROPHY ASSOCIATION	13-1665552	7	X		2,000.	0.
NEW BEGINNINGS	43-2101685	7	X		10,000.	0.
NEW SONG	80-0082755	2	X		10,000.	0.
OUR LADY OF GOOD HOPE	35-2071594	1	X		35,000.	0.
REDEEMER RADIO	22-3864296	7	X		2,500.	0.
REMEDY.FM/SOUL MEDIC MEDIA	27-2417633	7	X		2,500.	0.
SCAN	31-0899309	7	X		3,000.	0.
ST CHARLES CHURCH	35-1022908	1	X		25,000.	0.
ST JUDE CATHOLIC SCHOOL	46-1801854	1	X		2,000.	0.
ST LABRE INDIAN SCHOOL	53-0196617	1	X		1,000.	0.
ST LOUIS ACADEMY	35-1386663	1	X		10,000.	0.
ST VINCENT DEPAUL STORE	35-0975940	9	X		1,000.	0.
SUPER SHOT INC	35-2122575	7	X		500.	0.
THE FRANCISCAN CENTER	35-1838772	7	X		36,000.	0.
THE MARIST BROTHERS	13-6078015	1	X		2,000.	0.
TRINITY EPISCOPAL CHURCH	35-1048903	1	X		2,000.	0.

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART I, LINE 11 (CONTINUED)
NAME(S) OF SUPPORTED ORGANIZATION(S)

NAME OF SUPPORTING ORGANIZATION	FEDERAL EIN	TYPE OF ORGANIZATION	LISTED IN GOVERNING DOCUMENTS		AMOUNT OF MONETARY SUPPORT	AMOUNT OF OTHER SUPPORT
			YES	NO		
TURNSTONE	35-0913541	7	X		\$ 5,000.	0.
VINCENT VILLAGE	35-1780135	7	X		5,000.	0.
WOMEN'S CARE CENTER	35-1609945	7	X		25,000.	0.
YMCA	35-0886850	9	X		9,000.	0.
					<u>\$ 579,000.</u>	<u>0.</u>

PART IV, SECTION A, LINE 1 - DESCRIPTION OF HOW SUPPORTED ORGANIZATIONS ARE DESIGNATED

THE ORGANIZATION'S SUPPORTED ORGANIZATIONS ARE DESCRIBED BY CLASS, NAMELY, (A) CHURCHES AND PARA-CHURCH ENTITIES QUALIFYING AS PUBLIC CHARITIES WITH A PRESENCE WITHIN THE INDIANA COUNTIES OF ADAMS, ALLEN, DEKALB, ELKHART, HUNTINGTON, KOSCIUSKO, LAGRANGE, MARSHALL, NOBLE, STEUBEN, ST. JOSEPH, WABASH, WELLS, AND WHITLEY WHICH SUPPORT, PROMOTE AND/OR PERFORM CHRISTIAN CHARITY, EVANGELISM, EDIFICATION, AND/OR STEWARDSHIP OR THE PROTECTION OF THE UNBORN AS WELL AS (B) CERTAIN PUBLIC CHARITIES SPECIFIED ON SCHEDULE B ATTACHED TO THE FIRST AMENDMENT OF AMENDED AND RESTATED TRUST AGREEMENT.

PART IV, SECTION A, LINE 5A - DETAILS OF ADDED, SUBSTITUTE, OR REMOVED SUPPORTED ORGS.

PART VI EXPLANATION: THE TRUSTEES OF THE ORGANIZATION DETERMINED IT PRUDENT TO PROVIDE ADDITIONAL CLARITY AS TO THE ELIGIBLE ENTITIES TO BE SUPPORTED BY THE ORGANIZATION AND THEREFORE DESIGNATED A CLASS OF SUPPORTED ORGANIZATIONS LIMITED BY PURPOSE AND GEOGRAPHIC SCOPE. SECTION 7 OF THE ORGANIZATION'S TRUST AGREEMENT, WHICH WAS AMENDED AND RESTATED ON APRIL 9, 2008, PROVIDES THE TRUSTEES WITH THE AUTHORITY TO AMEND SUCH TRUST AGREEMENT. ACTING PURSUANT TO THAT AUTHORITY, THE TRUSTEES ENTERED INTO A FIRST AMENDMENT OF AMENDED AND RESTATED TRUST AGREEMENT EFFECTIVE JANUARY 1, 2014, SAID AMENDMENT AMENDING THE DESIGNATED CLASS TO THAT DESIGNATION

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

PART IV, SECTION A, LINE 5A - DETAILS OF ADDED, SUBSTITUTE, OR REMOVED SUPPORTED ORGS. (CONTI
DESCRIBED MORE FULLY IN PART IV, SECTION A, NO. 1.

PART IV, SECTION C, LINE 1 - CONTROL OR MANAGEMENT OF SUPPORTED ORGS.

PURSUANT TO THE TERMS OF THE ORGANIZATION'S ORGANIZING DOCUMENTS, AS AMENDED, A
MAJORITY OF TRUSTEES OF THE ORGANIZATION DOES NOT NECESSARILY CONTROL THE
ORGANIZATION. INSTEAD, THE ORGANIZING DOCUMENTS PROVIDE THAT MANAGING TRUSTEES HAVE
CONTROL OVER THE ORGANIZATION. EACH MANAGING TRUSTEE OF THE ORGANIZATION IS AN
INDIVIDUAL WHO IS ALSO AN OFFICER, DIRECTOR, OR TRUSTEE OF A SUPPORTED ORGANIZATION.

