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Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf)

OMB No 1545-0052

**2015**

Open to Public Inspection

For calendar year 2015 or tax year beginning

, 2015, and ending

, 20

Name of foundation

KAMINSKI SYLVESTER &amp; TESSIE FDN 480051010

Number and street (or P.O. box number if mail is not delivered to street address)

Room/suite

P.O. BOX 1602

City or town, state or province, country, and ZIP or foreign postal code

SOUTH BEND, IN 46634

G Check all that apply.

Initial return

Initial return of a former public charity

Final return

Amended return

Address change

Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundationI Fair market value of all assets at  
end of year (from Part II, col. (c), line  
16) ▶ \$ 798,443.J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify)

(Part I, column (d) must be on cash basis.)

A Employer identification number

23-7355916

B Telephone number (see instructions)

574-235-2793

C If exemption application is  
pending, check here . . . . . ▶ ☐D 1. Foreign organizations, check here . . ▶ ☐2. Foreign organizations meeting the  
85% test, check here and attach  
computation . . . . . ▶ ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here . ▶ ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here . ▶ ☐**Part I Analysis of Revenue and Expenses** (The  
total of amounts in columns (b), (c), and (d)  
may not necessarily equal the amounts in  
column (a) (see instructions))(a) Revenue and  
expenses per  
books(b) Net investment  
income(c) Adjusted net  
income(d) Disbursements  
for charitable  
purposes  
(cash basis only)

Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B. . . . .				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities . . . . .	15,866.	15,866.	15,866.	STMT 1
	5a	Gross rents . . . . .				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	11,998.			
	b	Gross sales price for all assets on line 6a 224,981				
	7	Capital gain net income (from Part IV, line 2)		11,998.		
	8	Net short-term capital gain . . . . .				
	9	Income modifications . . . . .				
	10a	Gross sales less returns and allowances . . . . .				
b	Less Cost of goods sold . . . . .					
c	Gross profit or (loss) (attach schedule) . . . . .					
11	Other income (attach schedule) . . . . .					
12	Total. Add lines 1 through 11 . . . . .	27,864.	27,864.	15,866.		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc . . . . .	8,328.	8,328.		
	14	Other employee salaries and wages . . . . .				
	15	Pension plans, employee benefits . . . . .				
	16a	Legal fees (attach schedule) . . . . .				
	b	Accounting fees (attach schedule) STMT. 2 . . . . .	1,500.	1,500.	NONE	NONE
	c	Other professional fees (attach schedule) . . . . .				
	17	Interest . . . . .				
	18	Taxes (attach schedule) (see instructions) STMT. 3 . . . . .	2,549.			
	19	Depreciation (attach schedule) and depletion . . . . .				
	20	Occupancy . . . . .				
	21	Travel, conferences, and meetings . . . . .				
	22	Printing and publications . . . . .				
	23	Other expenses (attach schedule) STMT. 4 . . . . .	8,828.			
	24	Total operating and administrative expenses. Add lines 13 through 23. . . . .	21,205.	9,828.	NONE	NONE
	25	Contributions, gifts, grants paid . . . . .	38,150.			38,150.
26	Total expenses and disbursements Add lines 24 and 25	59,355.	9,828.	NONE	38,150.	
27	Subtract line 26 from line 12.					
a	Excess of revenue over expenses and disbursements . . . . .	-31,491.				
b	Net investment income (if negative, enter -0-) . . . . .		18,036.			
c	Adjusted net income (if negative, enter -0-) . . . . .			15,866.		

JSA For Paperwork Reduction Act Notice, see instructions.

