

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

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

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

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

OMB No 1545-0052

2016

Open to Public Inspection

For calendar year 2016 or tax year beginning

, 2016, and ending

, 20

Name of foundation

1ST SOURCE FOUNDATION 480008010

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

Room/suite

P.O. BOX 1602

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

SOUTH BEND, IN 46634

A Employer identification number

35-6034211

B Telephone number (see instructions)

574-235-2790

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☐ Final return☐ Address change☐ Initial return of a former public charity☐ Amended return☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at

end of year (from Part II, col. (c), line

16) ▶ \$ 31,295,474.

J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify)

(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) (see instructions).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

| | (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 (attach schedule) | 549,328. | | | |
| 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B. | | | | |
| 3 Interest on savings and temporary cash investments | | | | |
| 4 Dividends and interest from securities | 697,560. | 697,560. | 697,560. | STMT 1 |
| 5a Gross rents | | | | |
| b Net rental income or (loss) | | | | |
| 6a Net gain or (loss) from sale of assets not on line 10 | 9,419,539. | | | |
| b Gross sales price for all assets on line 6a | 11,872,003. | | | |
| 7 Capital gain net income (from Part IV, line 2) | | 9,419,539. | | |
| 8 Net short-term capital gain | | | | |
| 9 Income modifications | | | | |
| 10a Gross sales less returns and all other costs | | | | |
| b Less: Cost of goods sold | | | | |
| c Gross profit or (loss) (attach schedule) | | | | |
| d Other income (attach schedule) | | | | |
| Total. Add lines 1 through 11 | 10,666,427. | 10,117,099. | 697,560. | |
| 12 Compensation of officers, directors, trustees, etc. | 100,448. | | | |
| 13 Other employee salaries and wages | | | | |
| 14 Pension plans, employee benefits | | | | |
| 15 Legal fees (attach schedule) | | | | |
| b Accounting fees (attach schedule) | 1,900. | 1,900. | NONE | NONE |
| c Other professional fees (attach schedule) | | | | |
| 17 Interest | | | | |
| 18 Taxes (attach schedule) (see instructions) | 119,811. | | | |
| 19 Depreciation (attach schedule) and depletion | | | | |
| 20 Occupancy | | | | |
| 21 Travel, conferences, and meetings | | | | |
| 22 Printing and publications | | | | |
| 23 Other expenses (attach schedule) | 485. | | | |
| 24 Total operating and administrative expenses. Add lines 13 through 23. | 222,644. | 1,900. | NONE | NONE |
| 25 Contributions, gifts, grants paid | 1,317,135. | | | 1,317,135. |
| 26 Total expenses and disbursements. Add lines 24 and 25 | 1,539,779. | 1,900. | NONE | 1,317,135. |
| 27 Subtract line 26 from line 12 | | | | |
| a Excess of revenue over expenses and disbursements | 9,126,648. | | | |
| b Net investment income (if negative, enter -0-) | | 10,115,199. | | |
| c Adjusted net income (if negative, enter -0-) | | | 697,560. | |

JSA For Paperwork Reduction Act Notice, see instructions.

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| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | Beginning of year | End of year | |
|-----------------------------|---|---|-------------------|----------------|-----------------------|
| | | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable ▶ | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable ▶ | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 8 | Inventories for sale or use | | | |
| | 9 | Prepaid expenses and deferred charges | | | |
| | 10a | Investments - U S and state government obligations (attach schedule) | | | |
| | b | Investments - corporate stock (attach schedule) | | | |
| | c | Investments - corporate bonds (attach schedule) | | | |
| | 11 | Investments - land, buildings, and equipment basis ▶ | | | |
| | Less: accumulated depreciation (attach schedule) ▶ | | | | |
| 12 | Investments - mortgage loans | | | | |
| 13 | Investments - other (attach schedule) STMT .6 . | 16,698,545. | 25,304,652. | 31,295,474. | |
| 14 | Land, buildings, and equipment basis ▶ | | | | |
| | Less: accumulated depreciation (attach schedule) ▶ | | | | |
| 15 | Other assets (describe ▶) | | | | |
| 16 | Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) | 16,698,545. | 25,304,652. | 31,295,474. | |
| Liabilities | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| | 19 | Deferred revenue | | | |
| | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| | 21 | Mortgages and other notes payable (attach schedule) | | | |
| | 22 | Other liabilities (describe ▶) | | | |
| 23 | Total liabilities (add lines 17 through 22) | | NONE | | |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. | | | | |
| | 24 | Unrestricted | | | |
| | 25 | Temporarily restricted | | | |
| | 26 | Permanently restricted | | | |
| | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/> | | | | |
| | 27 | Capital stock, trust principal, or current funds | 16,698,545. | 25,304,652. | |
| | 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 (see instructions) | 16,698,545. | 25,304,652. | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | 16,698,545. | 25,304,652. | |

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 | 16,698,545. |
| 2 | Enter amount from Part I, line 27a | 2 | 9,126,648. |
| 3 | Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 8 | 3 | 3,708. |
| 4 | Add lines 1, 2, and 3 | 4 | 25,828,901. |
| 5 | Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 9 | 5 | 524,249. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 25,304,652. |

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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.) |
|--|--|---|---|--------------------------------------|----------------------------------|
| 1 a PUBLICLY TRADED SECURITIES | | | | | |
| b OTHER GAINS AND LOSSES | | | | | |
| 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) | | |
| a 11,875,747. | | 2,452,464. | 9,423,283. | | |
| b -3,744. | | | -3,744. | | |
| 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 | | | 9,423,283. | | |
| b | | | -3,744. | | |
| 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 | 9,419,539. | |
| 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) (see instructions). If (loss), enter -0- in Part I, line 8 | | | 3 | | |