SCHEDULE I
(Form 990)

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2014

Department of the Treasury
Internal Revenue Service

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

Open to Public
Inspection

Name of the organization

Employer identification number

CHARLIE TIPPMMANN FOUNDATION CHARITABLE

20-0924354

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

☒ Yes ☐ No

SEE PART IV

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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) BISHOP LUERS HS 333 E PAULDING ROAD FORT WAYNE, IN 46816	35-1041555		20,000.	0. N/A			TUITION ASSISTANCE
(2) CATHOLIC RELIEF SERVICE 228 WEST LEXINGTON ST BALTIMORE, MD 21298	13-5563422		231,000.	0. N/A			GENERAL OPERATING
(3) FORT WAYNE BALLET INC 324 PENN AVENUE FORT WAYNE, IN 46805	35-6006394		10,000.	0. N/A			COMMUNITY OUTREACH PROGRAMS
(4) FORT WAYNE HABITAT HUMANITY 2020 E WASHINGTON BLVD #500 FORT WAYNE, IN 46803	35-1687064		10,000.	0. N/A			GENERAL OPERATING
(5) GENESIS OUTREACH INC 2605 GAY STREET FORT WAYNE, IN 46803	35-1804389		10,000.	0. N/A			GENERAL OPERATING
(6) HANNA'S HOUSE 320 WEST 4TH ST MISHAWAKA, IN 46546	35-1871289		10,000.	0. N/A			GENERAL OPERATING
(7) INTERFAITH HOSPITALITY 2925 E STATE BLVD FORT WAYNE, IN 46805	35-2089785		10,000.	0. N/A			GENERAL OPERATING
(8) INTERNATIONAL HEALING PO BOX 901 BOWIE, MD 20718	91-1495358		20,000.	0. N/A			GENERAL OPERATING

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

19

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

0

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901L 06/19/14

Schedule I (Form 990) (2014)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE US SCHEDULE

I, PART I, LINE 2

MOST GRANTS ARE ISSUED FOR GENERAL OPERATING EXPENSES OF THE ORGANIZATIONS RECEIVING THE GRANTS. PERIODIC FINANCIAL STATEMENTS ARE REQUESTED FROM THESE ORGANIZATIONS TO ENSURE PROPER GRANT FUND USAGE.

Continuation Sheet for Schedule I (Form 990)

2014

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 1 of 2

Name of the organization		Employer identification number					
CHARLIE TIPPMMANN FOUNDATION CHARITABLE		20-0924354					
Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JAMES MCFADDEN RESOURC 4527 SHENANDOAH CIRCLE W FORT WAYNE, IN 46835	35-2117777		15,000.		N/A	N/A	GENERAL OPERATING
LCMS NATIONAL HOUSING 1333 SOUTH KIRKWOOD RD ST LOUIS, MO 63122	43-0658188		10,000.		N/A	N/A	GENERAL OPERATING
MATTHEW25 HEALTHCLINIC 413 EAST JEFFERSON BLVD FORT WAYNE, IN 46802	35-1484951		10,000.		N/A	N/A	GENERAL OPERATING
NEW BEGINNINGS OUTREACH MIN PO BOX 472 PIKETON, OH 45661	43-2101685		10,000.		N/A	N/A	GENERAL OPERATING
NEW SONG MISSION PO BOX 488 NASHVILLE, IN 47448	80-0082755		10,000.		N/A	N/A	GENERAL OPERATING
OUR LADY OF GOOD HOPE 7215 SAINT JOE RD FORT WAYNE, IN 46835	35-2071594		35,000.		N/A	N/A	BUILDING PROJECT
ST CHARLES CHURCH 4910 TRIER RD FORT WAYNE, IN 46815	35-1022908		25,000.		N/A	N/A	CONSTRUCTION PROJECT
ST LOUIS ACADEMY 15529 LINCOLN HWY EAST NEW HAVEN, IN 46774	35-1386663		10,000.		N/A	N/A	TUITION ASSISTANCE
THE FRANCISCAN CENTER 4643 GAYWOOD DR, PO BOX 10303 FORT WAYNE, IN 46851	35-1838772		36,000.		N/A	N/A	GENERAL OPERATING
WOMEN'S CARE CENTER 360 N NOTRE DAME AVENUE SOUTH BEND, IN 46617	35-1609945		25,000.		N/A	N/A	GENERAL OPERATING

TEEA4001L 06/19/14

Schedule I Cont (Form 990) 2014

2014

Continuation Page 2 of 2

Employer identification number

20-0924354

(Form 990), Part II.)

[illegible]

Schedule I Cont (Form 990) 2014

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 990-EZ or to provide any additional information.
▶ 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.

OMB No 1545 0047

2014

Open to Public
Inspection

Name of the organization

CHARLIE TIPPMANN FOUNDATION CHARITABLE
TRUST

Employer identification number

20-0924354

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

DENNIS TIPPMANN SR IS SPOUSE TO MARY TIPPMANN. DENNIS TIPPMANN JR AND CAMILLE GRABLE ARE CHILDREN TO DENNIS TIPPMANN SR AND MARY TIPPMANN.

WILLIAM SWIFT AND CRAIG FINLAYSON HAVE A BUSINESS RELATIONSHIP WITH DENNIS TIPPMANN JR AND CAMILLE GRABLE.

DENNIS TIPPMANN SR EMPLOYS DEB BRENNEMAN IN A SEPARATE LEGAL ENTITY.