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .			
	3	Accounts receivable ▶ . . . . .			
		Less: allowance for doubtful accounts ▶ . . . . .			
	4	Pledges receivable ▶ . . . . .			
		Less: allowance for doubtful accounts ▶ . . . . .			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ . . . . .			
		Less: allowance for doubtful accounts ▶ . . . . .			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments - U.S. and state government obligations (attach schedule) . . . . .			
	b	Investments - corporate stock (attach schedule) . <b>STMT 5</b> . . . . .	350,560.	343,371.	406,741.
	c	Investments - corporate bonds (attach schedule) . <b>STMT 6</b> . . . . .	417,131.	397,081.	391,702.
	Liabilities	11	Investments - land, buildings, and equipment basis ▶ . . . . .		
		Less: accumulated depreciation ▶ (attach schedule) . . . . .			
12		Investments - mortgage loans . . . . .			
13		Investments - other (attach schedule) . . . . . <b>STMT 7</b> . . . . .	4,352.		
14		Land, buildings, and equipment basis ▶ . . . . .			
		Less: accumulated depreciation ▶ (attach schedule) . . . . .			
15		Other assets (describe ▶ . . . . .)			
16		<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .	772,043.	740,452.	798,443.
17		Accounts payable and accrued expenses . . . . .			
18		Grants payable . . . . .			
Net Assets or Fund Balances	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons . . . . .			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ . . . . .)			
23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		NONE		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .	772,043.	740,452.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .			
	29	Retained earnings, accumulated income, endowment, or other funds . . . . .			
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	772,043.	740,452.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	772,043.	740,452.		

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	772,043.
2	Enter amount from Part I, line 27a . . . . .	2	-31,491.
3	Other increases not included in line 2 (itemize) ▶ <b>SEE STATEMENT 8</b> . . . . .	3	526.
4	Add lines 1, 2, and 3 . . . . .	4	741,078.
5	Decreases not included in line 2 (itemize) ▶ <b>SEE STATEMENT 9</b> . . . . .	5	626.
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . . .	6	740,452.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a PUBLICLY TRADED SECURITIES</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
<b>a</b> 224,981.		212,983.	11,998.		
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0- or Losses (from col. (h)))		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
<b>a</b>			11,998.		
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2</b> Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			<b>2</b>	11,998.	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 . . . . . }			<b>3</b>		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	41,151.	842,719.	0.048831
2013	36,531.	818,379.	0.044638
2012	41,506.	775,376.	0.053530
2011	51,213.	793,541.	0.064537
2010	60,181.	802,314.	0.075009
<b>2</b> Total of line 1, column (d) . . . . .			<b>2</b> 0.286545
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .			<b>3</b> 0.057309
<b>4</b> Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 . . . . .			<b>4</b> 811,283.
<b>5</b> Multiply line 4 by line 3 . . . . .			<b>5</b> 46,494.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			<b>6</b> 180.
<b>7</b> Add lines 5 and 6 . . . . .			<b>7</b> 46,674.
<b>8</b> Enter qualifying distributions from Part XII, line 4 . . . . . If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			<b>8</b> 38,150.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . . Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		1	361.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .		2	
3 Add lines 1 and 2 . . . . .		3	361.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .		4	NONE
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	361.
6 Credits/Payments			
a 2015 estimated tax payments and 2014 overpayment credited to 2015 . . . . .	6a	2,085.	
b Exempt foreign organizations - tax withheld at source . . . . .	6b	NONE	
c Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	NONE	
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d . . . . .	7	2,085.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .	10	1,724.	
11 Enter the amount of line 10 to be Credited to 2016 estimated tax <input type="checkbox"/> 1,724. Refunded <input type="checkbox"/> . . . . .	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year? . . . . .		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> . . . . .		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation . . . . .	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		X

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**Part VII-A Statements Regarding Activities (continued)**

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) . . . . .		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	X	
14 The books are in care of ► 1ST SOURCE BANK Telephone no ► (574) 235-2793 Located at ► 100 N MICHIGAN, SOUTH BEND, IN ZIP+4 ► 46601		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► 15		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . . (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . . (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . . (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here . . . . . ►		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? . . . . .		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) . . . . .		X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) . . . . .		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?		X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ **5b**

Organizations relying on a current notice regarding disaster assistance check here ☐

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **6b** ☒

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		8,328.		

**2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

**Total number of other employees paid over \$50,000** ☐ **NONE**

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
<b>Total number of others receiving over \$50,000 for professional services . . . . .</b>	<b>▶</b>	NONE

## Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>NONE</u>	
2	
3	
4	

<b>Part IX-B</b>	<b>Summary of Program-Related Investments</b> (see instructions)
------------------	--

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
<b>1</b> <u>NONE</u>		
<b>2</b>		
All other program-related investments See instructions		
<b>3</b> <u>NONE</u>		
<b>Total.</b> Add lines 1 through 3 . . . . .		