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.

| (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 | 1,342,205. | 28,703,399. | 0.046761 |
| 2014 | 1,105,123. | 27,366,546. | 0.040382 |
| 2013 | 1,067,797. | 23,552,382. | 0.045337 |
| 2012 | 854,538. | 19,749,818. | 0.043268 |
| 2011 | 812,797. | 17,990,782. | 0.045179 |
| 2 Total of line 1, column (d) | | | 2 0.220927 |
| 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 0.044185 |
| 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 | | | 4 29,533,823. |
| 5 Multiply line 4 by line 3. | | | 5 1,304,952. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b). | | | 6 101,152. |
| 7 Add lines 5 and 6. | | | 7 1,406,104. |
| 8 Enter qualifying distributions from Part XII, line 4. If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions. | | | 8 1,317,135. |

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) | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b | 1 | 202,304. |
| c | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b) | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | |
| 3 | Add lines 1 and 2 | 3 | 202,304. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | NONE |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | 202,304. |
| 6 | Credits/Payments: | | |
| a | 2016 estimated tax payments and 2015 overpayment credited to 2016 | 6a | 72,000. |
| b | Exempt foreign organizations - tax withheld at source | 6b | NONE |
| c | Tax paid with application for extension of time to file (Form 8868) | 6c | 130,345. |
| d | Backup withholding erroneously withheld | 6d | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | 202,345. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached | 8 | 4. |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | 37. |
| 11 | Enter the amount of line 10 to be Credited to 2017 estimated tax <input type="checkbox"/> 37. Refunded <input type="checkbox"/> | 11 | |

Part VII-A Statements Regarding Activities

| | Yes | No |
|--|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities | | X |
| c Did the foundation file Form 1120-POL for this year? | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____ | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____ | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities | | X |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | X |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T | | X |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | X | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | X | |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> IN | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation | X | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | X | |

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Part VII-A Statements Regarding Activities (continued)

| | Yes | No |
|---|-----|----|
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | | X |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) | | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A | X | |
| 14 The books are in care of ▶ 1ST SOURCE BANK Telephone no. ▶ (574) 235-2119 Located at ▶ 100 N MICHIGAN, SOUTH BEND, IN ZIP+4 ▶ 46601 | | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 | | |
| 16 At any time during calendar year 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 ▶ | | 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 <input checked="" type="checkbox"/> No | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> No | |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ▶ | | |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? | | X |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | |
| a At the end of tax year 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 ▶ 2011 , , , | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) | | X |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ , , , , , | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| b If "Yes," did it have excess business holdings in 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) | | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | X |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? | | X |

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

- 5a During the year did the foundation pay or incur any amount to
- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No
- b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No
- Organizations relying on a current notice regarding disaster assistance check here ☐
- c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No
- If "Yes," attach the statement required by Regulations section 53.4945-5(d)
- 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
- If "Yes" to 6b, file Form 8870
- 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No
- b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

5b

6b

7b

X

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

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 11 | | 100,448. | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

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

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

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

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

[illegible]

| | |
|---|-------------|
| Total number of others receiving over \$50,000 for professional services | NONE |
|---|-------------|

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

| 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 NONE | |
| 2 | |
| 3 | |
| 4 | |

Part IX-B Summary of Program-Related Investments (see instructions)

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

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

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

| | | | |
|----------|---|-----------|-------------|
| 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 | 29,983,577. |
| b | Average of monthly cash balances | 1b | NONE |
| c | Fair market value of all other assets (see instructions). | 1c | NONE |
| d | Total (add lines 1a, b, and c) | 1d | 29,983,577. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | NONE |
| 3 | Subtract line 2 from line 1d | 3 | 29,983,577. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). | 4 | 449,754. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 29,533,823. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,476,691. |

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 | 1,476,691. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 | 2a | 202,304. |
| b | Income tax for 2016. (This does not include the tax from Part VI.) | 2b | |
| c | Add lines 2a and 2b | 2c | 202,304. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 1,274,387. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | NONE |
| 5 | Add lines 3 and 4 | 5 | 1,274,387. |
| 6 | Deduction from distributable amount (see instructions). | 6 | NONE |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. | 7 | 1,274,387. |

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 | 1,317,135. |
| b | Program-related investments - total from Part IX-B | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | NONE |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | NONE |
| b | Cash distribution test (attach the required schedule) | 3b | NONE |
| 4 | Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 1,317,135. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) | 5 | N/A |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 1,317,135. |

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 | | | | 1,274,387. |
| 2 Undistributed income, if any, as of the end of 2016 | | | | |
| a Enter amount for 2015 only. | | | 1,301,793. | |
| b Total for prior years 20 <u>14</u> , 20 <u> </u> , 20 <u> </u> | | NONE | | |
| 3 Excess distributions carryover, if any, to 2016 | | | | |
| a From 2011 | NONE | | | |
| b From 2012 | NONE | | | |
| c From 2013 | NONE | | | |
| d From 2014 | NONE | | | |
| e From 2015 | NONE | | | |
| f Total of lines 3a through e | NONE | | | |
| 4 Qualifying distributions for 2016 from Part XII, line 4. ► \$ <u>1,317,135.</u> | | | | |
| a Applied to 2015, but not more than line 2a | | | 1,301,793. | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | NONE | | |
| c Treated as distributions out of corpus (Election required - see instructions) | NONE | | | |
| d Applied to 2016 distributable amount | | | | 15,342. |
| e Remaining amount distributed out of corpus. | NONE | | | |
| 5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a)) | NONE | | | NONE |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | NONE | | | |
| b Prior years' undistributed income. Subtract line 4b from line 2b. | | NONE | | |
| 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 | | NONE | | |
| d Subtract line 6c from line 6b. Taxable amount - see instructions | | NONE | | |
| e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instructions | | | | |
| f Undistributed income for 2016. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017. | | | | 1,259,045. |
| 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) | NONE | | | |
| 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) | NONE | | | |
| 9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a | NONE | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2012 | NONE | | | |
| b Excess from 2013 | NONE | | | |
| c Excess from 2014 | NONE | | | |
| d Excess from 2015 | NONE | | | |
| e Excess from 2016 | NONE | | | |

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

NOT APPLICABLE

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 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(e)(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).)

