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For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation BEACON CREDIT UNION FOUNDATION INC		A Employer identification number 45-3814789	
% BEACON CREDIT UNION			
Number and street (or P O box number if mail is not delivered to street address) PO BOX 627	Room/suite	B Telephone number (see instructions) (260) 563-7443	
City or town, state or province, country, and ZIP or foreign postal code WABASH, IN 46992		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 79,237	J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	63,175			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	171	171		
	4 Dividends and interest from securities . . .				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	63,346	171		
	13 Compensation of officers, directors, trustees, etc	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	0	0		0
	25 Contributions, gifts, grants paid	19,250			19,250
	26 Total expenses and disbursements. Add lines 24 and 25	19,250	0		19,250
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	44,096			
	b Net investment income (if negative, enter -0-)		171		
	c Adjusted net income (if negative, enter -0-) . . .				

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	35,141	79,237		79,237	
	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)					
	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)	35,141	79,237		79,237		
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)	0	0			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐ 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.						
	27	Capital stock, trust principal, or current funds	35,141	79,237			
	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)	35,141	79,237				
31	Total liabilities and net assets/fund balances (see instructions) .	35,141	79,237				

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 35,141
2	Enter amount from Part I, line 27a	2 44,096
3	Other increases not included in line 2 (itemize) ▶ _____	3
4	Add lines 1, 2, and 3	4 79,237
5	Decreases not included in line 2 (itemize) ▶ _____	5
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 79,237

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)
1a			

(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			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	
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

1 Enter the appropriate amount in each column for each year, see 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	27,500	14,032	1 959806
2014	21,000	9,056	2 318905
2013	20,999	15,813	1 327958
2012	0	4,295	0 0
2011			
2 Total of line 1, column (d)			5 606669
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			1 401667
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			44,232
5 Multiply line 4 by line 3			61,999
6 Enter 1% of net investment income (1% of Part I, line 27b)			2
7 Add lines 5 and 6			62,001
8 Enter qualifying distributions from Part XII, line 4			19,250

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

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 ☐ 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 ☐ and enter 1% of Part I, line 27b	1	3
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	3
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	3
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	
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	0
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	3
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶	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? 	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i> 	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i> 	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ <u>IN</u>		
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? <i>If "No," attach explanation</i> .	8b	Yes
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)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> 	10	Yes

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►	13	Yes	
14	The books are in care of ► <u>BEACON CREDIT UNION</u> Telephone no ► <u>(260) 563-7443</u>			

Located at ► 586 SOUTH WABASH STREET PO BOX 6 WABASH IN ZIP+4 ► 46992

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?	16	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ►			

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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ 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)?	☐ Yes ☒ 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).	☐ Yes ☒ 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)?	☐	1b	
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?		1c	No
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?	☐ Yes ☒ No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
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).		2b	No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ 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).		3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	
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?		4b	

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)? ☐ Organizations relying on a current notice regarding disaster assistance check here. ▶ ☐	5b		No
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 <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
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 <i>If "Yes" to 6b, file Form 8870</i>	6b		No
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	7b		No

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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				
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	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Total number of other employees paid over \$50,000. ▶				

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services. ►		

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	
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	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	

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	44,906
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	44,906
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	0
3	Subtract line 2 from line 1d.	3	44,906
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	674
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	44,232
6	Minimum investment return. Enter 5% of line 5.	6	2,212

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	2,212
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	3
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	3
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	2,209
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	2,209
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	2,209

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	19,250
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	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	19,250
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	19,250

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				2,209
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			0	
b Total for prior years 2014, 2013, 2012		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				0
c From 2013.				19,995
d From 2014.				20,547
e From 2015.				26,798
f Total of lines 3a through e.	67,340			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 19,250				
a Applied to 2015, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2016 distributable amount.				2,209
e Remaining amount distributed out of corpus	17,041			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	84,381			
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.				
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 instructions			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).				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	84,381			
10 Analysis of line 9				
a Excess from 2012.				0
b Excess from 2013.				19,995
c Excess from 2014.				20,547
d Excess from 2015.				26,798
e Excess from 2016.				17,041

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

1a 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. ☐ 4942(j)(3) or ☐ 4942(j)(5)

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

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2a 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(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 organization 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))
BEACON CREDIT UNION

