Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052 2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
For calendar year 26

▶ 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.

FOI	calend	dar year 2016 or tax year beginning , a	ana enaing				
	ame of for				A Empl	loyer identification number	
	room room	ER FAMILY FOUNDATION			20	6250017	
		d street (or PO box number if mail is not delivered to street address)		oom/suite		- 6259017 phone number (see instruction	c)
_		1ST AVENUE NW	"	Och 2 suite		7 - 445-8818	5)
		n, state or province, country, and ZIP or foreign postal code					
(ARM	EL IN 46032	-		C If exe	mption application is pending,	, check here
G	Check a	all that apply Initial return Initial retui	rn of a former public o	hanty	D 1. F	oreign organizations, check he	ere 🕨 📘
		Final return Amended	return		2. Fo	oreign organizations meeting t	the
		Address change Name cha	nge	_	85	5% test, check here and attach	n computation
Н	Check t	type of organization X Section 501(c)(3) exempt private	foundation		E If priv	ate foundation status was terr	minated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		section	on 507(b)(1)(A), check here	▶ _
I F	aır mar	rket value of all assets at J Accounting method	X Cash Acc	rual	F If the	foundation is in a 60-month te	ermination
		ear (from Part II, col (c), Other (specify)			under	r section 507(b)(1)(B), check h	nere •
	ne 16)		be on cash basıs)		<u></u>		
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv	vestment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions))	books	inco		ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	149,448			* ·	(Cash Dasis Offiy)
	2	Check ▶ ☐ if the foundation is not required to attach Sch B			***************************************		***************************************
	3	Interest on savings and temporary cash investments	4		4		
	4	Dividends and interest from securities	21,809		21,809		
	5a	Gross rents					
<u>@</u>	b	Net rental income or (loss)					
Š	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	33,218				
Revenue	b	Gross sales price for all assets on tine 6a 333,899				÷	
ď	7	Capital gain net income (from Ran V, line 2)	***************************************		6,666		***************************************
	8	Net-short-term capital gain				0	
	9	Income modifications 2017 (C) Gross-seles less returns and allowances		ļ	******************************		***************************************
	10a	9					
	b	Less-Cost of goods sold				3:	***************************************
	C	Gross profit or (loss) (attach schedule)	-				
	11	Other income (attach schedule) Total (Add lines 1 through 11	204,479		28,479	0	
	13	Compensation of officers, directors, trustees, etc.	201,179		20,213		
xpenses	14	Other employee salaries and wages					
ű	15	Pension plans, employee benefits					
ğ	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule) STMT 2	575				
Š	С	Other professional fees (attach schedule) STMT 3	9,006				
<u>:</u>	17	Interest	36				
įš	18	Taxes (attach schedule) (see instructions) STMT 4	2,143				
Ę	19	Depreciation (attach schedule) and depletion					
Þ	20	Occupancy					
Operating and Administrative E	21	Travel, conferences, and meetings	1,364	ļ			
a	22	Printing and publications					
пg	23	Other expenses (att sch) STMT 5	1,163	ļ			
ati	24	Total operating and administrative expenses.			_	_	_
Jer	25	Add lines 13 through 23	14,287	ļ	0	0	0
ŏ	25	Contributions, gifts, grants paid	45,770			ii.	45,770
	26	Total expenses and disbursements. Add lines 24 and 25	60,057		0	0	45,770
	27 a	Subtract line 26 from line 12 Excess of revenue over expenses and disbursements	144,422		` /		
	b	Net investment income (if negative, enter -0-)		•	28,479		
	c	Adjusted net income (if negative, enter -0-)	· · · · · · · · · · · · · · · · · · ·	 	20,2/3	0	`
		, .=, == .= = 1101 1110 1110 1110 110 110 110 110					