N/A

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

N/A

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

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

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

SEE STATEMENT 13

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

SEE ATTACHED STATEMENT FOR LINE 2

c Any submission deadlines

SEE ATTACHED STATEMENT FOR LINE 2

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

SEE ATTACHED STATEMENT FOR LINE 2

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

| 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 |
|---|--|--------------------------------------|-------------------------------------|------------|
| a Paid during the year SEE STATEMENT 45 | | | | 1,317,135. |
| Total | | | ▶ 3a | 1,317,135. |
| b Approved for future payment | | | | |
| Total | | | ▶ 3b | |

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

| Enter gross amounts unless otherwise indicated. | | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) Related or exempt function income (See instructions.) |
|---|--|---------------------------|---------------|--------------------------------------|---------------|--|
| | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | |
| 1 Program service revenue | | | | | | |
| a _____ | | | | | | |
| b _____ | | | | | | |
| c _____ | | | | | | |
| d _____ | | | | | | |
| e _____ | | | | | | |
| f _____ | | | | | | |
| g Fees and contracts from government agencies | | | | | | |
| 2 Membership dues and assessments | | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | | |
| 4 Dividends and interest from securities | | | | 14 | 697,560. | |
| 5 Net rental income or (loss) from real estate | | | | | | |
| a Debt-financed property | | | | | | |
| b Not debt-financed property | | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | | |
| 7 Other investment income | | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | 18 | 9,419,539. | |
| 9 Net income or (loss) from special events | | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | | |
| 11 Other revenue a _____ | | | | | | |
| b _____ | | | | | | |
| c _____ | | | | | | |
| d _____ | | | | | | |
| e _____ | | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | | | | 10,117,099. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | | 10,117,099. | |

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

[illegible]

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

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

[illegible]

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

b If "Yes," complete the following schedule.

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

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

**Sign
Here**

ABusenbar C

10/1/2017

OFFICER

May the IRS discuss this return with the preparer shown below

Signature of officer or trustee
SHARON BUSENBARK

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2016

▶ 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

Name of the organization

Employer identification number

1ST SOURCE FOUNDATION 480008010

35-6034211

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

☒ 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).

Name of organization

1ST SOURCE FOUNDATION 480008010

Employer identification number

35-6034211

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 | 1ST SOURCE CORPORATION 100 N MICHIGAN ST SOUTH BEND, , | \$ 549,328. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

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

| DESCRIPTION | REVENUE AND EXPENSES PER BOOKS | NET INVESTMENT INCOME | ADJUSTED NET INCOME |
|--|---|-----------------------------|---------------------------|
| ----- | ----- | ----- | ----- |
| AT&T INC | 5,760. | 5,760. | 5,760. |
| AIR PRODUCTS & CHEMICALS INC | 2,034. | 2,034. | 2,034. |
| AMERICAN CAMPUS CMNTYS INC (REIT) | 1,122. | 1,122. | 1,122. |
| AMERICAN ELECTRIC POWER INC | 3,178. | 3,178. | 3,178. |
| AUTOMATIC DATA PROCESSING INC | 1,882. | 1,882. | 1,882. |
| BLACKROCK STRAT INC OPP-INS | 16,556. | 16,556. | 16,556. |
| CHEVRONTXACO CORP | 4,238. | 4,238. | 4,238. |
| CISCO SYSTEMS | 3,564. | 3,564. | 3,564. |
| DARDEN RESTAURANTS INC | 2,544. | 2,544. | 2,544. |
| DODGE & COX INTL STOCK FUND | 19,289. | 19,289. | 19,289. |
| FOUR CORNERS PROPERTY TRUST INC REIT | 3,763. | 3,763. | 3,763. |
| GECC MTN 5.400% 2/15/17 | 6,750. | 6,750. | 6,750. |
| GENERAL MILLS INC | 2,790. | 2,790. | 2,790. |
| OAKMARK INTERNATIONAL INVESTOR | 22,644. | 22,644. | 22,644. |
| HONEYWELL INTERNATIONAL INC | 2,940. | 2,940. | 2,940. |
| HORIZON BANCORP INDIANA | 89,403. | 89,403. | 89,403. |
| INTEL CORP | 2,496. | 2,496. | 2,496. |
| INTERCONTINENTAL EX 2.750% 12/01/20 | 1,130. | 1,130. | 1,130. |
| ISHARES MSCI EAFE ETF | 36,525. | 36,525. | 36,525. |
| ISHARES NASDAQ BIOTECH INDEX | 250. | 250. | 250. |
| ISHARES RUSSELL 1000 VALUE ETF | 66,015. | 66,015. | 66,015. |
| ISHARES RUSSELL 1000 GROWTH INDEX FUND | 79,509. | 79,509. | 79,509. |
| ISHARES IBOX USD HIGH YIELD | 40,876. | 40,876. | 40,876. |
| JOHNSON & JOHNSON CO | 11,025. | 11,025. | 11,025. |
| KIMBERLY-CLARK CORP | 5,096. | 5,096. | 5,096. |
| LAKELAND FINANCIAL CORP | 134,755. | 134,755. | 134,755. |
| MCDONALDS CORP | 3,430. | 3,430. | 3,430. |
| METLIFE INC | 6,947. | 6,947. | 6,947. |
| METROPOLITAN WEST TOTAL RETURN BD-I | 17,536. | 17,536. | 17,536. |
| MICROSOFT CORP | 2,646. | 2,646. | 2,646. |
| FEDERATED TREASURY OBLIGA-SS | 282. | 282. | 282. |
| NORFOLK SOUTHERN CORP | 2,360. | 2,360. | 2,360. |
| DLG393 A491 09/21/2017 16:25:46 | 480008010 | | |
| | | 2,360. | 2,360. |
| | | | STATEMENT 1 |