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

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
BEACON CREDIT UNION
PO BOX 627
WABASH, IN 46992
(260) 563-7443

b The form in which applications should be submitted and information and materials they should include
IT IS PREFERRED THAT ALL APPLICANTS UTILIZE A FORM PROVIDED BY THE FOUNDATION TO MAKE APPLICATION FOR A GRANT. A FINANCIAL NEEDS FORECAST WILL BE REQUIRED. GRANT RECIPIENTS AGREE TO PROVIDE A NARRATIVE REPORT DESCRIBING THE EFFECTIVENESS OF THE PROJECT AND THE FUNDING PROVIDED UPON REQUEST FROM THE FOUNDATION

c Any submission deadlines
ALL COMPLETED APPLICATIONS ARE TO BE SUBMITTED TO THE MARKETING DEPARTMENT PERSONNEL OF BEACON CREDI

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
A MINIMUM REQUEST OF \$250.00 WILL BE CONSIDERED

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> SEE ATTACHMENT WITH BREAKDOWN OF ORGANIZATIONS PO BOX 627 WABASH, IN 46992	NONE	PC	SEE ATTACHMENT	19,250
Total			▶ 3a	19,250
b <i>Approved for future payment</i>				
Total			▶ 3b	

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	171	
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					
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). .				171	
13 Total. Add line 12, columns (b), (d), and (e).			13		171

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

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

- 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
BEACON CREDIT UNION	501(C)(14)(A)	COMMON CONTROL

Sign Here	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.		
	*****	2017-05-15	*****
	Signature of officer or trustee	Date	Title

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

Paid Preparer Use Only	Print/Type preparer's name Lauren R Denton	Preparer's Signature	Date 2017-05-15	Check if self-employed ▶ ☐	PTIN P01571860
	Firm's name ▶ BKD LLP				Firm's EIN ▶
	Firm's address ▶ 200 E Main St Suite 700 Fort Wayne, IN 46802				Phone no (260) 460-4000

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
KENNETH DALE PO BOX 627 WABASH, IN 46992	CHAIRMAN 0 25	0	0	0
LINDSAY CULVER PO BOX 627 WABASH, IN 46992	BOARD MEMBER 0 25	0	0	0
DAVID FORGEY PO BOX 627 WABASH, IN 46992	BOARD MEMBER 0 25	0	0	0
JOHN PETERS PO BOX 627 WABASH, IN 46992	SECRETARY/TREASURER 0 25	0	0	0
JOHN MORNINGSTAR PO BOX 627 WABASH, IN 46992	BOARD MEMBER 0 25	0	0	0
ROGER BRAGG PO BOX 627 WABASH, IN 46992	BOARD MEMBER 0 25	0	0	0
HERB HORROM PO BOX 627 WABASH, IN 46992	VICE CHAIRMAN 0 25	0	0	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Depreciation Schedule

Name: BEACON CREDIT UNION FOUNDATION INC

EIN: 45-3814789

**TY 2016 Substantial Contributors
Schedule****Name:** BEACON CREDIT UNION FOUNDATION INC**EIN:** 45-3814789**Name****Address**

BEACON CREDIT UNION

PO BOX 627
WABASH, IN 46992

TY 2016 Taxes Schedule**Name:** BEACON CREDIT UNION FOUNDATION INC**EIN:** 45-3814789

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAXES				

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047 2016
	Name of the organization BEACON CREDIT UNION FOUNDATION INC	Employer identification number 45-3814789

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 other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization BEACON CREDIT UNION FOUNDATION INC	Employer identification number 45-3814789
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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	BEACON CREDIT UNION PO BOX 627 WABASH, IN46992	\$ 63,175	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Employer identification number

45-3814789

Part II	Noncash Property
---------	------------------

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

Name of organization BEACON CREDIT UNION FOUNDATION INC	Employer identification number 45-3814789
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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 information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
-----------------	--

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee

Name and Address of Grantee	Amount of Grant	Date of Grant	Purpose of Grant	Amounts Expended by Grantee	Grantor's Knowledge, Grantee Has Diverted a Portion of Funds from the Purpose of the Grant (Yes/No)	Dates of Reports Received from the Grantee	Dates and Results of Any Verification of the Grantee's Reports
1 Miami Country Military Rites Team	\$ 1,000 00	10/21/2016	Veteran Support	\$ 1,000 00	No	1/1/2017	1/1/2017
151 E Washington Ave							
Peru, IN 46970							
2 Friendship of Old LaFontaine Cemetery	\$ 1,000 00	10/25/2016	Support	\$ 1,000 00	No	1/1/2017	1/1/2017
PO Box 126							
LaFontaine, IN 46940							
3 Allen County Angels	\$ 1,000 00	10/24/2016	Support	\$ 1,000 00	No	1/1/2017	1/1/2017
1147 Brookwood Drive							
New Haven, IN 46774							
4 Stockdale Mill	\$ 500 00	10/25/2016	Community Activity	\$ 500 00	No	1/1/2017	1/1/2017
6836 N St Rd 15							
Roann, IN 46974							