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

DENNIS TIPPMANN, SR. MAY APPOINT TRUSTEES EACH YEAR OR HE MAY DESIGNATE A REPRESENTATIVE TO APPOINT THE TRUSTEES ANNUALLY.

THE MANAGING TRUSTEES SHALL BE ELECTED EACH YEAR BY THE MAJORITY VOTE OF THE THEN SERVING MANAGING TRUSTEES.

FORM 990, PART VI, LINE 9 - OFFICER, DIRECTOR, TRUSTEE, KEY EMPLOYEE MAILING ADDRESS

WILLIAM SWIFT AND CRAIG FINLAYSON

215 EAST BERRY STREET

FORT WAYNE, IN 46801

BILL SULLIVAN

943 POWERS ST

NEW HAVEN, IN 46774

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

EACH MEMBER OF THE BOARD WAS SENT A PDF COPY OF THE 990 PRIOR TO FILING.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

ALL DOCUMENTS ARE AVAILABLE UPON REQUEST TO THE ADDRESS OR PHONE NUMBER LISTED IN THE FOLLOWING QUESTION # 20.

**CHARLIE TIPPMANN FOUNDATION CHARITABLE TRUST
FIRST AMENDMENT OF AMENDED AND RESTATED TRUST AGREEMENT**

This FIRST AMENDMENT OF AMENDED AND RESTATED TRUST AGREEMENT ("Agreement") is made effective the 1st day of January, 2014, by Dennis J. Tippmann, Sr., Mary A. Tippmann, Dennis J. Tippmann, Jr., William D. Swift, Craig R. Finlayson, Camille M. Grable, Debra Brenneman, and Father Bill Sullivan, as trustees (collectively the "Trustees" and each a "Trustee") of the Charlie Tippmann Foundation Charitable Trust (the "Charitable Trust" or "Trust").

WITNESSETH

WHEREAS, Dennis J. Tippmann, Sr., as Settlor, created the Charitable Trust pursuant to an agreement dated March 8, 2004 (the "Trust Agreement");

WHEREAS, the Trust Agreement, as amended, was amended and restated on April 9, 2008, to restructure the Charitable Trust as a Type II Supporting Organization pursuant to the applicable federal statutes and regulations (the "Amended and Restated Trust Agreement").

WHEREAS, the Trustees desire to amend the Amended and Restated Trust Agreement pursuant to Section 7 of the same to provide for a designation of certain organizations described in Section 501(c)(3) and qualified under Section 509(a)(1) or 509(a)(2) of the Internal Revenue Code of 1986, as may be amended (the "Code"), to which the Charitable Trust shall hereafter provide support (the "Supported Organizations"), to provide for the distribution of trust income, and to provide for the appointment of Trustees.

NOW THEREFORE, the Amended and Restated Trust Agreement is hereby amended as follows:

1. Section 1.1 is hereby amended in its entirety to read as follows:

1.1 Purpose. This Trust is organized and shall be operated exclusively for charitable, religious and educational purposes by conducting and supporting activities for the benefit of, to perform the functions of, and/or to carry out the purposes (collectively, the "Qualified Purposes") of (a) churches and para-church entities qualifying as public charities with a presence within the Indiana counties of Adams, Allen, DeKalb, Elkhart, Huntington, Kosciusko, LaGrange, Marshall, Noble, Steuben, St. Joseph, Wabash, Wells, and Whitley which support, promote and/or perform Christian charity, evangelism, edification, and/or stewardship or the protection of the unborn as well as (b) the public charities specified on Schedule B, which is attached hereto and incorporated herein by reference (each such supported entity a "Qualified Organization" and collectively the "Supported Class"). Each Qualified Purpose must constitute a public charitable purpose under

State Law (defined below). Each Qualified Organization at all times shall be described in Section 501(c)(3) and be qualified as a tax-exempt organization under Section 509(a)(1) or 509(a)(2) of the Code.

2. Section 5.9 is hereby amended in its entirety to read as follows:

5.9 Election and Tenure of Trustees.

(a) Election and Tenure of Managing Trustees. Except as provided below, the Managing Trustees shall be elected each year at the annual meeting of Trustees and shall hold office until the annual meeting of Trustees next succeeding their election and thereafter until their respective successors have been duly elected and qualified. The Managing Trustees shall include individuals serving as an officer, director, and/or trustee of a church or para-church entity which qualifies as a public charity and which is located within the geographic area set forth in Section 1.01 and/or individuals serving as an officer, director, and/or trustee of an organization included in Schedule B attached hereto. The Managing Trustees shall be elected as follows:

- (i) by the majority vote of the then serving Managing Trustees; or
- (ii) if there is no Managing Trustee then serving, by the majority vote of the "Principally Supported Qualified Organizations" (defined below).

For purposes of this Agreement, the term "Principally Supported Qualified Organizations" shall mean those three (3) organizations within the Supported Class who have, during the five (5) calendar years immediately preceding the current year, received the largest aggregate awards from the Charitable Trust during such five (5) year period.

The individual or individuals then having the power to elect Managing Trustees under this Section 5.9 shall collectively be considered the "Appointor" for purposes of this Agreement. For so long as Dennis J. Tippmann, Sr. or at least one of his children is living, the Appointor shall consult with (but not be directed by) Dennis J. Tippmann, Sr. or, upon Dennis J. Tippmann, Sr.'s death, the then living adult children of Dennis J. Tippmann, Sr. as to the election of the Managing Trustees.