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2016)

	art II	Balance Sheets Attached schedules and amounts in the description column	เก	Beginning of year	End o	f year
	G [4]	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		15,560	33,211	33,211
	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		i		
		instructions)				
	7	Other notes and loans receivable (att. schedule)		1		
		Less: allowance for doubtful accounts ▶	0			
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
AS	10a	Investments – U S and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule) SEE STMT	6	743,359	870,130	1,022,663
	С	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach sch.)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis ▶			-::	
		Less accumulated depreciation (attach sch.)				
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the				
\perp		instructions. Also, see page 1, item l)		758,919	903,341	1,055,874
	17	Accounts payable and accrued expenses				
	18	Grants payable				
ies	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
jat	21	Mortgages and other notes payable (attach schedule)				
7	22	Other liabilities (describe ▶)			
\perp	23	Total liabilities (add lines 17 through 22)		0	0	
Sec		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	▶ □			
2	24	Unrestricted				
ala	25	Temporanly restricted				
	26	Permanently restricted				
Net Assets or Fund Balan		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	► X			
0	27	Capital stock, trust principal, or current funds				
šet	28	Paid-in or capital surplus, or land, bldg., and equipment fund		551,043	551,043	
A S	29	Retained earnings, accumulated income, endowment, or other funds		207,876	352,298	
e (30	Total net assets or fund balances (see instructions)		758,919	903,341	
z	31	Total liabilities and net assets/fund balances (see				,
\perp		instructions)		758,919	903,341	
P	art II	Analysis of Changes in Net Assets or Fund Balan	ces			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), lin	e 30 (mu	st agree with		
	end-o	f-year figure reported on pnor year's return)			1	758,919
2	Enter	amount from Part I, line 27a			2	144,422
3	Other	ıncreases not included ın line 2 (itemize) ▶			3	
4	Add li	nes 1, 2, and 3			4	903,341
	_				1 1	
		ases not included in line 2 (itemize) ▶ net assets or fund balances at end of year (line 4 minus line 5) – Part II,			. 5	903,341

Part IV Capital Gains and Lo	osses for Tax on Investment I	ncome	20 02 33017			rage
(a) List and describe the	kind(s) of property sold (e.g., real estate, e, or common stock, 200 shs MLC Co.)	_	(b) How acquired P – Purchase D – Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a FIDELITY A/C# 614-	101907		D - Bondaon	-		 -
b						
С						
			ļ			
		·				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		(h) Gain (e) plus (f)	
a 6,666						6,666
b						
С						
d						
Complete only for accepts the suite of the		40/04/6	20			
Complete only for assets showing gain	***					(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (ı) (j), ıf any	COI	Losses (fro	ess than -0-) or m col (h))
a						6,666
b						
С						
d		···				. <u></u>
e						
2 Capital gain net income or (net capital l	oss) If gain, also enter in Part					
2. Not about town positely and as (1000)	If (loss), enter -0- in Part	I, line 7	-	_2		6,666
3 Net short-term capital gain or (loss) as	* * * * * * * * * * * * * * * * * * * *	. ¬				
If gain, also enter in Part I, line 8, colum	in (c) (see instructions). If (loss), enter	-0- m		_		
Part V Qualification Under	Section 4940(e) for Reduced		Investment Inco	3		··
(For optional use by domestic private found				iiie		
		ix on het invest	ment income.)			
If section 4940(d)(2) applies, leave this part	blank.					
Was the foundation liable for the section 49	42 tax on the distributable amount of a	ny year in the b	pase period?			Yes X No
If "Yes," the foundation does not qualify und	ler section 4940(e) Do not complete the	is part				
1 Enter the appropriate amount in each co	olumn for each year, see the instruction	ns before makıı	ng any entries			
(a) Base penod years	(b)		(c)		Dietr	(d)
Calendar year (or tax year beginning in)	Adjusted qualifying distributions		of noncharitable-use assets			vided by col (c))
2015	37,85		801,8			0.047210
2014	37,00		760,9			0.048621
2013	39,50		735,9		_	0.053674
2012	25,20		487,9			0.051651
2011	19,17	/	349,2	280	г	0.054904
2. Total of two 4. column (d)					i	0 056060
2 Total of line 1, column (d) 2 Average distribution rate for the 5 years	have remed advised the total or line 2	h F h		2	<u> </u>	0.256060
3 Average distribution ratio for the 5-year number of years the foundation has been		by 5, or by the				0 051212
number of years the foundation has bee	in in existence it less than 5 years			3	 	0.051212
4 Enter the net value of noncharitable-use	assets for 2016 from Part X line 5			4		920,025
	, assets for 2010 from 7 are X, fine 5			1		220,023
5 Multiply line 4 by line 3				5		47,116
,				<u>"</u>		
6 Enter 1% of net investment income (1%	of Part I, line 27b)			6		285
·	·					
7 Add lines 5 and 6				7		47,401
8 Enter qualifying distributions from Part 2				8		45,770
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 ra	ite. See the	.	
Part VI instructions.						