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

| DESCRIPTION | REVENUE AND EXPENSES PER BOOKS | NET INVESTMENT INCOME | ADJUSTED NET INCOME |
|---|---|-----------------------------|---------------------------|
| ----- | ----- | ----- | ----- |
| NOVARTIS AG SPONS ADR | 8,697. | 8,697. | 8,697. |
| NUCOR CORP | 1,500. | 1,500. | 1,500. |
| PEPSICO INC | 2,910. | 2,910. | 2,910. |
| PFIZER INC | 5,008. | 5,008. | 5,008. |
| PROCTER & GAMBLE CO | 3,206. | 3,206. | 3,206. |
| T. ROWE PRICE MID-CAP GROWTH FUND | 2,117. | 2,117. | 2,117. |
| SPDR S&P MIDCAP 400 ETF TRUST | 582. | 582. | 582. |
| SPECTRA ENERGY CORP | 4,455. | 4,455. | 4,455. |
| TEMPLETON GLOBAL BOND FUND-AD | 2,228. | 2,228. | 2,228. |
| U S TREASURY BOND 7.25% DUE 05/15/2016 | 3,625. | 3,625. | 3,625. |
| U.S. TREASURY TIPS 1.625% 1/15/18 | 3,517. | 3,517. | 3,517. |
| VANGUARD S/T INVEST GR-ADM | 13,589. | 13,589. | 13,589. |
| VANGUARD MSCI EMERGING MARKETS ETF | 26,072. | 26,072. | 26,072. |
| VERIZON COMMUNICATIONS | 5,909. | 5,909. | 5,909. |
| ZOETIS INC | 499. | 499. | 499. |
| UNITS IN INCOME FUND OF 1ST SOURCE BANK | 14,308. | 14,308. | 14,308. |
| LAPORTE COMM DEVPMT PTRSHP, LLC K-1 | 3. | 3. | 3. |
| | ----- | ----- | ----- |
| TOTAL | 697,560. | 697,560. | 697,560. |
| | ===== | ===== | ===== |

FORM 990PF, PART I - ACCOUNTING FEES

=====

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- | NET INVESTMENT INCOME ----- | ADJUSTED NET INCOME ----- | CHARITABLE PURPOSES ----- |
|----------------------|--|--------------------------------------|------------------------------------|---------------------------------|
| TAX PREPARATION FEES | 1,900. | 1,900. | | |
| TOTALS | 1,900. | 1,900. | NONE | NONE |
| | ===== | ===== | ===== | ===== |

FORM 990PF, PART I - TAXES

=====

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- |
|--------------------------------|--|
| FOREIGN TAXES | 3,044. |
| FEDERAL TAX PAYMENT - PRIOR YE | 35,330. |
| FEDERAL ESTIMATES - PRINCIPAL | 72,000. |
| FOREIGN TAXES ON QUALIFIED FOR | 7,895. |
| FOREIGN TAXES ON NONQUALIFIED | 1,542. |
| | ----- |
| TOTALS | 119,811. |
| | ===== |

FORM 990PF, PART I - OTHER EXPENSES
=====

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- |
|----------------------|--|
| OTHER EXPENSES | 485. |
| | ----- |
| TOTALS | 485. |
| | ===== |

1ST SOURCE FOUNDATION 480008010

35-6034211

FORM 990PF, PART II - OTHER INVESTMENTS

=====

| DESCRIPTION | COST/ FMV C OR F | ENDING BOOK VALUE | ENDING FMV |
|-------------------------------|------------------------|----------------------|---------------|
| ----- | ----- | ----- | --- |
| FEDERATED TREASURY OBLIG MMF | C | 2,601,988. | 2,601,988. |
| METROPOLITAN WEST BOND FD | C | 573,769. | 558,911. |
| TEMPLETON GLOBAL BOND FUND | C | | |
| 1ST SOURCE INCOME FUND | C | 359,751. | 350,961. |
| U S TREAS 7.25% BD 5/15/2016 | C | | |
| U S TREAS TIPS 1.625% 1/15/18 | C | 112,556. | 112,476. |
| BLACKROCK STRAT INC OPP | C | 640,000. | 621,061. |
| ENDOCYTE INC | C | 195,676. | 80,835. |
| GENERAL ELECTRIC 5.4% 2017 | C | | |
| AUTOMATIC DATA PROCESSING INC | C | 57,023. | 102,780. |
| DODGE & COX INTERNTL STOCK | C | 829,142. | 847,415. |
| VERIZON COMMUNICATIONS | C | 98,505. | 138,788. |
| PROCTER & GAMBLE | C | 79,404. | 100,896. |
| CHEVRON CORPORATION | C | 110,351. | 129,470. |
| HORIZON BANCORP INDIANA | C | 26,173. | 840,000. |
| LAKELAND FINANCIAL CORP | C | 209,375. | 4,120,320. |
| JOHNSON & JOHNSON CO | C | 199,489. | 403,235. |
| NOVARTIS AG-ADR | C | 154,028. | 233,088. |
| PFIZER INC | C | 149,913. | 135,539. |
| INDIANA COMM BUSINESS CREDIT | C | 20,000. | 20,000. |
| INTEL CORP | C | 61,384. | 87,048. |
| CISCO SYSTEMS INC | C | 69,066. | 108,792. |
| AMERICAN ELECTRIC POWER | C | 59,814. | 88,144. |
| MICROSOFT CORP | C | 53,865. | 111,852. |
| KIMBERLY CLARK CORP | C | 97,518. | 159,768. |
| SPECTRA ENERGY CORP | C | 82,329. | 112,998. |
| AMERICAN CAMPUS CMNTYS INC | C | 45,650. | 49,770. |
| METLIFE INC | C | 62,857. | 237,709. |
| HONEYWELL INTERNATIONAL INC | C | 70,749. | 139,020. |