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	823,638.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	NONE
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	NONE
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	823,638.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	NONE
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	823,638.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	12,355.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	811,283.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	40,564.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	40,564.
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5 . . . . .	<b>2a</b>	361.
<b>b</b>	Income tax for 2015. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	361.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	40,203.
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	NONE
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	40,203.
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	NONE
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	40,203.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	38,150.
<b>b</b>	Program-related investments - total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	NONE
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	NONE
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	NONE
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	38,150.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) . . . . .	<b>5</b>	N/A
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	38,150.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
<b>1</b> Distributable amount for 2015 from Part XI, line 7 . . . . .				40,203.
<b>2</b> Undistributed income, if any, as of the end of 2015				
<b>a</b> Enter amount for 2014 only. . . . .			NONE	
<b>b</b> Total for prior years 20 <u>13</u> , 20 <u>  </u> , 20 <u>  </u> . . . . .		NONE		
<b>3</b> Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010 . . . . .	20,273.			
<b>b</b> From 2011 . . . . .	13,112.			
<b>c</b> From 2012 . . . . .	3,387.			
<b>d</b> From 2013 . . . . .	NONE			
<b>e</b> From 2014 . . . . .	710.			
<b>f</b> Total of lines 3a through e . . . . .	37,482.			
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ <u>38,150.</u>				
<b>a</b> Applied to 2014, but not more than line 2a . . . . .			NONE	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions) . . . . .		NONE		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .	NONE			
<b>d</b> Applied to 2015 distributable amount. . . . .				38,150.
<b>e</b> Remaining amount distributed out of corpus. . . . .	NONE			
<b>5</b> Excess distributions carryover applied to 2015 . (If an amount appears in column (d), the same amount must be shown in column (a) )	2,053.			2,053.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e. Subtract line 5	35,429.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		NONE		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .		NONE		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions . . . . .		NONE		
<b>e</b> Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .			NONE	
<b>f</b> Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016. . . . .				NONE
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .	NONE			
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) . . . . .	18,220.			
<b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	17,209.			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2011 . . . . .	13,112.			
<b>b</b> Excess from 2012 . . . . .	3,387.			
<b>c</b> Excess from 2013 . . . . .	NONE			
<b>d</b> Excess from 2014 . . . . .	710.			
<b>e</b> Excess from 2015 . . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

NOT APPLICABLE

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling . . . . .

**b** Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

Tax year	Prior 3 years				(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test - enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test - enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> Gross investment income . . . . .					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

N/A

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

N/A

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

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

N/A

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

N/A

**c** Any submission deadlines:

N/A

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

N/A

**Part XV** Supplementary Information *(continued)***3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
SEE STATEMENT 29				38,150.
<b>Total</b> . . . . .			<b>3a</b>	38,150.
<b>b</b> Approved for future payment				
<b>Total</b> . . . . .			<b>3b</b>	



**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
<b>1</b>	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash . . . . .	<b>1a(1)</b>	X
	(2) Other assets . . . . .	<b>1a(2)</b>	X
<b>b</b>	Other transactions.		
	(1) Sales of assets to a noncharitable exempt organization . . . . .	<b>1b(1)</b>	X
	(2) Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>	X
	(3) Rental of facilities, equipment, or other assets . . . . .	<b>1b(3)</b>	X
	(4) Reimbursement arrangements . . . . .	<b>1b(4)</b>	X
	(5) Loans or loan guarantees . . . . .	<b>1b(5)</b>	X
	(6) Performance of services or membership or fundraising solicitations . . . . .	<b>1b(6)</b>	X
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .	<b>1c</b>	X
<b>d</b>	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		



[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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 taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**  AVP | 8/2/16  AVP

Signature of officer or trustee \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

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

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no	

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

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
-----	-----	-----	-----
BLACKROCK STRAT INC OPP-INS	927.	927.	927.
FEDERATED INST HI YLD BOND FUND	426.	426.	426.
FIDELITY CONTRA FUND #022	279.	279.	279.
ISHARES MSCI EAFE ETF	1,211.	1,211.	1,211.
METROPOLITAN WEST TOTAL RETURN BD-I	4,943.	4,943.	4,943.
FEDERATED TREASURY OBLIGA-SS	1.	1.	1.
MORGAN STANLEY INSTL INTL EQ	245.	245.	245.
NEW WORLD FUND-F2	138.	138.	138.
BOSTON PARTNERS INV ALL CAP VAL INST	2,475.	2,475.	2,475.
T. ROWE PRICE MID-CAP GROWTH FUND	166.	166.	166.
TEMPLETON GLOBAL BOND FUND-AD	968.	968.	968.
VANGUARD S/T INVEST GR-ADM	1,539.	1,539.	1,539.
VANGUARD 500 INDEX FUND-ADM	1,569.	1,569.	1,569.
WASATCH-1ST SOURCE INCOME FU	979.	979.	979.
	-----	-----	-----
TOTAL	15,866.	15,866.	15,866.
	=====	=====	=====

