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## Return of Private Foundation

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

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

For calendar year 2016 or tax year beginning

, and ending

Name of foundation

MICHIGAN CITY COMMUNITY  
ENRICHMENT CORPORATION

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

100 EAST MICHIGAN BOULEVARD

A Employer identification number

35-2036426

B Telephone number

219-873-1408

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 ► G Check all that apply:  Initial return  Initial return of a former public charity  
 Final return  Amended return  
 Address change  Name changeH 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 J Accounting method:  Cash  Accrual  
(from Part II, col. (c), line 16)  Other (specify)  Other (specify)

► \$ 334,558. (Part I, column (d) must be on cash basis.)

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))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	762,300.		N/A	
2	Check ► <input type="checkbox"/> If the foundation is not required to attach Sch B Interest on savings and temporary cash investments				
3	Dividends and interest from securities	1,182.	1,182.		STATEMENT 1
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a	146,020.	-43.		
7	Capital gain net income (from Part IV, line 2)			0.	
8	Net short-term capital gain				
9	Income modifications Gross sales less returns				
10a	and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss)				
11	Other income				
12	Total. Add lines 1 through 11	763,439.	1,182.		
13	Compensation of officers, directors, trustees, etc	0.	0.	0.	
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees	STMT 2	10,707.	RECEIVED	
b	Accounting fees			NOV. 15 2017	10,707.
c	Other professional fees	STMT 3	1,635.	OGDEN, UT	1,635.
17	Interest				
18	Taxes				
19	Depreciation and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses	STMT 4	1,400.	0.	1,400.
			5,301.	0.	5,301.
24	Total operating and administrative expenses. Add lines 13 through 23		19,043.	0.	19,043.
25	Contributions, gifts, grants paid		771,450.		730,450.
26	Total expenses and disbursements. Add lines 24 and 25		790,493.	0.	749,493.
27	Subtract line 26 from line 12:		-27,054.		
a	Excess of revenue over expenses and disbursements				
b	Net investment income (if negative, enter -0-)		1,182.		
c	Adjusted net income (if negative, enter -0-)			N/A	

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<b>Part II</b>	<b>Balance Sheets</b>	Attached schedules and amounts in the description column should be for end-of-year amounts only	<b>Beginning of year</b>	<b>End of year</b>	
			<b>(a) Book Value</b>	<b>(b) Book Value</b>	<b>(c) Fair Market Value</b>
	1 Cash - non-interest-bearing				
	2 Savings and temporary cash investments		<b>313,861.</b>	<b>334,587.</b>	<b>334,558.</b>
	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				
	7 Other notes and loans receivable ►				
	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				
	b Investments - corporate stock				
	c Investments - corporate bonds				
	11 Investments - land, buildings, and equipment basis ►				
	Less accumulated depreciation ►				
	12 Investments - mortgage loans				
	13 Investments - other				
	14 Land, buildings, and equipment: basis ►				
	Less accumulated depreciation ►				
	15 Other assets (describe ► )				
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		<b>313,861.</b>	<b>334,587.</b>	<b>334,558.</b>
	17 Accounts payable and accrued expenses				
	18 Grants payable		<b>630,450.</b>	<b>671,450.</b>	
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ► )				
	23 Total liabilities (add lines 17 through 22)		<b>630,450.</b>	<b>671,450.</b>	
	Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted			<b>0.</b>	
	25 Temporarily restricted		<b>-316,589.</b>	<b>-336,863.</b>	
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg., and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds				
	30 Total net assets or fund balances		<b>-316,589.</b>	<b>-336,863.</b>	
	31 Total liabilities and net assets/fund balances		<b>313,861.</b>	<b>334,587.</b>	

**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	<b>-316,589.</b>
2 Enter amount from Part I, line 27a	2	<b>-27,054.</b>
3 Other increases not included in line 2 (itemize) ►	3	<b>7,038.</b>
4 Add lines 1, 2, and 3	4	<b>-336,605.</b>
5 Decreases not included in line 2 (itemize) ► <b>PRIOR YEAR ADJUSTMENT</b>	5	<b>258.</b>
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	<b>-336,863.</b>