1ST SOURCE FOUNDATION 480008010

35-6034211

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

| DESCRIPTION ----- | COST/ FMV C OR F ----- | ENDING BOOK VALUE ----- | ENDING FMV --- |
|---------------------------------|---------------------------------|-------------------------------|----------------------|
| NORFOLK SOUTHERN CORP | C | 65,655. | 108,070. |
| AIR PRODUCTS & CHEMICALS INC | C | 45,303. | 86,292. |
| NUCOR CORP | C | 39,920. | 59,520. |
| PEPSICO INC | C | 72,479. | 104,630. |
| ZOETIS INC | C | 47,712. | 70,338. |
| ISHARES IBOXX H/Y CORP BOND ET | C | 901,132. | 865,500. |
| VANGUARD S/T INVEST GR-ADM | C | 689,618. | 687,618. |
| ISHARES NASDAQ BIOTECH ETF | C | 238,853. | 185,766. |
| ISHARES RUSSELL 1000 GROWTH ET | C | 6,606,787. | 6,933,890. |
| ISHARES RUSSELL 1000 VALUE ETF | C | 4,188,288. | 4,481,200. |
| OAKMARK INT'L FD-I | C | 1,451,460. | 1,306,101. |
| T. ROWE PRICE MID-CAP GROWTH FU | C | 743,450. | 693,677. |
| VANGUARD MSCI EMERGING MKTS ET | C | 1,186,103. | 1,041,198. |
| FOUR CORNERS PROP TRUST INC | C | 10,062. | 12,291. |
| LAPORTE COMM DEVELOP PRTRSH L | C | 29,849. | 28,978. |
| SPDR S&P MIDCAP 400 ETF | C | 139,715. | 150,865. |
| ISHARES MSCI EAFE ETF | C | 1,284,159. | 1,327,790. |
| VERSUM MATERIALS INC | C | 4,035. | 8,421. |
| INTERCONTINENTAL EX 2.750% 12/ | C | 102,462. | 100,650. |
| GECC MTN 5.40% 2/15/17 | C | 124,964. | 125,609. |
| ADVANSIX INC | C | 379. | 1,063. |
| AT&T, INC | C | 109,036. | 127,590. |
| DARDEN RESTAURANTS INC | C | 56,099. | 87,264. |
| GENERAL MLS | C | 60,839. | 92,655. |
| MCDONALDS COPR | C | 85,918. | 115,634. |
| ALERIAN MLP ETF | C | | |
| TOTALS | | 25,304,652. | 31,295,474. |

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

| DESCRIPTION ----- | AMOUNT ----- |
|--|-----------------|
| 2016 VANGUARD S/T INVEST INCOME TIMING | 1,152. |
| 2016 BLACKROCK STRAT INC INCOME | 1,166. |
| 2016 METROPOLITAN WEST INCOME TIMING | 903. |
| 2016 FEDERATED TREAS OBLIG | 5. |
| 2016 LAPORTE COMM DEV LP LLC K-1 | 482. |
| | ----- |
| TOTAL | 3,708. |
| | ===== |

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

| DESCRIPTION ----- | AMOUNT ----- |
|--------------------------------------|-----------------|
| 2017 METROPOLITAN WEST INCOME TIMING | 893. |
| 2017 VANGUARD INCOME TIMING | 1,086. |
| 2017 BLACKROCK STRAT INCOME | 1,555. |
| 2017 FEDERATED TREAS OBLIG | 129. |
| LAKELAND FINANCIAL AT FMV | 519,480. |
| 2017 FOUR CORNERS INCOME TIMING | 145. |
| 2017 SPDR 400 ETF INCOME TIMING | 582. |
| 2017 TIPS INCOME TIMING | 141. |
| 2016 TIPS INCOME TIMING | 52. |
| WASH SALE NOT INCLUDED IN INCOME | 163. |
| DIFFERENCE DUE TO ROUNDING | 23. |
| | ----- |
| TOTAL | 524,249. |
| | ===== |

GAINS AND LOSSES FROM PASS-THRU ENTITIES
=====NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS
AND OTHER FIDUCIARIESCOMMON TRUST FUNDS -105.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-105.00
=====NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS
AND OTHER FIDUCIARIESCOMMON TRUST FUNDS -3,639.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

-3,639.00
=====

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

OFFICER NAME:

1ST SOURCE BANK

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 100,448.

OFFICER NAME:

REX MARTIN

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

JAMES SEITZ

ADDRESS:

100 N MICHIGAN

SOITH BEND, IN 46601

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

CHRISTOPHER MURPHY, III

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

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

OFFICER NAME:

NAJEEB KHAU

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

W. D. JONES, III

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

JOHN PHAIR

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

TOTAL COMPENSATION:

100,448.