## FORM 990PF, PART I - ACCOUNTING FEES

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



## FORM 990PF, PART I - TAXES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
FOREIGN TAXES	140.
FEDERAL TAX PAYMENT - PRIOR YE	409.
FEDERAL ESTIMATES - PRINCIPAL	2,000.
	-----
TOTALS	2,549.
	=====

## FORM 990PF, PART I - OTHER EXPENSES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
OTHER EXPENSES	8,828.
	-----
TOTALS	8,828.
	=====

KAMINSKI SYLVESTER & TESSIE FDN 480051010

23-7355916

FORM 990PF, PART II - CORPORATE STOCK  
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ----
VANGUARD EMERGING MARKETS		
FIDELITY CONTRA #022	68,588.	92,594.
ISHARES MSCI EAFE INDEX FD	41,707.	44,627.
NEW WORLD FUND	13,162.	13,772.
ROBECO BP A/CAP VALUE		
T ROWE PRICE MID CAP GROWTH	33,679.	41,707.
VIRTUS EMERGING MKTS OPPOR		
WASATCH LONG SHORT FUND		
BOSTON PARTNERS INV ALL CAP VA	94,695.	122,082.
MS INS INTL EQ	12,500.	12,272.
VANGUARD 500 INDEX FUND-ADM	77,485.	78,132.
FED TREASURY OBLIGA-SS	1,555.	1,555.
	-----	-----
TOTALS	343,371.	406,741.
	=====	=====

KAMINSKI SYLVESTER & TESSIE FDN 480051010

23-7355916

FORM 990PF, PART II - CORPORATE BONDS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
FED INST HI YLD BOND FUND	18,500.	17,250.
BLACKROCK STRAT INC	31,867.	30,293.
METROPOLITAN WEST TR BOND	149,526.	150,647.
TEMPLETON GLOBAL BOND	8,463.	7,602.
VANGUARD SHORT TERM CORP #39		
WASATCH INCOME FUND	106,526.	105,010.
VANGUARD S/T INVEST GR-ADM	82,199.	80,900.
WASATCH-1ST SRCE INC FUND		
	-----	-----
TOTALS	397,081.	391,702.
	=====	=====

KAMINSKI SYLVESTER & TESSIE FDN 480051010

23-7355916

FORM 990PF, PART II - OTHER INVESTMENTS  
=====

COST/  
FMV  
C OR F  
-----

DESCRIPTION  
-----

FEDERATED TREAS OBLIG MMF

C

TOTALS

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
1/2/15 BLACKROCK STRAT INC INCOME	45.
1/2/15 METROPOLITAN WEST INCOME TIMING	413.
1/2/15 VANGUARD SHORT TERM INCOME	68.
	-----
TOTAL	526.
	=====

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
1/2/16 METROPOLITAN WEST INCOME TIMING	263.
1/2/16 VANGUARD SHORT TERM INCOME TIMING	198.
ROUNDING DIFFERENCE	6.
1/4/16 FEDERATED HIGH YLD INCOME	93.
1/4/16 BLACKROCK STRAT INC	66.
	-----
TOTAL	626.
	=====