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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 HARBOUR TRUST</b>		P	VARIOUS	VARIOUS
b				
c				
d				
e				
(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 146,020.</b>		<b>146,063.</b>	<b>-43.</b>	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
a			<b>-43.</b>	
b				
c				
d				
e				
2 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 }		2	<b>-43.</b>
3 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). If (loss), enter -0- in Part I, line 8	{ }		3	N/A

**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))
2015	<b>776,817.</b>	<b>261,887.</b>	<b>2.966230</b>
2014	<b>942,903.</b>	<b>310,304.</b>	<b>3.038643</b>
2013	<b>649,994.</b>	<b>424,241.</b>	<b>1.532134</b>
2012	<b>755,741.</b>	<b>401,678.</b>	<b>1.881460</b>
2011	<b>747,494.</b>	<b>326,440.</b>	<b>2.289836</b>

2 Total of line 1, column (d)

**2 11.708303**

3 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

**3 2.341661**

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

**4 264,211.**

5 Multiply line 4 by line 3

**5 618,693.**

6 Enter 1% of net investment income (1% of Part I, line 27b)

**6 12.**

7 Add lines 5 and 6

**7 618,705.**

8 Enter qualifying distributions from Part XII, line 4

**8 749,493.**

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.

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**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	12.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" 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-)			
3	Add lines 1 and 2	2	0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	3	12.	
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	4	0.	
6	<b>Credits/Payments:</b>	5	12.	
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	171.	
b	Exempt foreign organizations - tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments. Add lines 6a through 6d	7	171.	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9		
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	159.	
11	Enter the amount of line 10 to be: <b>Credited to 2017 estimated tax</b> ►	11	0.	
		159.	Refunded ►	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a	X	
1b	X	
1c	X	
2	X	
3	X	
4a	X	
4b		
5	X	
6	X	
7	X	
8a		
8b	X	
9	X	
10	X	
STMT	6	

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?

1b 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*

1c Did the foundation file Form 1120-POL for this year?

2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  
(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.

3 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0.

4a 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.*

4b Did the foundation have unrelated business gross income of \$1,000 or more during the year?

5a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  
*If "Yes," attach a detailed description of the activities.*

5b If "Yes," has it filed a tax return on Form 990-T for this year?  
**N/A**

6a 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?

6b 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  
**N/A**

7a Enter the states to which the foundation reports or with which it is registered (see instructions) ► IN

7b 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

8a 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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV

8b Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  
**STMT 6**

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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)	11	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	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X
14	The books are in care of ► HARBOUR TRUST AND INVESTMENT Located at ► 1024 N. KARWICK ROAD, MICHIGAN CITY, IN	Telephone no. ► 219-877-3512 ZIP+4 ► 46360	
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	N/A
16	At any time during calendar year 2016, 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 ►	16	Yes No 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?	<input type="checkbox"/> Yes	X No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	X No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	X No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	X No
(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)?	<input type="checkbox"/> Yes	X No
(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	X 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	N/A	
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 2016?	►	
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(l)(5)):		
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? If "Yes," list the years ►	<input type="checkbox"/> Yes	X 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.)	N/A	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►	2b	
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	X No
b	If "Yes," did it have excess business holdings in 2016 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 2016)	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b	
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?	4a	X
		4b	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))?
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?
- (3) Provide a grant to an individual for travel, study, or other similar purposes?
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

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)?

N/A



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?

N/A



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

6b

X

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

If "Yes" to 6b, file Form 8870.



Yes



No

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?



Yes



No

N/A

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.

(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 7		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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				

Total number of other employees paid over \$50,000



0

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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. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services



0

**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	N/A	
2		
3		
4		

**Part IX-B Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1	N/A	
2		
3		

All other program-related investments. See instructions.

3		

Total. Add lines 1 through 3



0.

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	268,235.
c	Fair market value of all other assets	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	268,235.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	268,235.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,024.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	264,211.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	13,211.

**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.)

1	Minimum investment return from Part X, line 6	1	13,211.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	12.
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	12.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	13,199.
4	Recoveries of amounts treated as qualifying distributions	4	7,038.
5	Add lines 3 and 4	5	20,237.
6	Deduction from distributable amount (see instructions)	6	0.
7	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	20,237.