(b) Election and Tenure of Other Trustees. Except as provided below, the Other Trustees shall be elected each year at the annual meeting of Trustees, and shall hold office until the annual meeting of Trustees next succeeding their election and thereafter until their respective successors have been duly elected and qualified. The Other Trustees shall be elected as follows:

- (i) by Dennis J. Tippmann, Sr.; or
- (ii) after the death of Dennis J. Tippmann, Sr., by the majority action of the then living adult children of Dennis J. Tippmann, Sr.; or

(iii) after the deaths of Dennis J. Tippmann, Sr. and the children of Dennis J. Tippmann, Sr., by the majority vote of the Trustees then serving hereunder; or

(iii) after the deaths of Dennis J. Tippmann, Sr. and the children of Dennis J. Tippmann, Sr., and if there are no Trustees then serving hereunder, by the majority vote of the Principally Supported Qualified Organizations.

3. This Agreement may be executed in one or more counterparts, each of which will be deemed to be an original copy of this Agreement and all of which, when taken together, will be deemed to constitute one and the same agreement. The exchange of copies of this Agreement and of signature pages by email (.pdf) transmission shall constitute effective execution and delivery of this Agreement as to the Trustees and may be used in lieu of the original Agreement for all purposes. Signatures of the Trustees transmitted by email (.pdf) shall be deemed to be their original signatures for all purposes.

4. The foregoing First Amendment to the Amended and Restated Trust Agreement has been duly adopted by the Board of Trustees by unanimous written consent of the Trustees of the Trust, effective January 1, 2014, said written consent having been filed with the minutes of the Board and signed by each Trustee entitled to vote on such matter and the Chairman and Secretary of the Board.

[signature pages follow]

IN WITNESS WHEREOF, Dennis J. Tippmann, Sr., Mary A. Tippmann, Dennis J. Tippmann, Jr., William D. Swift, Craig R. Finlayson, Camille M. Grable, Debra Brenneman, and Father Bill Sullivan as Trustees, and Dennis J. Tippmann, Sr., as Chairman of the Board, and William D. Swift, as Secretary of the Board, have signed this Agreement effective as of the date set forth above.

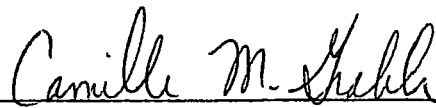
Dennis J. Tippmann Sr., Trustee and
Chairman of the Board

William D. Swift, Trustee and
Secretary of the Board

Mary A. Tippmann, Trustee

Dennis J. Tippmann, Jr., Trustee

Craig R. Finlayson, Trustee

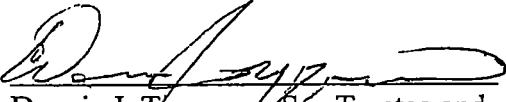


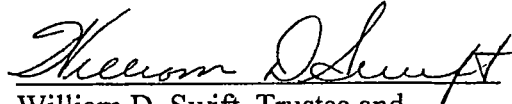
Camille M. Grable, Trustee

Debra Brenneman, Trustee

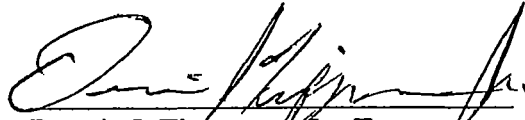
Father Bill Sullivan, Trustee

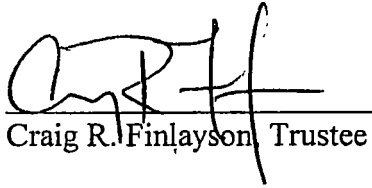
IN WITNESS WHEREOF, Dennis J. Tippmann, Sr., Mary A. Tippmann, Dennis J. Tippmann, Jr., William D. Swift, Craig R. Finlayson, Camille M. Grable, Debra Brenneman, and Father Bill Sullivan as Trustees, and Dennis J. Tippmann, Sr., as Chairman of the Board, and William D. Swift, as Secretary of the Board, have signed this Agreement effective as of the date set forth above.


Dennis J. Tippmann Sr., Trustee and
Chairman of the Board

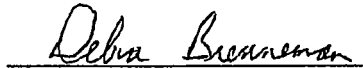

William D. Swift, Trustee and
Secretary of the Board

Mary A. Tippmann, Trustee


Dennis J. Tippmann, Jr., Trustee


Craig R. Finlayson, Trustee

Camille M. Grable, Trustee

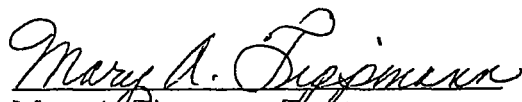

Debra Brenneman, Trustee

Father Bill Sullivan, Trustee

IN WITNESS WHEREOF, Dennis J. Tippmann, Sr., Mary A. Tippmann, Dennis J. Tippmann, Jr., William D. Swift, Craig R. Finlayson, Camille M. Grable, Debra Brenneman, and Father Bill Sullivan as Trustees, and Dennis J. Tippmann, Sr., as Chairman of the Board, and William D. Swift, as Secretary of the Board, have signed this Agreement effective as of the date set forth above.