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

## OFFICER NAME:

1ST SOURCE BANK

## ADDRESS:

P O BOX 1602

SOUTH BEND, IN 46634

## TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION ..... 8,328.

## OFFICER NAME:

ELAINE DULCET

## ADDRESS:

59845 SYCAMORE ROAD

NORTH LIBERTY, IN 46554-9787

## TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

CAROL EVANS

## ADDRESS:

P O BOX 848

MISHAWAKA, IN 46546-0848

## TITLE:

PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

MARK KLOTA

## ADDRESS:

19447 KERN ROAD

SOUTH BEND, IN 46614-5724

## TITLE:

SCHOLARSHIP CHAIR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1



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

## OFFICER NAME:

NORMAN MATUSZAK

## ADDRESS:

2701 OAK LEAF CIRCLE  
SOUTH BEND, IN 46628-3443

## TITLE:

VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

MARY PLUTA

## ADDRESS:

57299 PEGGY DR  
SOUTH BEND, IN 46619

## TITLE:

TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

CAMILLE BUJEKER

## ADDRESS:

50575 MALLOW CT  
GRANGER, IN 46530

## TITLE:

BOARD MEMEBER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

REV. FATHER CHARLES ZAWISTOWSKI

## ADDRESS:

159 N SUMMIT DRIVE  
SOUTH BEND, IN 46619

## TITLE:

BOARD MEMEBER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

TOTAL COMPENSATION:

8,328.

=====

=====

## RECIPIENT NAME:

ST. MARY'S POLISH NATIONAL CHURCH

## ADDRESS:

1601 W. SAMPLE

SOUTH BEND, IN 46619

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

MARY WEBER

## ADDRESS:

ST. JOSEPH HIGH SCHOOL

SOUTH BEND, IN 46617

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SCHOLARSHIP

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

SISTER MAURA CHAPIN CENTER

## ADDRESS:

326 CHAPIN STREET

SOUTH BEND, IN

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

=====

## RECIPIENT NAME:

OUR LADY OF THE ROAD

## ADDRESS:

744 S MAIN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 200.

## RECIPIENT NAME:

NICHOLAS RYNEARSON

## ADDRESS:

65894 US HIGHWAY 31

LAKEVILLE, IN 46536

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SCHOLARSHIP

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 3,000.

## RECIPIENT NAME:

JENNIFER CUKROWICZ

## ADDRESS:

1106 CHIMES BOULEVARD

SOUTH BEND, IN 46615

AMOUNT OF GRANT PAID ..... 1,500.

## RECIPIENT NAME:

ANNA UJDAK

## ADDRESS:

1702 BERGAN ST

SOUTH BEND, IN 46628

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

=====

## RECIPIENT NAME:

ALEXANDER TOTH

## ADDRESS:

152 MANCHESTER DRIVE

MISHAWAKA, IN 46544

AMOUNT OF GRANT PAID ..... 1,500.

## RECIPIENT NAME:

EMILY CRANE

## ADDRESS:

ST. JOSEPH HIGH SCHOOL

SOUTH BEND, IN 46617

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SCHOLARSHIP

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

ASHTON RUSZKOWSKI

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

=====

## RECIPIENT NAME:

KATELYN GRZEGOREK

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

JORDAN KONSTANTY

## ADDRESS:

909 N. WILBUR ST

SOUTH BEND, IN 46628

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

ELISE GERSTBAUER

## ADDRESS:

120 EAST 11TH STREET

MISHAWAKA, IN 46544

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 1,500.

=====

## RECIPIENT NAME:

ALEXIS FELTY

## ADDRESS:

21417 MAYS DR.

SOUTH BEND, IN 46628

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

JENICA MEGYESE

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

REINS OF LIFE

## ADDRESS:

55200 QUINCE ROAD

SOUTH BEND, IN 46619

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARTIABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

=====

## RECIPIENT NAME:

VERONICA BRADLEY

## ADDRESS:

28114 STATE ROAD 2

SOUTH BEND, IN 46619

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SCHOLARSHIP

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 1,500.

## RECIPIENT NAME:

MARY HENDERSON

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

MATTHEW HENDERSON

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

=====

## RECIPIENT NAME:

TARAN TOMASZEWSKI

## ADDRESS:

1033 W. EWING AVE

SOUTH BEND, IN 46613

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

LAUREN PETERSON

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

NICHOLAS ANDRYSIK

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.



=====

## RECIPIENT NAME:

SARAH HANSEN

## ADDRESS:

15199 CLEVELAND ROAD

GRANGER, IN 46530

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 1,500.

## RECIPIENT NAME:

JEFFERY SHINDLENDECKER

## ADDRESS:

27600 INWOOD ROAD

NORTH LIBERTY, IN 46554

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

KATHERINE UNDERLY

## ADDRESS:

ST. JOSEPH HIGH SCHOOL

SOUTH BEND, IN 46617

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

SCHOLARSHIP

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

=====

## RECIPIENT NAME:

ISAAC HYDUK

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

CONNER FUTA

## ADDRESS:

1146 QUIGLEY PLACE

SOUTH BEND, IN 46617

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 1,500.