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	749,493.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	749,493.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	12.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	749,481.

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 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				20,237.
2 Undistributed income, if any, as of the end of 2016			0.	
a Enter amount for 2015 only				
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011	731,252.			
b From 2012	735,734.			
c From 2013	628,878.			
d From 2014	911,563.			
e From 2015	761,037.			
f Total of lines 3a through e	3,768,464.			
4 Qualifying distributions for 2016 from Part XII, line 4: ► \$ 749,493.			0.	
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2016 distributable amount				20,237.
e Remaining amount distributed out of corpus	729,256.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	4,497,720.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5			0.	
b Prior years' undistributed income. Subtract line 4b from line 2b			0.	
c 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		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instr.				0.
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				0.
7 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)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7	731,252.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	3,766,468.			
10 Analysis of line 9:				
a Excess from 2012	735,734.			
b Excess from 2013	628,878.			
c Excess from 2014	911,563.			
d Excess from 2015	761,037.			
e Excess from 2016	729,256.			

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

N/A

- 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, 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)

- 2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed
  - b 85% of line 2a
  - c 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
  - e Qualifying distributions made directly for active conduct of exempt activities

Subtract line 2d from line 2c.

3 Subtract line 2a from line 2b  
3 Complete 3a, b, or c for the alternative test relied upon:

- a **"Assets"** alternative test - enter:
    - (1) Value of all assets
    - (2) Value of assets qualifying under section 4942(j)(3)(B)(i)
  - b **"Endowment"** alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed
  - c **"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)
    - (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
    - (4) 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).)

NONE

- 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.

**NONE**

## **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:

MICHIGAN CITY COMMUNITY ENRICHMENT CORPORATION  
100 E. MICHIGAN BLVD., MICHIGAN CITY, IN 46360

- b. The form in which applications should be submitted and information and materials they should include;

**SEE EXAMPLE OF GRANT APPLICATION ATTACHED**

- c Any submission deadlines:**

TO BE DETERMINED ON AN ANNUAL BASIS

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

APPLICANT MUST BE CONSIDERED A CHARITABLE ORGANIZATION UNDER SEC. 501(C)(3)  
AS DEFINED BY THE INTERNAL REVENUE SERVICE.

## 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
<b>a Paid during the year</b>				
MICHIGAN CITY ZOO 115 LAKESHORE DRIVE MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MICHIGAN CITY ZOO	100,000.
<b>Total</b>			► 3a	100,000.
<b>b Approved for future payment</b>				
BOYS & GIRLS CLUB OF MICHIGAN CITY 301 E. 8TH ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SUMMER DAY CAMP PROGRAM 2017	35,000.
ARISE & SHINE BREAKFAST MINISTRY'S INC, NPO 222 MCCLELLAND AVE MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	FEEDING OUR COMMUNITY	2,500.
BARKER MIDDLE SCHOOL 319 EAST BARKER ROAD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	BARKER STEM PUBLIC SERVICE ANNOUNCEMENTS PROJECTS	5,000.
<b>Total</b>	SEE CONTINUATION SHEET(S)			► 3b 671,450.

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

## **Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**



**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016****Name of the organization****MICHIGAN CITY COMMUNITY  
ENRICHMENT CORPORATION****Employer identification number****35-2036426****Organization type (check one):****Filers of:**Form 990 or 990-EZ  501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organizationForm 990-PF  501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable 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 33 1/3% 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 purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- 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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

MICHIGAN CITY COMMUNITY  
ENRICHMENT CORPORATION

Employer identification number

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## Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BLUE CHIP CASINO, INC. 777 BLUE CHIP DRIVE MICHIGAN CITY, IN 46360	\$ 762,300.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization

MICHIGAN CITY COMMUNITY  
ENRICHMENT CORPORATION

Employer identification number

35-2036426

## Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	_____

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**Name of organization**

**Employer identification number**

**MICHIGAN CITY COMMUNITY  
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**Part III** *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ► \$*  
*Use duplicate copies of Part III if additional space is needed.*