Form	990-PF (2016) TOOMER FAMILY FOUNDATION 20-6259017			P	age 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	=			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			8 8	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	<u> </u>			<u>570</u>
	here ▶ ☐ 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-)				0
3		3			<u>570</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			<u>570</u>
6	Credits/Payments		:	: ::	
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 1,200			· •	
b	Exempt foreign organizations – tax withheld at source			: • i	
C	Tax paid with application for extension of time to file (Form 8868) 6c		÷		
d _	Backup withholding erroneously withheld 6d	1	*	8 .	~ ~ ^
7	Total credits and payments. Add lines 6a through 6d			Ι,	200
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				<u>630</u>
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 630 Refunded ▶ 1	1			
	rt VII-A Statements Regarding Activities			V	A1-
1a			4.	Yes	No X
h	participate or intervene in any political campaign?		1a		^
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		46		х
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials		1b		A
	published or distributed by the foundation in connection with the activities.				
_	Did the foundation file Form 1120-POL for this year?		1c	F >-	х
c d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		10		
u	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			i.	
•	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	•	х
	If "Yes," attach a detailed description of the activities			:	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3]	х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part X	ν	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► NONE				
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		8b	Х	L
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		`		7
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses	- · · ·	10_	X	
			om 99	O-PF	(2016)

_P	art 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			l
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<u> </u>	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)	12	<u> </u>	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address NOT APPLICABLE	13	X	<u> </u>
14	The books are in care of ▶ LINDA TOOMER Telephone no ▶ 317 - 5	85-	639	8
	8043 HEYWARD DR.			
	Located at ▶ INDIANAPOLIS IN ZIP+4 ▶ 4625)		
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			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶	<u> </u>		
P	art 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? Yes X No			ĺ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			ĺ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			ĺ
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			ĺ
	the benefit or use of a disqualified person)? Yes X No			ĺ
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			ĺ
	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.) Yes X No			ĺ
b	termination of government service, if terminating within 90 days.) Yes X No 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)? N/A	1ь	į į	ĺ
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			ĺ
	were not corrected before the first day of the tax year beginning in 2016? N/A	1c	[]	
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))			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			ĺ
	6e, Part XIII) for tax year(s) beginning before 2016?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			ĺ
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			ĺ
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			Í
	all years listed, answer "No" and attach statement – see instructions)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			ĺ
	▶ 20 , 20 , 20 , 20		i 1	İ
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			İ
	at any time during the year?			İ
þ	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			İ
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			į
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			į
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			İ
4-	foundation had excess business holdings in 2016) N/A	3b	\vdash	v
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a	<u> </u>	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 2016?	AL.	[·]	x
	· · · · · · · · · · · · · · · · · · ·	4b orm 99	10-DE	
	·	orm 35	V-L L	(∠016

For	n 990-PF (2016) TOOMER I	FAMILY FOUNDATION	20-6	5259017	_		Page (
P	art VII-B Statements R	egarding Activities for Which Fo	orm 4720 May Be F	Required (cont	inued)		
5a	During the year did the foundation	on pay or incur any amount to					
	(1) Carry on propaganda, or oth	erwise attempt to influence legislation (se	ction 4945(e))?	\ \ \	′es 🗓 No		
	(2) Influence the outcome of an	y specific public election (see section 495	5), or to carry on,				
	directly or indirectly, any vot	er registration drive?		\\	′es 🛚 X No		
	(3) Provide a grant to an individ	ual for travel, study, or other sımılar purpo	ses?	 \	′es 🗓 No		
	(4) Provide a grant to an organi	zation other than a charitable, etc., organiz	zation described in				
	section 4945(d)(4)(A)? (see	•		Y	′es X No		
	(5) Provide for any purpose other	er than religious, charitable, scientific, liter	ary, or educational				
		on of cruelty to children or animals?			es X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualit	fy under the exceptions d	lescribed in			
		n a current notice regarding disaster assis	•	?	N/A	5b	
		nt notice regarding disaster assistance ch			▶ [_]		
С		n 5a(4), does the foundation claim exempt	ion from the tax				
	because it maintained expenditu	· · · · · · · · · · · · · · · · · · ·		N/A 📗 Y	'es 🔛 No		
_		quired by Regulations section 53 4945–5(•				
6a		ear, receive any funds, directly or indirectly	, to pay premiums		(FE)		
	on a personal benefit contract?				es X No	•	
b		ear, pay premiums, directly or indirectly, or	n a personal benefit contr	ract?		6b	X
_	If "Yes" to 6b, file Form 8870				_ ===		1
		was the foundation a party to a prohibited			es X No	•	
		ve any proceeds or have any net income a			N/A	7b	
77		out Officers, Directors, Trustees	s, Foundation Man	agers, Hignly	Paid Employ	ees,	
1 1	and Contractor	s es, foundation managers and their com		4:			
	List all Officers, directors, truste	es, loundation managers and their con	ipensation (see instruc	tions).	4.0.0		
	(2)	lame and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit	(e) Expe	ense account,
	(2)	and address	devoted to position	enter -0-)	plans and deferred compensation	other	allowances
ь	NDA TOOMER	INDIANAPOLIS	TRUSTEE		compondation		
	043 HEYWARD DR.	IN 46250	0.00	اه	o		^
	ERRY TOOMER	INDIANAPOLIS	TRUSTEE				
	43 HEYWARD DR.	IN 46250	0.00	اه	0		0
2	Compensation of five highest- "NONE."	paid employees (other than those inclu	ded on line 1 - see ins	tructions). If none	e, enter		
		-	(b) Title, and average		(d) Contributions to		
	(a) Name and address of each	employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		ense account,
			devoted to position		compensation	othera	allowances
NC	NE						
					•		
			_				
					<u> </u>		
						L	
Γota	I number of other employees paid	over \$50,000			>		0