Dennis J. Tippmann Sr., Trustee and
Chairman of the Board

William D. Swift, Trustee and
Secretary of the Board

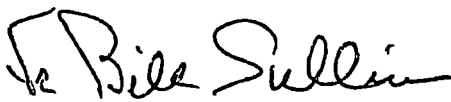

Mary A. Tippmann, Trustee

Dennis J. Tippmann, Jr., Trustee

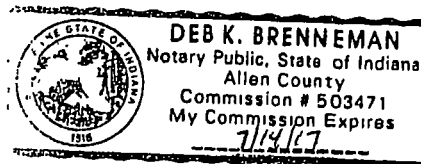
Craig R. Finlayson, Trustee

Camille M. Grable, Trustee

Debra Brenneman, Trustee


Father Bill Sullivan, Trustee

STATE OF INDIANA)
) SS:
COUNTY OF Allen)



Before me, the undersigned, a Notary Public in and for said County and State, this 16th day of December, 2014, personally appeared Dennis J. Tippmann, Sr., as Trustee and Chairman of the Board, to me personally known to be the person who executed the foregoing First Amendment of Amended and Restated Trust Agreement, and acknowledged his execution thereof as his voluntary act and deed for the uses and purposes therein stated.

WITNESS my hand and notarial seal.

Deb K Brenneman

Deb K Brenneman, Notary Public
Resident of Allen County, Indiana

My Commission Expires: 07/14/2017

STATE OF INDIANA)
) SS:
COUNTY OF Allen)

Before me, the undersigned, a Notary Public in and for said County and State, this 12th day of December, 2014, personally appeared William D. Swift, as Trustee and Secretary of the Board, to me personally known to be the person who executed the foregoing First Amendment of Amended and Restated Trust Agreement, and acknowledged his execution thereof as his voluntary act and deed for the uses and purposes therein stated.

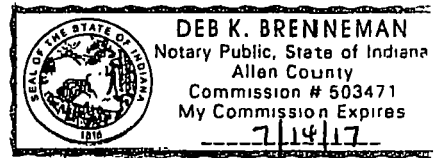
WITNESS my hand and notarial seal.

Wm D Swift

Wm D Swift, Notary Public
Resident of Allen County, Indiana

My Commission Expires: 8/27/2015

STATE OF INDIANA)
) SS:
COUNTY OF Allen)



Before me, the undersigned, a Notary Public in and for said County and State, this 16th day of December, 2014, personally appeared Mary A. Tippmann, as Trustee, to me personally known to be the person who executed the foregoing First Amendment of Amended and Restated Trust Agreement, and acknowledged her execution thereof as her voluntary act and deed for the uses and purposes therein stated.

WITNESS my hand and notarial seal.

Deb K Brenneman
Deb K Brenneman, Notary Public
Resident of Allen County, Indiana

My Commission Expires: 07/14/2017

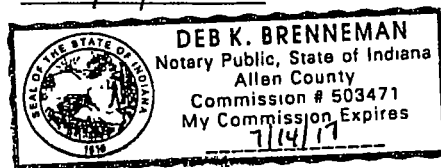
STATE OF INDIANA)
) SS:
COUNTY OF Allen)

Before me, the undersigned, a Notary Public in and for said County and State, this 16th day of December, 2014, personally appeared Dennis J. Tippmann, Jr., as Trustee, to me personally known to be the person who executed the foregoing First Amendment of Amended and Restated Trust Agreement, and acknowledged his execution thereof as his voluntary act and deed for the uses and purposes therein stated.

WITNESS my hand and notarial seal.

Deb K Brenneman
Deb K Brenneman, Notary Public
Resident of Allen County, Indiana

My Commission Expires: 07/14/2017



STATE OF INDIANA)
) SS:
COUNTY OF Allen)

Before me, the undersigned, a Notary Public in and for said County and State, this 12th day of December, 2014, personally appeared Craig R. Finlayson, as Trustee, to me personally known to be the person who executed the foregoing First Amendment of Amended and Restated Trust Agreement, and acknowledged his execution thereof as his voluntary act and deed for the uses and purposes therein stated.

WITNESS my hand and notarial seal.

Tammy S. Killian
Tammy S. Killian, Notary Public
Resident of Allen County, Indiana

My Commission Expires: 8/27/2015

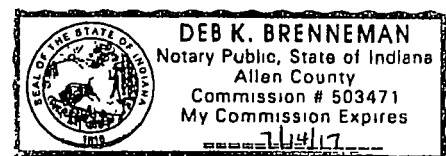
STATE OF INDIANA)
) SS:
COUNTY OF Allen)

Before me, the undersigned, a Notary Public in and for said County and State, this 18th day of December, 2014, personally appeared Camille M. Grable, as Trustee, to me personally known to be the person who executed the foregoing First Amendment of Amended and Restated Trust Agreement, and acknowledged her execution thereof as her voluntary act and deed for the uses and purposes therein stated.

WITNESS my hand and notarial seal.

Deb K Brenneman
Deb K Brenneman, Notary Public
Resident of Allen County, Indiana

My Commission Expires: 07/14/2017



STATE OF INDIANA)
) SS:
COUNTY OF Allen)

Before me, the undersigned, a Notary Public in and for said County and State, this 17th day of December, 2014, personally appeared Debra Brenneman, as Trustee, to me personally known to be the person who executed the foregoing First Amendment of Amended and Restated Trust Agreement, and acknowledged her execution thereof as her voluntary act and deed for the uses and purposes therein stated.

WITNESS my hand and notarial seal.

Kelli Johnson
Kelli Johnson, Notary Public
Resident of Allen County, Indiana

My Commission Expires: August 29, 2020

STATE OF INDIANA)
) SS:
COUNTY OF Allen)

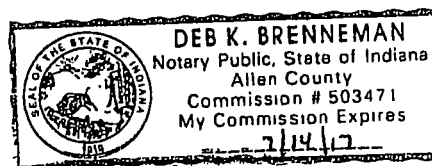


Before me, the undersigned, a Notary Public in and for said County and State, this 17th day of December, 2014, personally appeared Father Bill Sullivan, as Trustee, to me personally known to be the person who executed the foregoing First Amendment of Amended and Restated Trust Agreement, and acknowledged his execution thereof as his voluntary act and deed for the uses and purposes therein stated.