MICHIGAN CITY COMMUNITY  
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## Part XV Supplementary Information

## 3 Grants and Contributions Approved for Future Payment (Continuation)

Recipient Name and address (home or business)	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
CATHOLIC CHARITIES OF DIOCESE OF GARY 321 W. 11TH ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	WHEELCHAIR RAMP/HOME SAFETY REPAIR PROGRAM 2017	18,000.
CATHOLIC CHARITIES OF DIOCESE OF GARY 321 W. 11TH ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CHILDREN'S VISION SCREENING PROGRAM 2017	5,000.
CITIZENS CONCERNED FOR THE HOMELESS, INC. 1802 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SAND CASTLE SHELTER FOR HOMELESS FAMILIES PROGRAM	12,500.
CITIZENS CONCERNED FOR THE HOMELESS, INC. 1802 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	VOLUNTEER GROWTH PROGRAM - KEYS TO HOPE	2,500.
DUNEBROOK 7451 W. JOHNSON ROAD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	NURTURING PARENTING PROGRAM	20,000.
FESTIVAL PLAYERS GUILD 807 FRANKLIN ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	2017 CANTERBURY SUMMER THEATER SEASON	3,000.
HARMONY HOUSE/CASA OF LAPORTE COUNTY, INC. 1005 MICHIGAN AVE. LAPORTE, IN 46350	NONE	PUBLIC CHARITY	COURT APPOINTED YOUTH ADVOCATE PROGRAM	10,000.
JUNIOR ACHIEVEMENT OF NORTHERN INDIANA 601 NOBLE DRIVE FORT WAYNE, IN 46825	NONE	PUBLIC CHARITY	EMPOWERING MICHIGAN CITY'S FUTURE	12,500.
LAPORTE COUNTY HABITAT FOR HUMANITY 225 E. GARFIELD ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	2017 HABITAT HOME BUILD IN MICHIGAN CITY	10,000.
LAPORTE COUNTY MEALS ON WHEELS 301 E. 8TH ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SILVER TSUNAMI 2	24,500.
<b>Total from continuation sheets</b>				<b>628,950.</b>

MICHIGAN CITY COMMUNITY  
ENRICHMENT CORPORATION

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## Part XV Supplementary Information

## 3 Grants and Contributions Approved for Future Payment (Continuation)

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
CISV POST OFFICE BOX 462 MICHIGAN CITY, IN 46361	NONE	PUBLIC CHARITY	HOST AN INTERNATIONAL YOUTH MEETING	3,000.
MCAS GRANT ACCEPTANCE FUND/ HOURS FOR OURS 100 MANNY COURT MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SCHOOL BASED MENTORING	7,800.
MCAS SAFE HARBOR ENRICHMENT PROGRAM 100 MANNY COURT MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CODING AS A SECOND LANGUAGE: INSPIRING STUDENTS THROUGH ROBOTICS	5,000.
CITIZENS CONCERNED FOR THE HOMELESS, INC. 1802 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	KEYS TO HOPE COMMUNITY RESOURCE CENTER PROGRAM	5,000.
MICHIANA MARINES DETACHMENT #1348 0334 N. FAIL ROAD LAPORTE, IN 46350	NONE	PUBLIC CHARITY	TOYS FOR TOTS 2017 CAMPAIGN	5,000.
MICHIANA RESOURCES, INC. 4315 E MICHIGAN BLVD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	TRANSPORTATION SERVICES FOR THE ELDERLY, DISABLED, AND MEDICALLY FRAGILE	50,000.
FOOTLIGHT PLAYERS, INC. 1705 FRANKLIN ST, MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SUMMER YOUTH THEATER PROGRAM	1,000.
MICHIGAN CITY CHAMBER MUSIC FESTIVAL P.O. BOX 894 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	A COMMUNITY RESOURCE FOR ACCESS TO FINE MUSIC	3,000.
NORTH CENTRAL COMMUNITY ACTION AGENCIES, INC 301 E. 8TH ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SUMMER YOUTH EDUCATION/RECREATION PROGRAM	10,000.
OPEN DOOR COMMUNITY ALLIANCE, INC. P.O. BOX 9726 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	OPEN DOOR ADOLESCENT HEALTH CENTER	30,000.
<b>Total from continuation sheets</b>				