=====

1ST SOURCE FOUNDATION 480008010
FORM 990PF, PART XV - LINES 2a - 2d
=====

35-6034211

RECIPIENT NAME:

1ST SOURCE BANK, TRUST DEPT

ADDRESS:

100 N MICHIGAN

SOUTH BEND, IN 46601

FORM, INFORMATION AND MATERIALS:

STATEMENT OF PURPOSE CONCERNING GRANT REQUEST

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

NONE

STATEMENT 13

=====

RECIPIENT NAME:

NORTHWEST INDIANA JUNIOR GOLF ASSOC.

C/O SANDY CREEK COUNTRY CLUB

ADDRESS:

1001 SANDY CREEK DRIVE SOUTH

CHESTERTON, IN 46304

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

AMERICAN HEART ASSOCIATION

MIDWEST AFFILIATE

ADDRESS:

P O BOX 681550

INDIANAPOLIS, IN 46268

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 7,500.

RECIPIENT NAME:

CHAMBER OF COMMERCE OF ST. JOSEPH CO

ADDRESS:

401 EAST COLFAX AVENUE

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

REDEEMER RADIO

ADDRESS:

4618 E. STATE ST.

FORT WAYNE, IN 46815

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

KRASL ART CENTER

ADDRESS:

707 LAKE BLVD

ST. JOSEPH, MI 49085

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 100,000.

RECIPIENT NAME:

UNITED WAY OF MARSHALL COUNTY

ADDRESS:

2701 NORTH MICHIGAN STREET

PLYMOUTH, IN 46563

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 2,205.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

UNITED WAY OF WHITLEY COUNTY

ADDRESS:

P.O. BOX 464

COLUMBIA CITY, IN 46725

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 360.

RECIPIENT NAME:

SOUTH BEND HERITAGE FOUNDATION

ADDRESS:

803 LINCOLNWAY WEST

SOUTH BEND, IN 46616

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:

NEAR NORTHWEST NEIGHBORHOOD

ADDRESS:

P O BOX 1132

SOUTH BEND, IN 46624

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

STATEMENT 16

RECIPIENT NAME:

FRONTLINE FOUNDATIONS

ADDRESS:

1008 BROADWAY

CHESTERTON, IN 46304

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 3,955.

RECIPIENT NAME:

MARSHALL COUNTY EDC

ADDRESS:

2864 MILLER DRIVE

PLYMOUTH, IN 46563

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

KELLY CARES FOUNDATION

ADDRESS:

GUGLIELMINO COMPLEX NOTRE DAME UNI

NOTRE DAME, IN 46556

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

100 BLACK MEN OF GREATER SOUTH BEND

ADDRESS:

2043 SOUTH BEND AVENUE

SOUTH BEND, IN 46637

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

INDEPENDENT CAT SOCIETY

ADDRESS:

4061 COUNTY LINE ROAD

WESTVILLE, IN 46391

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

LUBEZIK CENTER FOR THE ARTS

ADDRESS:

101 W. 2ND STREET

MICHIGAN CITY, IN 46360

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

STATEMENT 18

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

CRIME STOPPERS, INC
OFFICER KAYLA MILLER, COORDINATOR

ADDRESS:

701 W. SAMPLE STREET
SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

PORTER STARKE SERVICES FOUNDATION

ADDRESS:

601 WALL STREET
VALPARAISO, IN 46383-2514

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

POSITIVE RESOURCE CONNECTION

ADDRESS:

525 OXFORD STREET
FORT WAYNE, IN 46806

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

STATEMENT 19

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

HABITAT FOR HUMANITY
OF ST. JOSEPH COUNTY

ADDRESS:

402 EAST SOUTH STREET
SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:

UNITED WAY OF LAPORTE COUNTY

ADDRESS:

115 EAST 4TH STREET
MICHIGAN CITY, IN 46360

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 6,890.

RECIPIENT NAME:

SOUTH BEND MUSEUM OF ART

ADDRESS:

120 SOUTH ST. JOSEPH STREET
SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,500.

=====

RECIPIENT NAME:

UNITED WAY OF ALLEN COUNTY

ADDRESS:

334 E. BERRY STREET

FORT WAYNE, IN 46802

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 3,840.

RECIPIENT NAME:

CULVER ACADEMIES

AATN: JOHN N. BUXTON

ADDRESS:

1300 ACADEMY ROAD

CULVER, IN 46511-1291

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

GRACE COLLEGE

ADDRESS:

200 SEMINARY DRIVE

WINONA LAKE, IN 46590

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 50,000.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

HUNTINGTON UNIVERSITY

AATN: PEG DEBOLT

ADDRESS:

2303 COLLEGE AVENUE

HUNTINGTON, IN 46750

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

ST. MARY'S COLLEGE

ADDRESS:

OFFICE OF DEVELOPMNET

NOTRE DAME, IN 46556

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 35,000.

RECIPIENT NAME:

UNIVERSITYOF NOTRE DAME

INNOVATION PARK

ADDRESS:

P O BOX 368

NOTRE DAME, IN 46556

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 55,000.

RECIPIENT NAME:

YWCA

ADDRESS:

1610 SPY RUN AVENUE
FORT WAYNE, IN 46805

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 40,500.

RECIPIENT NAME:

YWCA NORTH CENTRAL INDIANA

ADDRESS:

1102 S. FELLOWS ST.
SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:

LAPORTE COUNTY YMCA

ADDRESS:

1202 SPRING ST
MICHIGAN CITY, IN 46360

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:

CHILD AND PARENT SERVICES - CAPS

ADDRESS:

1000 WEST HIVELY AVENUE

ELKHART, IN 46517

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

UNITED WAY OF GREATER LAFAYETTE

ADDRESS:

1114 STATE STREET

LAFAYETTE, IN 47905

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 585.