Name of Organization	Organization Address	City	State	Zip	Organization Phone Number	Award Amount	Qualification
RSVP - Community Center of Caring Food Pantry	107 West 5th Street	Auburn	IN	46706	(260) 925-0917	\$ 500.00	X Exempt Organization
Matthew's Market	100 West 3rd Street	Rochester	IN	46975	(574) 223-3107	\$ 1,000.00	X Associated with Wesleyan Church (EO)
Scratching Post Cat Rescue	600 Chili Street	Peru	IN	46970	(765) 475-4926	\$ 250.00	X Exempt Organization
Animal Welfare League	3489 East 100 South	Pierceton	IN	46580	(574) 267-3008	\$ 500.00	X Exempt Organization
Isaiah 11 Ministry	6256 West 100 North	Warsaw	IN	46580	(574) 858-6036	\$ 250.00	X Exempt Organization
Community Closet	179 South Indiana Street	Warsaw	IN	46580	(574) 267-6933	\$ 500.00	X Associated with First United Methodist Church
Services for the Visually & Hearing Impaired (Grant County)	805 Spencer Adams Street	Marion	IN	46953	(765) 664-9999	\$ 1,000.00	X Exempt Organization
Stockdale Mill Foundation	6836 North State Road 15	Roann	IN	46974	(765) 833-2642	\$ 1,000.00	X Private Operating Foundation
Arc of Wabash County, Inc	595 South Miami Street PO Box 400	Wabash	IN	46992	(260) 563-8411	\$ 250.00	X Exempt Organization
Manchester Early Learning Center	806 W South Street	North Manchester	IN	46962	(260) 982-4913	\$ 500.00	X Associated with Manchester Comm Child Care Association, Inc
One World Handcrafts, Inc	226 East Main Street	North Manchester	IN	46962	(260) 982-8540	\$ 500.00	X Exempt Organization
Helping Paws Pet Haven, Inc	2242 South Marion Road	Huntington	IN	46750	(260) 468-2292	\$ 1,000.00	X Exempt Organization
Pathfinder Sweet Deals	1274 South Jefferson Boulevard	Huntington	IN	46750	(260) 200-1074	\$ 500.00	X Exempt Organization
The Christ Child Society	P O Box 12708	Fort Wayne	IN	46864	(260) 438-0709	\$ 500.00	X Exempt Organization
Nana's Creations	7997 Everglade Court	Fort Wayne	IN	46809	(260) 478-8300	\$ 250.00	X Private Operating Foundation
Dekalb Community Impact Corporation	2301 North Main Street	Auburn	IN	46706	(260) 570-4255	\$ 500.00	X Exempt Organization
Alliance Industries/Dekalb Association for Developmentally Disabled	901 East Quincy Street, PO Box 223	Garrett	IN	46738	(260) 357-5595	\$ 1,000.00	X Exempt Organization
The Lighthouse	P O Box 336	Bunker Hill	IN	46914	(765) 271-6687	\$ 250.00	X Private Operating Foundation
Marshall County Neighborhood Center	402 West Garro Street, Po Box 353	Plymouth	IN	46563	(574) 936-3388	\$ 500.00	X Exempt Organization
Blessings in a Backpack - Plymouth	12954 6th Road	Plymouth	IN	46563	(574) 936-0613	\$ 250.00	X Exempt Organization
Wee Care Children's Ministries	301 South West Street	Akron	IN	46910	(574) 598-2008	\$ 500.00	X Associated with Akron Church of God (EO)
Fulton Liberty Lions Club	507 Liberty Avenue	Fulton	IN	46931	(574) 857-6750	\$ 250.00	X Associated with National Lions Club (EO)
Area Five Agency on Aging & Community Services, Inc	1801 Smith Street	Logansport	IN	46994	(574) 722-4451	\$ 500.00	X Exempt Organization
Cass County Humane Society	700 Water Street	Logansport	IN	46947	(574) 516-1526	\$ 250.00	X Exempt Organization
Help Revive the STATE Marquee	321 East Market Street	Logansport	IN	46947	(574) 753-4648	\$ 500.00	X Private Operating Foundation
Denver Emergency Unit (E R U)	500 East Harrison Street	Denver	IN	46926	(765) 985-2341	\$ 500.00	X Municipality
Miami County Military Aites Unit	151 East Washington Avenue	Peru	IN	46970	(765) 689-9026	\$ 1,000.00	X Not a Qualified Exempt Organization