MICHIGAN CITY COMMUNITY  
ENRICHMENT CORPORATION

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## Part XV Supplementary Information

## 3 Grants and Contributions Approved for Future Payment (Continuation)

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
OPEN DOOR COMMUNITY ALLIANCE, INC. P.O. BOX 9726 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MEDICATION ASSISTANCE	12,500.
PARENTS AND FRIENDS, INC. 2354 US-35 LAPORTE, IN 46350	NONE	PUBLIC CHARITY	VEHICLE MATCH GRANT	10,000.
PARENTS COUNCIL FOR CHILDREN W/SPECIAL NEEDS OF LAPORTE COUNTY, INC. 3200 S. CLEVELAND AVE. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	BARKER WOODS ENRICHMENT CENTER	25,000.
REINS OF LIFE, INC. 55200 QUINCE RD. SOUTH BEND, IN 46619	NONE	PUBLIC CHARITY	REINS OF LIFE HORSE CARE	30,000.
SAMARITAN COUNSELING CENTER 340 COMMERCE SQUARE MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SUPPORTING DEVELOPMENT OF HEALTHY COPING SKILLS IN HIGH RISK CHILDREN IN MCAS	3,500.
SOUTHERN SHORE ART ASSOCIATION 722 FRANKLIN ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	PERSPECTIVES FROM EXTRAORDINARY YOUNG ADULTS	2,500.
ST. PAUL LUTHERAN CHURCH & SCHOOL 818 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CHILLER	4,500.
HOUSING OPPORTUNITIES, INC. 2001 CALUMET AVE #1, VALPARAISO, IN 46383	NONE	PUBLIC CHARITY	INCOME BASED RECOVERY-AFFORDABLE SUBSTANCE ABUSE TREATMENT ENRICHING STUDENTS	3,000.
IMAGINATION STATION 1200 E COOLSPRING AVE MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SUMMER CAMP	12,300.
THE SALVATION ARMY 1201 FRANKLIN ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CHILDREN'S CAMP	5,000.
<b>Total from continuation sheets</b>				

MICHIGAN CITY COMMUNITY  
ENRICHMENT CORPORATION

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## Part XV Supplementary Information

## 3 Grants and Contributions Approved for Future Payment (Continuation)

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
THE SALVATION ARMY 1201 FRANKLIN ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	GIFT OF WARMTH	47,000.
THE SALVATION ARMY 1201 FRANKLIN ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	WEEKEND BACKPACK PROGRAM	4,000.
THE SALVATION ARMY 1201 FRANKLIN ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MEN'S SHELTER	44,000.
THE SALVATION ARMY 1201 FRANKLIN ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	DIAPER BANK PROGRAM	3,000.
THE SALVATION ARMY 1201 FRANKLIN ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	FOOD PANTRY PROGRAM	32,000.
INTERNATIONAL FRIENDSHIP GARDENS 2055 E. US. 12 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	THE FRIENDSHIP BOTANICAL GARDENS ECO-ADVENTURES SERIES	2,000.
YOUTH SERVICE BUREAU/BIG BROTHERS BIG SISTERS 228 W. FOURTH ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MICHIGAN CITY TEEN COURT	20,000.
YOUTH SERVICE BUREAU/BIG BROTHERS BIG SISTERS 228 W. FOURTH ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	KIDS ON THE BLOCK	5,000.
YOUTH SERVICE BUREAU/BIG BROTHERS BIG SISTERS 228 W. FOURTH ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SCHOOL BUDDIES - SPRINGFIELD ELEMENTARY SCHOOL	5,000.
IVY TECH COMMUNITY COLLEGE OF INDIANA REGION 1 3714 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	PLANTING THE SEEDS OF HEALTH AND SCIENCE AWARENESS	1,100.
Total from continuation sheets				