WITNESS my hand and notarial seal.

Deb K Brenneman
Deb K Brenneman, Notary Public
Resident of Allen County, Indiana

My Commission Expires: 07/14/2017



Schedule B

- 1) Catholic Relief Services – USCCB, located at 228 West Lexington Street in Baltimore, Maryland.
- 2) International Healing Foundation, with a mailing address of P.O. Box 901, Bowie, MD 20718-0901.
- 3) Fort Wayne Ballet Inc., located at 300 East Main Street in Fort Wayne, Indiana.
- 4) New Beginnings Outreach Ministries, located at 2266 Wakefield Mound Road in Idaho, Ohio.
- 5) New Song Mission, with a mailing address of P.O. Box 488, Nashville, IN 47448.
- 6) St Labre Indian School, with a mailing address of P.O. Box 797, Ashland, MT 59003.
- 7) Mission of Hope Haiti, with a mailing address of P.O. Box 171500, Austin, TX 78717.
- 8) International Catholic Migration Com., located at 14 Beacon Street, Suite 502 in Boston, Massachusetts.
- 9) The Marist Brothers, Inc., located at 4200 W 115th St in Chicago, Illinois.
- 10) Food for the Poor, located at 6401 Lyons Road in Coconut Creek, Florida.
- 11) Christian Appalachian Project, located at 2610 Palumbo Drive in Lexington, Kentucky.
- 12) Bishop Gassis Sudan Relief Fund Inc., with a mailing address of P.O. Box 7084, Merrifield, VA 22116.
- 13) Hanna's House, located at 320 West 4th Street in Mishawaka, Indiana.
- 14) Catholic Medical Mission Board, located at 10 West 17th Street in New York, New York.
- 15) Alaska Radio Mission KNOM, with a mailing address of P.O. Box 988, Nome, AK 99762.
- 16) LCMS National Housing, located at 1333 South Kirkwood Road in St Louis, Missouri.
- 17) Muscular Dystrophy Association, located at 3300 East Sunrise Drive in Tucson, Arizona.
- 18) Americans United for Life, located at 655 15th Street, NW, Suite 410, in Washington, DC.

- 19) Fort Wayne Habitat for Community, located at 2020 E Washington Blvd. in Fort Wayne, Indiana.
- 20) James McFadden Resource Center, located at 4527 Shenandoah Circle in Fort Wayne, Indiana.
- 21) Super Shot Inc., located at 709 Clay St, Suite 300, in Fort Wayne, Indiana.
- 22) Turnstone, located at 3320 North Clinton St in Fort Wayne, Indiana.
- 23) Allen County Jail Chaplaincy, located at 417 S Calhoun St in Fort Wayne, Indiana.
- 24) Boys & Girls Club, located at 2609 Fairfield Avenue in Fort Wayne, Indiana.
- 25) Community Transportation Network, located at 5601 Industrial Road in Fort Wayne, Indiana.
- 26) Crime Victim Care, located at 2456 Lake Avenue in Fort Wayne, Indiana.
- 27) Erin's House, located at 5670 YMCA Park Drive West in Fort Wayne, Indiana.
- 28) Genesis Outreach Inc., located at 2605 Gay Street in Fort Wayne, Indiana.
- 29) Interfaith Hospitality, located at 2925 E State Blvd. in Fort Wayne, Indiana.
- 30) Matthew 25 Health & Dental Clinic, located at 413 E Jefferson Blvd. in Fort Wayne, Indiana.
- 31) Redeemer Radio, located at 4618 E State Blvd, Suite 200, in Fort Wayne, Indiana.
- 32) Remedy FM/Soul Medic Media, located at 6429 Oakbrook Parkway in Fort Wayne, Indiana.
- 33) SCAN, located at 500 West Main St. in Fort Wayne, Indiana.
- 34) St Vincent DePaul Store, located at 1600 S Calhoun in Fort Wayne, Indiana.
- 35) The Franciscan Center, with a mailing address of PO Box 10303, Fort Wayne, IN 46851.
- 36) Vincent Village Inc., located at 2827 Holton Avenue in Fort Wayne, Indiana.
- 37) Women's Care Center, with a mailing address of PO Box 12966, Fort Wayne, IN 46866.
- 38) YMCA, located at 1020 Barr Street in Fort Wayne, Indiana.

**CHARLIE TIPPMANN FOUNDATION CHARITABLE TRUST
FIRST AMENDMENT OF AMENDED AND RESTATED BY-LAWS**

The Charlie Tippmann Foundation Charitable Trust First Amendment and First Restatement of By-Laws (the "By-Laws") are hereby amended as follows:

1. The first paragraph of the By-Laws is hereby amended and restated in its entirety to read as follows:

The Charlie Tippmann Foundation, the charitable trust created by written agreement dated March 8, 2004, as amended and restated in its entirety on April 9, 2008, and as amended on January 1, 2014 (the "Charitable Trust" or "Trust"), is organized and shall be operated exclusively for charitable, religious and educational purposes by conducting and supporting activities for the benefit of, to perform the functions of, and/or to carry out the purposes (collectively, the "Qualified Purposes") of (a) churches and para-church entities qualifying as public charities with a presence within the Indiana counties of Adams, Allen, DeKalb, Elkhart, Huntington, Kosciusko, LaGrange, Marshall, Noble, Steuben, St. Joseph, Wabash, Wells, and Whitley which support, promote and/or perform Christian charity, evangelism, edification, and/or stewardship or the protection of the unborn as well as (b) the public charities specified on Schedule B, which is attached hereto and incorporated herein by reference (each such supported entity a "Qualified Organization" and collectively the "Supported Class"). Each Qualified Purpose must constitute a public charitable purpose under State Law (defined below). Each Qualified Organization at all times shall be described in Section 501(c)(3) and be qualified as a tax-exempt organization under Section 509(a)(1) or 509(a)(2) of the Code.