Form 990-PF (20	016) TOOMER FAMILY FOUNDATION	20-6259017	Page 7
Part VIII	Information About Officers, Directors, Trustees, Found Contractors (continued)	oundation Managers, Highly Paid E	
3 Five high	est-paid independent contractors for professional services (see i	nstructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
			
	•		
Tetal number of	others good in a supplied to the conferr		
	others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
List the foundation's organizations and o	s four largest direct charitable activities during the tax year. Include relevant statistical information beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number of	Expenses
1 N/A			
	····		
2			
3		-	
4			
Part IX-B	Summary of Program-Related Investments (see in	estructions)	
	rgest program-related investments made by the foundation during the tax year on lines 1 and		Amount
1 N/A			
_			
2			
All other program-re	elated investments. See instructions		
3			
			i

Form **990-PF** (2016)

Total. Add lines 1 through 3

line 1

Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 45,770 Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 а 1a 1b Program-related investments - total from Part IX-B Ь 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3b 45,770 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 5 Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2016)

45,431

7

P	ert XIII Undistributed Incom	e (see instructions)				
1	Distributable amount for 2016 from Part	XI,	(a) Corpus	(b) Years pnor to 2015	(c) 2015	(d) 2016
	line 7					45,431
2	Undistributed income, if any, as of the e	nd of 2016:				A Comment
а	Enter amount for 2015 only					<u> </u>
þ		, 20		····	<u></u>	l i
3	Excess distributions carryover, if any, to	· •			‡	1.3
а	From 2011	289				
þ	From 2012	1,196				
C	From 2013	2,922				1
d	From 2014					
е	From 2015		,			
f	Total of lines 3a through e		4,407			-
4	Qualifying distributions for 2016 from Pa	art XII,				
	line 4: ▶ \$ 45,770				‡	
а	Applied to 2015, but not more than line:	2a [
b	Applied to undistributed income of prior	years				i : .
	(Election required – see instructions)	<u>[</u>				
С	Treated as distributions out of corpus (E	Election				. :
	required – see instructions)			*****		· .
d	Applied to 2016 distributable amount					45,431
е	Remaining amount distributed out of coi	pus	339			:
5	Excess distributions carryover applied to	2016				
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a).)	•			`	1:5
6	Enter the net total of each column as					::
	indicated below:	•				<u>.</u>
а	Corpus. Add lines 3f, 4c, and 4e. Subtra	ct line 5	4,746		***************************************	
b	Prior years' undistributed income. Subtra	act				:
	line 4b from line 2b	Į.	424			
C	Enter the amount of prior years' undistril	outed				: 💸
	income for which a notice of deficiency is	nas				l 🔅 🛴
	been issued, or on which the section 49-	42(a)				.: *
	tax has been previously assessed	<u>[</u>				
d	Subtract line 6c from line 6b Taxable					
	amount - see instructions					
е	Undistributed income for 2015 Subtract	line				: :
	4a from line 2a Taxable amount - see	[
	instructions	1				10
f	Undistributed income for 2016 Subtract	lines				
	4d and 5 from line 1 This amount must	be [
	distributed in 2017	Į.				0
7	Amounts treated as distributions out of o	corpus				
	to satisfy requirements imposed by sect	ion				[3]
	170(b)(1)(F) or 4942(g)(3) (Election may	be				
	required—see instructions)					- : : :
8	Excess distributions carryover from 201	1 not				
	applied on line 5 or line 7 (see instruction	ns)	289	******************************	<u> </u>	<u> </u>
9	Excess distributions carryover to 201	7.				1 139
	Subtract lines 7 and 8 from line 6a	Ĺ	4,457			
0	Analysis of line 9 ⁻	, [<i>'</i>	•		1 ::
а	Excess from 2012	1,196				*
b	Excess from 2013	2,922			;	
С	Excess from 2014		**,	<i>/</i> ^ \$		
d	Excess from 2015	ļ		· ·	.	1
е_	Excess from 2016	339	′ /		· · · · · ·	