**MICHIGAN CITY COMMUNITY  
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## Part XV Supplementary Information

### 3 Grants and Contributions Approved for Future Payment (Continuation)

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
MICHIANA RESOURCES, INC. 4315 E MICHIGAN BLVD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	GUARDIANSHIP SERVICES FOR THE ELDERLY AND DISABLED	15,000.
PARENT'S COUNCIL FOR CHILDREN WITH SPECIAL NEEDS OF LAPORTE COUNTY, INC. 3200 CLEVELAND AVE MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SUMMER CAMP PARTNERSHIP	9,500.
POLISH HERITAGE ASSOCIATION OF MICHIGAN CITY 109 WHITE OAK DR. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	REVITALIZATION OF THE POLISH GARDENS AT FRIENDSHIP BOTANICAL GARDENS	2,500.
PORTER-STARKE SERVICES FOUNDATION 601 WALL ST VALPARAISO, IN 46383	NONE	PUBLIC CHARITY	MENTAL HEALTH FIRST AID: MILITARY MEMBERS, VETERANS, AND THEIR FAMILIES	5,000.
THE SOCIAL AND LEARNING INSTITUTE FOR THE DISADVANTAGED, INC. 201 E GARFIELD ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	INTERACTIVE TECHNOLOGY FOR SPECIAL NEEDS ADULTS	1,500.
SOUL STEPPERS DRILL TEAM, INC. 1033 PROVIDENCE ST. MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	THE ART OF STEPPING FOR HEALTH AND TOTAL WELL-BEING	5,000.
STEPPING STONE SHELTER FOR WOMEN, INC. 414 KENNEDY CT, MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	RAPE RECOVERY AND VICTIM ADVOCACY	70,000.
INDIANA GUARDIANSHIP SERVICES, INC. 813 LINCOLNWAY, SUITE 401 LAPORTE, IN 46350	NONE	PUBLIC CHARITY	HELPING CITIZENS PAY THEIR BILLS	11,250.

**Total from continuation sheets**

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INVESTMENT SAVINGS ACCOUNTS	1,182.	1,182.	
TOTAL TO PART I, LINE 3	1,182.	1,182.	

## FORM 990-PF LEGAL FEES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
JENNIFER KOETHE, ATTORNEY-AT-LAW	10,707.	0.		10,707.
TO FM 990-PF, PG 1, LN 16A	10,707.	0.		10,707.

## FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	1,135.	0.		1,135.
OTHER PROFESSIONAL FEES	500.	0.		500.
TO FORM 990-PF, PG 1, LN 16C	1,635.	0.		1,635.

## FORM 990-PF OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	315.	0.		315.
CONTRACT LABOR	1,935.	0.		1,935.
OFFICE SUPPLIES	14.	0.		14.
BANQUET EXPENSE	3,037.	0.		3,037.
TO FORM 990-PF, PG 1, LN 23	5,301.	0.		5,301.

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	5
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DESCRIPTION	AMOUNT
CONTRIBUTION RETURNED - INCOME MODIFICATION	7,038.
TOTAL TO FORM 990-PF, PART III, LINE 3	7,038.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	6
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NAME OF CONTRIBUTOR	ADDRESS
BLUE CHIP CASINO, INC.	777 BLUE CHIP DRIVE, MICHIGAN CITY, IN 46360

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT	7
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT
GEORGE KAZMIERCZAK 100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360	DIRECTOR 1.00	0.	0.
CHRIS CARTER 100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360	DIRECTOR 1.00	0.	0.
DAVID MCCRAY 100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360	DIRECTOR 1.00	0.	0.
STEVE JANUS 100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360	SECRETARY/TREASURER 1.00	0.	0.
SUE WEBSTER 100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360	DIRECTOR 1.00	0.	0.

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JACK VANETTEN 100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360	DIRECTOR 1.00	0.	0.	0.
RON MILLER 100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360	PRESIDENT 1.00	0.	0.	0.
JACK ELIA 100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360	VICE PRESIDENT 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

## Part XV Supplementary Information

**3b Grants and Contributions Approved for Future Payment Continuation of Purpose of Grant or Contribution**

NAME OF RECIPIENT - HOUSING OPPORTUNITIES, INC.

## **INCOME BASED RECOVERY-AFFORDABLE SUBSTANCE ABUSE TREATMENT**

ENRICHING STUDENTS BEYOND THE CLASSROOM, PHASE III