2. Section 1.5 of the By-Laws is hereby amended and restated in its entirety to read as follows:

1.5 Election and Tenure of Trustees.

(a) Election and Tenure of Managing Trustees. Except as provided below, the Managing Trustees shall be elected each year at the annual meeting of Trustees and shall hold office until the annual meeting of Trustees next succeeding their election and thereafter until their respective successors have been duly elected and qualified. The Managing Trustees shall include individuals serving as an officer, director, and/or trustee of a church or para-church entity which qualifies as a public charity and which is located within the geographic area set forth in the first paragraph of these By-Laws and/or individuals serving as an officer, director, and/or trustee of an organization included in Schedule B attached hereto. The Managing Trustees shall be elected as follows:

- (i) by the majority vote of the then serving Managing Trustees; or
- (ii) if there is no Managing Trustee then serving, by the majority vote of the "Principally Supported Qualified Organizations" (defined below).

For purposes of these By-Laws, the term "Principally Supported Qualified Organizations" shall mean those three (3) organizations within the Supported Class who have, during the five (5) calendar years immediately preceding the current year, received the largest aggregate awards from the Charitable Trust during such five (5) year period.

The individual or individuals then having the power to elect Managing Trustees under this Section 1.5 shall collectively be considered the "Appointor" for purposes of this Agreement. For so long as Dennis J. Tippmann, Sr. or at least one of his children is living, the Appointor shall consult with (but not be directed by) Dennis J. Tippmann, Sr. or, upon Dennis J. Tippmann, Sr.'s death, the then living adult children of Dennis J. Tippmann, Sr. as to the election of the Managing Trustees.

(b) Election and Tenure of Other Trustees. Except as provided below, the Other Trustees shall be elected each year at the annual meeting of Trustees, and shall hold office until the annual meeting of Trustees next succeeding their election and thereafter until their respective successors have been duly elected and qualified. The Other Trustees shall be elected as follows:

- (i) by Dennis J. Tippmann, Sr.; or
- (ii) after the death of Dennis J. Tippmann, Sr., by the majority action of the then living adult children of Dennis J. Tippmann, Sr.; or
- (iii) after the deaths of Dennis J. Tippmann, Sr. and the children of Dennis J. Tippmann, Sr., by the majority vote of the Trustees then serving hereunder; or
- (iii) after the deaths of Dennis J. Tippmann, Sr. and the children of Dennis J. Tippmann, Sr., and if there are no Trustees then serving hereunder, by the majority vote of the Principally Supported Qualified Organizations.

3. Section 6.5 of the By-Laws is hereby amended and restated in its entirety to read as follows:

6.5 Definition of Independent. The individuals elected as Managing Trustees hereunder shall be independent. The term "independent," in regard to a person or an entity as may be applicable in these By-Laws, shall mean any person or entity other than Dennis J. Tippmann, Sr. who or which is not a "Disqualified Person" as defined in Code Section 4946(a), a "Related or Subordinate Party" who is subservient to the wishes of Dennis J. Tippmann, Sr. as defined by Code Section 672(c), an individual otherwise qualifying as independent but for Dennis J. Tippmann, Sr.'s position of influence over that individual's decisions, or as may be otherwise described in the Code and applicable regulations.

4. The foregoing First Amendment to the Amended and Restated By-Laws of the Trust has been duly adopted by the Board of Directors by unanimous written consent of the Trustees of the Trust, effective January 1, 2014, said written consent having been filed with the minutes of the Board and signed by each Trustee entitled to vote on such matter.

By: William D. Swift
William D. Swift, Secretary

Schedule B

- 1) Catholic Relief Services – USCCB, located at 228 West Lexington Street in Baltimore, Maryland.
- 2) International Healing Foundation, with a mailing address of P.O. Box 901, Bowie, MD 20718-0901.
- 3) Fort Wayne Ballet Inc., located at 300 East Main Street in Fort Wayne, Indiana.
- 4) New Beginnings Outreach Ministries, located at 2266 Wakefield Mound Road in Idaho, Ohio.
- 5) New Song Mission, with a mailing address of P.O. Box 488, Nashville, IN 47448.
- 6) St Labre Indian School, with a mailing address of P.O. Box 797, Ashland, MT 59003.
- 7) Mission of Hope Haiti, with a mailing address of P.O. Box 171500, Austin, TX 78717.
- 8) International Catholic Migration Com., located at 14 Beacon Street, Suite 502 in Boston, Massachusetts.
- 9) The Marist Brothers, Inc., located at 4200 W 115th St in Chicago, Illinois.
- 10) Food for the Poor, located at 6401 Lyons Road in Coconut Creek, Florida.
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- 13) Hanna's House, located at 320 West 4th Street in Mishawaka, Indiana.
- 14) Catholic Medical Mission Board, located at 10 West 17th Street in New York, New York.
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- 17) Muscular Dystrophy Association, located at 3300 East Sunrise Drive in Tucson, Arizona.
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- 32) Remedy FM/Soul Medic Media, located at 6429 Oakbrook Parkway in Fort Wayne, Indiana.
- 33) SCAN, located at 500 West Main St. in Fort Wayne, Indiana.
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- 35) The Franciscan Center, with a mailing address of PO Box 10303, Fort Wayne, IN 46851.
- 36) Vincent Village Inc., located at 2827 Holton Avenue in Fort Wayne, Indiana.
- 37) Women's Care Center, with a mailing address of PO Box 12966, Fort Wayne, IN 46866.
- 38) YMCA, located at 1020 Barr Street in Fort Wayne, Indiana.