DAA

59017	Page 10
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P	art XIV Private Operating Fou	ı ndations (see ın	structions and Pa	<u>rt VII-A, question 9</u>)				
1a	If the foundation has received a ruling or	determination letter th	nat it is a private opera	ting					
	foundation, and the ruling is effective for	2016, enter the date of	of the ruling	▶ ;					
þ	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	Tax year		Prior 3 years					
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total			
	investment return from Part X for	<u>, , , , , , , , , , , , , , , , , , , </u>							
	each year listed			r					
b	85% of line 2a								
С	Qualifying distributions from Part XII,								
	line 4 for each year listed								
d	Amounts included in line 2c not used directly								
_	for active conduct of exempt activities								
е	Qualifying distributions made directly	· · ·							
·	for active conduct of exempt activities								
	Subtract line 2d from line 2c	_							
3	Complete 3a, b, or c for the	<u>-</u>		7					
3	alternative test relied upon:								
а	"Assets" alternative test – enter								
a	(1) Value of all assets								
	`'								
	(2) Value of assets qualifying under								
b	section 4942(j)(3)(B)(i) "Endowment" alternative test – enter 2/3								
b									
	of minimum investment return shown in								
_	Part X, line 6 for each year listed								
С	"Support" alternative test – enter								
	(1) Total support other than gross investment income (interest,								
	dividends, rents, payments on								
	securities loans (section								
	512(a)(5)), or royalties)		L.						
	(2) Support from general public								
	and 5 or more exempt								
	organizations as provided in								
	section 4942(j)(3)(B)(iii)								
	(3) Largest amount of support from								
	an exempt organization								
Ď.	(4) Gross investment income Supplementary Inform	otion (Complete	. Ahin mantantu if	dha farradatian ba	d 65 000 =====				
Fa	ert XV Supplementary Inform any time during the ye	•	•	the foundation na	ia \$5,000 or more	in assets at			
1	Information Regarding Foundation Ma		uons.)						
	List any managers of the foundation who	_	e than 2% of the total	contributions recoved b	ou the foundation				
а	before the close of any tax year (but only								
	SEE STATEMENT 7	ii tiley have contribut	ed more than \$5,000)	(366 360001 307(0)(2)	•,				
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	ion (or an equally large	nortion of the				
_	ownership of a partnership or other entity		•	, , , ,	portion of the				
	N/A	,	g						
2	Information Regarding Contribution, G	rant, Gift, Loan, Sch	olarship, etc., Progra	ams:		· · · · · · · · · · · · · · · · · · ·			
	Check here ▶ X if the foundation only				oes not accept				
	unsolicited requests for funds. If the found			_	•				
	other conditions, complete items 2a, b, c,		,	,					
а	The name, address, and telephone numb		of the person to whom	applications should be	addressed:				
	N/A		•						
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include:					
	N/A								
C	Any submission deadlines.								
	N/A								
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fi	elds, kinds of institution	s, or other				
	factors								
	N/A								

If recipient is an individual,	Foundation	Purpose of grant or	A
any foundation manager	recipient	contribution	Amount
	status of	Purpose of grant or contribution	45,770
		▶ 3a	45,770
	If recipient is an individual, show any relationship to any foundation manager	show any relationship to status of any foundation manager	If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient recipien