RECIPIENT NAME:

JUNIOR ACHIEVEMENT OF NO. INDIANA

ADDRESS:

601 NOBLE DRIVE

FORT WAYNE, IN 46825

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 75,000.

RECIPIENT NAME:

BASHOR CHILDREN'S HOME

ADDRESS:

P O BOX 843

GOSHEN, IN 46527

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:

BETHEL COLLEGE

ADDRESS:

1001 BETHEL CIRCLE

MISHAWAKA, IN 46545-5591

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 50,000.

RECIPIENT NAME:

UNITED WAY OF ELKHART COUNTY

ADDRESS:

P. O. BOX 3048

ELKHART, IN 46515

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,220.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

CANCER SERVICE OF NORTHERN INDIANA

ADDRESS:

6316 MUTUAL DRIVE

FORT WAYNE, IN 46825

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

LOGAN CENTER

ADDRESS:

2505 EAST JEFFERSON BLVD

SOUTH BEND, IN 46615

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:

UNITED WAY OF KOSCIUSKO COUNTY

ADDRESS:

P.O. BOX 923

WARSAW, IN 46581

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 720.

STATEMENT 26

=====

RECIPIENT NAME:

UNITED WAY OF ST JOSEPH COUNTY

ADDRESS:

P. O. BOX 6396

SOUTH BEND, IN 46660

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 71,500.

RECIPIENT NAME:

JOHN GLEN SCHOOL CORPORATION

DARLENE FLORA

ADDRESS:

506 ROOSEVELT ROAD

WALKERTON, IN 46574

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 12,600.

RECIPIENT NAME:

PLYMOUTH COMMUNITY SCHOOL CORP

LINCOLN JUNIOR HIGH SCHOOL

ADDRESS:

220N. LIBERTY STREET

PLYMOUTH, IN 46563

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 2,600.

RECIPIENT NAME:

PATHFINDER SERVICES

ATTN: DIANA LAUX

ADDRESS:

2824 THEATER AVENUE

HUNTINGTON, IN 46750

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

THE HISTORY MUSEUM

ADDRESS:

808 W. WASHINGTON

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 28,000.

RECIPIENT NAME:

UNITED WAY OF HUNTINGTON COUNTY

ADDRESS:

P O BOX 347

HUNTINGTON, IN 46750

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 225.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

=====

RECIPIENT NAME:

MARQUETTE CATHOLIC HIGH SCHOOL

ADDRESS:

306 W. 10TH STREET

MICHIGAN CITY, IN 46360

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

HOLY CROSS COLLEGE

ADDRESS:

54514 S R 933, PO BOX 308

NOTRE DAME, IN 46556

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 2,500.

RECIPIENT NAME:

MICHIANA PUBLIC BROADCASTING

ADDRESS:

300 WEST JEFFERSON

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

NORTH CENTRAL INDIANA MEDICAL EDU FND

ADDRESS:

1400E ANGELA BLVD
SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

LACASA DE AMISTAD

ADDRESS:

746 SOUTH MEADE STREET
SOUTH BEND, IN 46619

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

GREATER KALAMAZOO UNITED WAY

ADDRESS:

709 S. WESTNEDGE AVENUE
KALAMAZOO, MI 49007

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 540.

STATEMENT 30

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

=====

RECIPIENT NAME:

SOUTHOLD DANCE THEATER

ADDRESS:

914 LINCOLN WAY WEST

SOUTH BEND, IN 46616

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 13,450.

RECIPIENT NAME:

WOMEN'S CARE CENTER

ATTN: ANN MANION

ADDRESS:

360 N. NOTRE DAME AVENUE

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

FISCHOFF NAT'L CHAMBER OF MUSIC ASSN

ADDRESS:

303 BROWNSON HALL

NOTRE DAME, IN 46556

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 3,500.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

THE FOUNDATION OF SJHS

THE FOUNDATION OF SAINT JOSEPH

ADDRESS:

HEALTH SYSTEM

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 161,000.

RECIPIENT NAME:

UNITY FOUNDATION OF LAPORTE COUNTY

ED INVESTMENT FUND

ADDRESS:

P.O. BOX 527

MICHIGAN CITY, IN 46361

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:

LAPORTE COUNTY HABITAT FOR HUMANITY

ADDRESS:

225 EAST GARFIELD STREET

MICHIGAN CITY, IN 46361-8874

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

SOUTH BEND ALUMNI ASSOCIATION

ADDRESS:

215 S ST. JOSEPH STREET

SOUTH BEND, IN

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 7,500.

RECIPIENT NAME:

HABITAT FOR HUMANITY OF ELKHART CTY

ADDRESS:

P. O. BOX 950

GOSHEN, IN 46527

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

VALPARAISO PARKS & RECREATION FND

ADDRESS:

3210 CAMPBELL STREET

VALPARAISO, IN 46385

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

HEBRON LITTLE LEAGUE INC

ADDRESS:

751 W 800 S

HEBRON, IN 46341

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 20,000.

RECIPIENT NAME:

CENTER FOR THE HOMELESS

ADDRESS:

813 SOUTH MICHIGAN ST

SOUTH BEND, IL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,750.

RECIPIENT NAME:

PLYMOUTH COMMUNITY MUSIC BOOSTERS

C/O STEHP

ADDRESS:

P. O. BOX 86

PLYMOUTH, IN 46563

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

STATEMENT 34

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

MARSHALL COUNTY COMMUNITY FOUNDATION

ADDRESS:

P. O. BOX 716

PLYMOUTH, IN 46563

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:

RONALD MCDONALD HOUSE CHARITIES

OF MICHIANA

ADDRESS:

615 N. MICHIGAN 3RD FLOOR

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 20,000.