WRITTEN CONSENT TO RESOLUTIONS
OF THE TRUSTEES OF THE
CHARLIE TIPPMMANN FOUNDATION CHARITABLE TRUST

The undersigned, being the all of the Trustees of the Charlie Tippmann Foundation Charitable Trust, a trust domiciled in the State of Indiana (the "Trust"), under the provisions of Section 7.1 of the Charlie Tippmann Foundation Charitable Trust First Amendment and First Restatement of Trust Agreement and Sections 2.9 and 6.4 of the Charlie Tippmann Foundation Charitable Trust First Amendment and First Restatement of By-Laws, hereby consent to the following action to be taken by the Trust:

I.

Adoption of First Amendment of Amended and Restated Trust Agreement

BE IT RESOLVED, that the undersigned Trustees hereby adopt the First Amendment of Amended and Restated Trust Agreement (a copy of which was reviewed by the undersigned Trustees prior to signing these written consent resolutions).

BE IT FURTHER RESOLVED, that Dennis J. Tippmann, Sr., as Chairman of the Board of the Trust, and William D. Swift, as Secretary of the Trust, are hereby authorized to execute such First Amendment of Amended and Restated Trust Agreement, and are authorized to take any and all actions necessary, advisable or desirable to fully effectuate these resolutions.

BE IT FURTHER RESOLVED, that a copy of the First Amendment of Amended and Restated Trust Agreement be made a part of the Minutes Book of the Trust and be placed therein immediately following the Charlie Tippmann Foundation Charitable Trust First Amendment and First Restatement of Trust Agreement.

II.

Adoption of First Amendment of Amended and Restated By-Laws

BE IT RESOLVED, that the undersigned Trustees hereby adopt the First Amendment of Amended and Restated By-Laws (a copy of which was reviewed by the undersigned Trustees prior to signing these written consent resolutions).

BE IT FURTHER RESOLVED, that William D. Swift, as Secretary of the Trust, is hereby authorized to execute such First Amendment of Amended and Restated By-Laws, and is authorized to take any and all actions necessary, advisable or desirable to fully effectuate these resolutions.

BE IT FURTHER RESOLVED, that a copy of the First Amendment of Amended and Restated By-Laws of the Trust be made a part of the Minutes Book

of the Trust and be placed therein immediately following the Charlie Tippmann Foundation Charitable Trust First Amendment and First Restatement of By-Laws.

III.

Placement of Resolutions in Corporate Record Book

BE IT RESOLVED, that this consent shall be in lieu of a special meeting of the Trustees of the Trust and shall be filed in the record book of the Trust with the minutes of the Board of Trustees' meetings.

IV.

Approval of Other Actions

BE IT RESOLVED, that all and every act of the Trustees and the Officers of the Trust which have not been previously ratified, approved and confirmed are hereby ratified, approved and confirmed in all things through and including the date of these written consent resolutions.

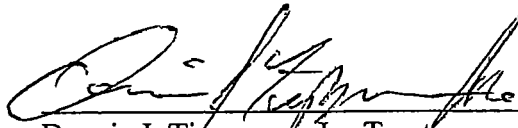
[signature page follows]

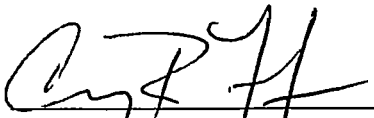
EXECUTED by the Trustees effective as the 1st day of January, 2014.


Dennis J. Tippmann Sr., Trustee and
Chairman of the Board

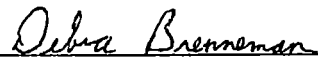

William D. Swift, Trustee and
Secretary of the Board

Mary A. Tippmann, Trustee


Dennis J. Tippmann, Jr., Trustee


Craig R. Finlayson, Trustee

Camille M. Grable, Trustee


Debra Brenneman, Trustee

Father Bill Sullivan, Trustee

EXECUTED by the Trustees effective as the 1st day of January, 2014.



Dennis J. Tippmann Sr., Trustee and
Chairman of the Board

William D. Swift, Trustee and
Secretary of the Board


Mary A. Tippmann, Trustee

Dennis J. Tippmann, Jr., Trustee

Craig R. Finlayson, Trustee

Camille M. Grable, Trustee

Debra Brenneman, Trustee


Father Bill Sullivan, Trustee

EXECUTED by the Trustees effective as the 1st day of January, 2014.

Dennis J. Tippmann Sr., Trustee and
Chairman of the Board

William D. Swift, Trustee and
Secretary of the Board

Mary A. Tippmann, Trustee

Dennis J. Tippmann, Jr., Trustee

Craig R. Finlayson, Trustee



Camille M. Grable, Trustee

Debra Brenneman, Trustee

Father Bill Sullivan, Trustee