P	art XVI-A	Analysis of Income-Producing Ac	ctivities	_			
		ounts unless otherwise indicated.		ed business income	Exclude	d by section 512, 513, or 514	
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program se	rvice revenue			- COOLE		(See instructions)
	a	<u></u> -	_				
			_				
	с		_				
	d						
	e		-				
	f		-				
		d contracts from government agencies					
		dues and assessments					
		savings and temporary cash investments			14	4	
		nd interest from securities			14	21,809	
		come or (loss) from real estate					
		anced property					<u> </u>
		t-financed property			-		
		come or (loss) from personal property					
		tment income			14	6,666	26 552
		s) from sales of assets other than inventory or (loss) from special events			12	0,000	26,552
		or (loss) from sales of inventory					
		ue a	-				
		ue a	· ···				
			-				
				············			
	 e						
12	Subtotal Ad	ld columns (b), (d), and (e)	-		0	28,479	26,552
		ne 12, columns (b), (d), and (e)			1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13	55,031
		in line 13 instructions to verify calculations.)				_	
P	art XVI-B	Relationship of Activities to the A	ccomplishm	ent of Exempt	Purpose	es	
Ĺ	ine No.	Explain below how each activity for which incom	*	, ,			
	<u>▼</u>	accomplishment of the foundation's exempt purp	ooses (other than	by providing funds	for such pu	urposes) (See instructi	ons)
	N/A						
				-			
							
							
							-,
							
			·				
			-				
							<u>-</u>
					·		

orm 99	0-PF (2 <u>01</u>	16) TOOMER FA	WILY I	COUNDATIO	N	<u> 20-6259</u>	017		Pag	ge 1 3
Part .		Information Regardanization	_	ansfers To an	d Transactio	ns and Relationshi	ps With Noncharitab	е	_	
1 Di	d the orga	anization directly or ind	irectly engag	ge in any of the fol	lowing with any o	ther organization describ	ed		Yes	No
	section 50		er than section	on 501(c)(3) organ	nizations) or in se	ction 527, relating to polit	ical			
	-	om the reporting found	lation to a no	onchantable exem	nt organization o	f				
	Cash	g			F			1a(1)		X
	Other a	ssets						1a(2)		X
٠.	her transa									
		f assets to a nonchanta	ahle evemnt	organization				1b(1)	· [X
		ses of assets from a no	•	•	on			1b(2)		X
		of facilities, equipment,			OII			1b(2)		X
		rsement arrangements		500						X
		r loan guarantees	•					1b(4)		X
		nance of services or me	omborchin o	r fundraioina caliai	tations			1b(5)		X
				-				1b(6)		$\frac{\mathbf{x}}{\mathbf{x}}$
	_	acilities, equipment, m	-	<u>-</u>	· ·	ma (h) abauld alugua aba	the fair medicat	1c		
						nn (b) should always sho				
		-	•		•	the foundation received le				
			1			the goods, other assets,				
	ine no	(b) Amount involved	(c) Name	e of noncharitable exem	pt organization	(a) Description of tra	ansfers, transactions, and sharing an	angeme	nts	
A/R										
	 -									
		<u> </u>								
			 							
							· · · · · · · · · · · · · · · · · · ·			
							····			
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							· · · · · · · · · · · · · · · · · · ·			
		ation directly or indired is section 501(c) of the		. ,			[Ye	s X	No
b If "	Yes," con	nplete the following sci	hedule	···						
/	<u>_</u>	a) Name of organization		(b) Type of o	organization	(-	c) Description of relationship			
N/.	<u> </u>					•••				
										
										
				<u> </u>			<u> </u>			
						dules and statements, and to the which preparer has any knowled	e best of my knowledge and belief,	it is true	•	
							May the IRS discu			
Sign				_		1 A	with the preparer ((see instructions)	-	low Yes	No
lere		\mathcal{I}_{n})		1. 1.2.	<u> </u>			
		And		100 M	<u> </u>	/////// 	TRUSTEE			
	Signa	attee of officer of trustee			Date	Title	·			
	Print/Ty	pe preparer's name			Preparer's signatur	e	Date		Check	
ام:ما		′			1			- 1	self-em	i " ployed
aid	THOM	AS R. LONG, CI	PA		THOMAS R.	LONG, CPA	03/28	/17		
repare	Firm's n	ame ► LONG	& ASSC	CIATES,	P.C.		PTIN POO	043	274	:
lse Onl	Firm's a	ddress ► 8388	$E. \overline{116}$	TH ST, S			Firm's EIN ▶ 35-	200	962	9
		FISHE	ERS, IN	1 46038-	9370			-57		