## RECIPIENT NAME:

ELIZABETH ZWIERZYNSKI

## ADDRESS:

29977 FILMORE ROAD

NEW CARLISLE, IN 46552

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 1,500.

=====

## RECIPIENT NAME:

JENNA WEINBERG

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

SAMANTHA UNDERLY

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

BRITTANY ESTRADA

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

## RECIPIENT NAME:

TIMOTHY LIRA

## ADDRESS:

10448 CRICKET SOUND

GRANGER, IN 46530

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 1,500.

## RECIPIENT NAME:

BERNARD UJDAK

C/O TRUST DEPARTMENT

## ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

HOLY FAMILY CHURCH

## ADDRESS:

56405 MAYFLOWER ROAD

SOUTH BEND, IN 46619

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

## RECIPIENT NAME:

M.R. FALCONS NEST 4

## ADDRESS:

3212 KELLER

SOUTH BEND, IN 46628

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 550.

## RECIPIENT NAME:

Z.B. FALCONS NEST 80

YOUTH FUND

## ADDRESS:

323 SOUTH SHERIDAN

SOUTH BEND, IN 46628

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

ST. VINCENT DE PAUL

## ADDRESS:

520 CRESCENT AVENUE

SOUTH BEND, IN 46617

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 1,000.

=====

## RECIPIENT NAME:

CHRIST THE KING CHURCH

## ADDRESS:

52473 SR 933

SOUTH BEND, IN 46637

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

LOGAN CENTER

## ADDRESS:

2505 EAST JEFFERSON BOULEVARD

SOUTH BEND, IN 46615

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

CAMP MILLHOUSE

## ADDRESS:

25600 KELLY ROAD

SOUTH BEND, IN 46614

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 160.

=====

## RECIPIENT NAME:

CORPUS CHRISTI PARISH

## ADDRESS:

2822 CORPUS CHRISTI DRIVE

SOUTH BEND, IN 46628

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

ST. STANISLAUS KOSTKA CHURCH

## ADDRESS:

55756 TULIP ROAD

NEW CARLISLE, IN 46552

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

WVPE

## ADDRESS:

2424 CALIFORNIA ROAD

ELKHART, IN 46514

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

=====

## RECIPIENT NAME:

WNIT

MICHIANA PUBLIC BROADCASTING CORP

## ADDRESS:

300 WEST JEFFERSON

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

ST. AUGUSTINE'S CHURCH

## ADDRESS:

1501 WEST WASHINGTON

SOUTH BEND, IN 46628

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

WOMAN'S CARE CENTER

## ADDRESS:

P.O. BOX 1230

MISHAWAKA, IN 46546

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.



=====

## RECIPIENT NAME:

CENTER FOR THE HOMELESS

## ADDRESS:

813 SOUTH MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 740.

## RECIPIENT NAME:

FOREVER LEARNING INSTITUTE

## ADDRESS:

54191 IRONWOOD ROAD

SOUTH BEND, IN 46635

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

FOOD BANK OF NORTHERN INDIANA

## ADDRESS:

702 CHAPIN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

## RECIPIENT NAME:

SOUTH BEND SYMPHONY ORCHESTRA

## ADDRESS:

127 N. MICHIGAN STREET

SOUTH BEND, IN 46601

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 1,000.

## RECIPIENT NAME:

TAYLOR KOWALSKI

## ADDRESS:

1937 BERKLEY PL

SOUTH BEND, IN 46616

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

QUEEN OF PEACE CHURCH

## ADDRESS:

4508 VISTULA ROAD

MISHAWAKA, IN 46544

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

## RECIPIENT NAME:

CHOPIN FINE ARTS CLUB

## ADDRESS:

57310 PEACHSTONE DRIVE

SOUTH BEND, IN 46619

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

## RECIPIENT NAME:

ST. AUGUSTINE'S SOUP KITCHEN

## ADDRESS:

1501 WEST WASHINGTON

SOUTH BEND, IN 46628

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

CHARITABLE

## FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID ..... 500.

TOTAL GRANTS PAID:

38,150.

=====