RECIPIENT NAME:

NORTHERN INDIANA COMMUNITY FOUNDATION

ADDRESS:

314 FOURTH ST

LOGANSPOUT, IN 46947

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 990.

STATEMENT 35

RECIPIENT NAME:

BOYS AND GIRLS CLUB OF MARSHALL COUNTY

ADDRESS:

314 E. JEFFERSON STREET

PLYMOUTH, IN 46563

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:

SOUTH BEND EDUCATION FOUNDATION

ADDRESS:

P O BOX 119

SOUTH BEND, IN 46624

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

PORTER COUNTY COMMUNITY FOUNDATION

ADDRESS:

P O BOX 302

VALPARAISO, IN 46384

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 21,000.

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RECIPIENT NAME:

STARKE COUNTY YOUTH CLUB

ADDRESS:

P. O. BOX 442

KNOX, IN 46534

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

CASA OF MARSHALL COUNTY

ADDRESS:

211 W. MADISON STREET

PLYMOUTH, IN 46563

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

BLUE JACKET INC

ADDRESS:

27826 S. CALHOUN ST

FORT WAYNE, IN 46802

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 15,000.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

TOWN OF KOUTS

ADDRESS:

P O BOX 93

KOUTS, IN 46347-0093

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:

CITY OF SOUTH BEND DBA MORRIS PERFORMING

ARTS/PALAIS ROYALE

ADDRESS:

211 NORTH MICHGIAN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

PURDUE UNIVERSITY

PURDUE TECHNOLOGY BLDG ROOM 107

ADDRESS:

1733 NORTHSIDE BLDG

SOUTH BEND, IN 46634

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 4,000.

STATEMENT 38

RECIPIENT NAME:

UNITED WAY OF PORTER COUN

ADDRESS:

951 EASTPORT CENTER DR

VALPARAISO, IN 46383

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 4,260.

RECIPIENT NAME:

FRIENDS OF SCOUTING TROOP 929

LASALLE COUNCIL BOY SCOUTS OF AMERICA

ADDRESS:

1340 SOUTH BEND AVENUE

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

ALLEN COUNTY SPCA

ADDRESS:

4914 HANNA STREET

FORT WAYNE, IN 46806

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

SOUTH BEND SYMPHONY ORCHAstra

ADDRESS:

127 N MICHIGAN

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 29,000.

RECIPIENT NAME:

SCHOLARSHIP FOUNDATION OF ST. JOSEPH
COUNTY, INC.

ADDRESS:

3515 NORTH MAIN STREET

MISHAWAKA, IN 46545

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

COOLSPRING TOWNSHIP VOL. FIRE DEPT

ADDRESS:

7111 W 400 NORTH

MICHIGAN CITY, IN 46260

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 500.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

UNITED WAY OF FULTON COUNTY

ADDRESS:

P O BOX 583

ROCHESTER, IN 46975

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 585.

RECIPIENT NAME:

UNITED WAY OF SOUTHWEST MICHIGAN

ATTN:DIRECTOR OF BUSINESS

ADDRESS:

P O BOX 807

BENTON HARBOR, MI 49022

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 4,680.

RECIPIENT NAME:

THE YMCA - GREATER KALAMAZOO

ADDRESS:

1001 W. MAPLE STRRET

KALAMAZOO, MI 49008

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

STATEMENT 41

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

SAMARITAN CTR. OF SOUTHWESTERN MICH

ADDRESS:

1850 COLFAX AVENUE

BENTON HAROR, MI 49022

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

HOSPICE AT HOME

ADDRESS:

4025 HEALTH PARK LANE

ST. JOSEPH, MI 49085

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:

LAKE MICHIGAN COLLEGE FOUNDATION

ADDRESS:

2755 E. MAPIER AVENUE

BENTON HARBOR, MI 49022

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 25,000.

STATEMENT 42

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

MATCHBOX COWORKING STUDIO

ADDRESS:

P O BOX 348

LAFAYETTE, IN 47902

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 20,000.

RECIPIENT NAME:

BREMEN 2016

ADDRESS:

111 SOUTH CENTER STREET

BREMEN, IN 46506

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:

COUNCIL ON AGING OF ELKHART COUNTY

ADDRESS:

131 WEST TYLER ST. STE 1A

ELKHART, IN 46516

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 6,000.

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

HOVDE FOUNDATION

ADDRESS:

122 W. WASHINGTON AVE., STE 350

MADISON, WI 53703

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE FOUNDATION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

JUNIOR ACHIEVEMENT OF CHICAGO

ADDRESS:

651 W. WASHINGTON ST. STE 404

CHICAGO, IL 60661

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

ETHOS SCIENCE CENTER

ADDRESS:

2521 INDUSTRIAL PARKWAY

ELKHART, IN 46516

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 16,000.

STATEMENT 44

1ST SOURCE FOUNDATION 480008010

35-6034211

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

RECIPIENT NAME:

IUSB ARTS FOUNDATION

ADDRESS:

1700 MISHAWAKA AVENUE

SOUTH BEND, IN 46615

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

IUSB MICHIANA ECONOMIC FORECAST

ADDRESS:

1700 MISHAWAKA AVENUE

SOUTH BEND, IN 46615

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:

UNITED WAY OF WELLS COUNTY

ADDRESS:

122 LAMAR STREET, SUITE 118

BLUFFTON, IN 46714

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT:

NONE

AMOUNT OF GRANT PAID 180.

TOTAL GRANTS PAID:

1,317,135.

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STATEMENT 45