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

Department of the Treasury Internal Revenue Service

TOOMER

Name of the organization

TOOMER FAMILY FOUNDATION

Schedule of Contributors

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

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

OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

20-6259017

2016

Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt chantable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Check if your organization is covered by the General Rule or a Special Rule . Note : Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions							
General Rule							
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions							
Special Rules							
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific,							
literary, or educational	literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
contributor, during the contributions totaled m during the year for an e	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such ore than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the to this organization because it received nonexclusively religious, charitable, etc., contributions addring the year.						
990-EZ, or 990-PF), but it mus	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, it answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

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

PAGE 1 OF 1

Name of organization

Employer identification number

TOOMER FAMILY FOUNDATION 20-6259017 Contributors (See instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 JERRY & LINDA TOOMER Person 9439 TAMARACK DR Payrol! 146,921 \$ Noncash **INDIANAPOLIS** IN 46260 (Complete Part II for noncash contributions.) (b) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions.)

PAGE 1 OF 1

Page 3

Name of organization
TOOMER FAMILY FOUNDATION

Employer identification number 20 – 6259017

Part II	Noncash Property (See instructions). Use duplica	te copies of Part II if additional s	space is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	3129 SHARES OF DOW CHEMICAL		
		\$ 166,525	06/07/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	240 SHARES OF LOCKHEAD MARTIN		
		\$ 57,161	06/07/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

990022 Toomer Family Foundation

Federal Statements

20-6259017 FYE: 12/31/2016

Assets
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Sale
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Part
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(C)

		Net	Gain / Loss		-1,610		30,144		-1,982	26,552	
		:	Depreciation		·›					\$ 0	
		I	Expense		₩					\$ 0	
			Cost		64,273 \$		201,825		34,583	300,681 \$	
How	Received	Sale	Price	PURCHASE	62,663 \$	PURCHASE	231,969	PURCHASE	32,601	327,233 \$	
					᠊ᠬ					ω	
		Date	Sold		VARIOUS		VARIOUS		VARIOUS		
	Description	Date	Acquired	04907	VARIOUS	04907	VARIOUS	04907	VARIOUS		
]	Whom	Sold	FIDELITY AC #614-104907		FIDELITY AC #614-104907		FIDELITY AC #614-104907		TOTAL	

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	w-	٥ 0
Adjusted Net	w	٠
Net Investment	భ	ۍ 0
Total	575	575
	w	w
Description	ACCOUNTING FEES	TOTAL

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	SE	TOTAL
Total	8,317	9,006
Net Investment	₩	₩
t nent		0
Adjusted Net	₩.	Φ
ס		0
Charitable Purpose	W.	w

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Federal Statements

20-6259017 FYE: 12/31/2016

990022 Toomer Family Foundation

			Net	Adjusted	Charitable
Description		Total	Investment	Net	Purpose
INCOME TAXES FOREIGN TAXES	ጭ	1,781	<i>জ</i>	w.	w
TOTAL	w	2,143	₩.	w	\$
				:	
	Statement 5 - F	orm 990-PF, F	Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses	er Expenses	
			Net	Adjusted	Charitable
Description		Total	Investment	Net	Purpose
	₩		ŧV.	ψ	ጭ
EXPENSES					
OFFICE EXPENSES		1,163			

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

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1,163

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TOTAL

Description	۳ 	Beginning of Year		End of Year	Basis of Valuation		Fair Market Value
IDELITY A/C# 614-101907	w	743,359	ŵ	870,130	COST	ۍ ا	1,022,663
TOTAL	w.	743,359	φ.	870,130		აგ ∥	1,022,663

990022 Toomer Family Foundation Federal Statements

FYE: 12/31/2016

Statement 7 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager		Amount
LINDA TOOMER	\$	111,843
JERRY TOOMER	_	111,843
TOTAL	\$	223,686

3/28/2017 8:13 PM

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990022 Toomer Family Foundation 20-6259017 FYE: 12/31/2016