Allen County Angels	1147 Brookwood Drive	New Haven	IN	46774	(260) 418-3865	\$ 1,000.00	X Private Operating Foundation
Allen County CASA	11801 Lima Road	Fort Wayne	IN	46818	(260) 449-7190	\$ 500.00	X Exempt Organization
American Sewing Guild Fort Wayne Chapter	528 West 2nd Street	Garrett	IN	46738	(260) 226-5696	\$ 250.00	X Exempt Organization
Lewis County Jr-Sr High School Marching Kings	6422 East State Road 218	Walton	IN	46994	(574) 490-1554	\$ 1,000.00	X Exempt Organization
Emmaus Mission Center	Spencer Street	Logansport	IN	46947	(574) 739-0107	\$ 250.00	X Exempt Organization
Boy Scout Troop 169	111 West 12th Street	Auburn	IN	46706	(260) 925-0868	\$ 250.00	X Exempt Organization
Garrett Fire Department	200 North Cowen Street	Garrett	IN	46738	(260) 357-6670	\$ 250.00	X
Junior Achievement of Fulton County	P O Box 283	Rochester	IN	46975	(574) 780-4593	\$ 500.00	X Exempt Organization
United We Stand Ministries of Akron, IN	6504 West 1300 South, PO Box 173	Akron	IN	46910	(574) 505-0392	\$ 250.00	X Exempt Organization
Healthy Families of Grant County/Family Service Society, Inc	101 South Washington Street	Marion	IN	46952	(765) 662-9971	\$ 500.00	X Exempt Organization
2015 Cure SMA Marion, IN Walk-n-Roll	925 Busse Road	Elk Grove Village	IL	60007	(800) 886-1762	\$ 500.00	X Exempt Organization
Brookhaven Wesleyan Food Pantry	2960 East 38th Street	Marion	IN	46953	(765) 674-2238	\$ 250.00	X Exempt Organization
Bridges to Health	1251 West Ken Road, Suite E	Marion	IN	46952	(765) 662-7289	\$ 250.00	X Exempt Organization
New Life Ministries	313 East Franklin Street	Huntington	IN	46750	(260) 519-1664	\$ 500.00	X Associated with New Life Fellowship Church (EO)
Love, Inc	715 Byron Street	Huntington	IN	46750	(260) 356-0933	\$ 250.00	X Exempt Organization
Junior Achievement serving Huntington County	601 Noble Drive	Fort Wayne	IN	46825	(260) 483-2543	\$ 250.00	X Exempt Organization
Furry Friends of Indiana, Inc	310 East Main Street	Larwill	IN	46764	(260) 610-5171	\$ 1,000.00	X Exempt Organization
Heartline Pregnancy Center	1515 Provident Drive, Suite 180	Warsaw	IN	46580	(574) 267-5110	\$ 250.00	X Exempt Organization
Crossroads Church/Kids Hope USA Partnership for Jefferson Elementary S	1650 North Oak Drive	Plymouth	IN	46563	(574) 935-3833	\$ 1,000.00	X Exempt Organization
Heartland Artists, Inc	101 North Michigan Street, PO Box 714	Plymouth	IN	46563	(574) 936-9515	\$ 500.00	X Exempt Organization
Junior Achievement serving Marshall County	P O Box 50	Plymouth	IN	46563	(574) 855-9702	\$ 250.00	X Exempt Organization
Military Order of the Purple Heart	1000 West Hoosier Boulevard	Peru	IN	46970	(574) 753-4375	\$ 500.00	X Exempt Organization
Learn More Center	603 Bond Street	North Manchester	IN	46962	(260) 982-6138	\$ 1,000.00	X Exempt Organization
Fellowship Food Pantry	500 North Front Street	North Manchester	IN	46962	(260) 982-8590	\$ 250.00	X Exempt Organization
Laketon Lions Club	1606 Frantz Drive	North Manchester	IN	46962	(260) 982-6883	\$ 250.00	X Exempt Organization
Friendship of the Old LaFontaine Cemetery	10640 South State Road 15	LaFontaine	IN	46940	(260) 563-5151	\$ 500.00	X Private Operating Foundation
F I S H of Wabash, Inc	770 1/2 West Hill Street	Wabash	IN	46992	(260) 563-7481	\$ 250.00	X Exempt Organization
Heartland Career Center Culinary Arts & Hospitality	79 South 200 West	Wabash	IN	46992	(260) 563-7481	\$ 250.00	X

\$ 27,500.00