Federal Statements

Name	- Ac	Address	1		
Address	Relationship	Status		Purpose	Amount
ALBERT CITY FREEDOM ROCK	ALBERT CITY	CITY HISTORICAL MU	MU		
ALBERT CITY IA 50510 N/A	PUBI	PUBLIC 1 ST	SCHOLARSHIP		300
TINDIANAPOLIS IN 46260 N/A	000	PUBLIC	OPERATIONS		. 000 1
	2960 N. MER	MERIDIAN ST. STE			
INDIANAPOLIS IN 46208 N/A	д.	PUBLIC	OPERATIONS		1,000
AL FOUNDATIO	MILAN HISTO	MILAN HISTORICAL MUSEUM			•
MILAN IN 47031 N/A	щ	PUBLIC	OPERATIONS		200
	50 E. 91ST	ST, STE 103			
INDIANAPOLIS IN 46240 N/A	щ	PUBLIC	OPERATIONS		4,000
BUTLER UNIVERSITY	4600 SUNSET AVE	AVE			
INDIANAPOLIS IN 46208 N/A	щ	PUBLIC	OPERATIONS		10,000
COBURN PLACE	604 E 38TH	ST	-		
INDIANAPOLIS IN 46205 N/A	ш.	PUBLIC	OPERATIONS		200
COLLEGE MENTORS FOR KIDS	2121 WEST 1	10TH STREET			
INDIANAPOLIS IN 46202 N/A	ш.	PUBLIC	OPERATIONS		100
DESERT BOTANICAL GARDENS	1201 N GALVIN PKWY	IN PKWY			
PHOENIX AZ 85008 N/A	щ	PUBLIC	OPERATIONS		170
DOCTORS WITHOUT BORDERS	333 SEVENTH AVE.	AVE. 2ND FL			
NEW YORK NY 10001-5004 N/A	щ	PUBLIC	OPERATIONS		200
ENTRY POINT	PO BOX 3655				
CARMEL IN 46082 N/A	щ	PUBLIC	OPERATIONS		2,500
HOPE ACADEMY OF FAIRBANKS RECOVERY	8102 CLEARVISTA PKWY	ISTA PKWY			
INDIANAPOLIS IN 46256 N/A	щ	PUBLIC	ADDICTION TREATMENT	EATMENT	400
INDIANAPOLIS SYMPHONY	32 E. WASHINGTON	NGTON ST. STE	ы		
INDIANAPOLIS IN 46240 N/A	щ	PUBLIC	OPERATIONS		1,000
IU SIMON CANCER CENTER	PO BOX 7072				
INDIANAPOLIS IN 46207-707 N/A	щ	PUBLIC	RESEARCH		1,000
KARL T HARFORD FOUNDATION	826 HADLEIGH PASS	H PASS			
		PUBLIC	OPERATIONS		100
GREATER INDPLA	301 E, 38TH	8TH ST			
INDIANAPOLIS IN 46205 N/A		PUBLIC	OPERATIONS		200
	1420 CHASE	COURT			
CARMEL IN 46032 N/A	щ	PUBLIC	OPERATIONS		200

990022 Toomer Family Foundation 20-6259017 FYE: 12/31/2016

Federal Statements

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount		5,500		300		5,000		10,000		500		100		300	45,770	
1	Purpose		FACULTY DEVELOPMENT		OPERATIONS		DEAR TOMORROW		OPERATIONS		OPERATIONS		OPERATIONS		OPERATIONS		
Address	ship Status	1420 CHASE COURT	PUBLIC	4725 E MAYO BLVD	PUBLIC	345 MONTGOMERY ST	PUBLIC	3901 N MERIDIAN STREET	PUBLIC	4027 EAST LINCOLN DR.	PUBLIC	8910 PURDUE ROAD	PUBLIC	1630 N MERIDIAN STREET	PUBLIC		
	Relationship	1420	N/A	4725	N/A	345	N/A	3901	N/A		N/A	8910	N/A	1630	N/A		
Name	Address	MIDWEST ACADEMY	CARMEL IN 46032	MUSICAL INSTRUMENT MUSEUM	PHOENIX AZ 85050	UNITED CHARITABLE	BROOKLYN NY 11225	UNITED WAY	INDIANAPOLIS IN 46208	UNIVERSALIST CONGREATION OF PHOENIX	PARADISE VALLEY AZ 85253	US CHARITABLE GIFT TRUST	INDIANAPOLIS IN 46268	WFYI	INDIANAPOLIS IN 46202	TOTAL	