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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

For	calend	lar year 2016 or tax year beginning $12/29/16$	and ending $12/3$	1/16			
N	me of fou	ndation			A Empl	oyer identification number	
_				4740040			
		RCHI FAMILY FOUNDATION, INC.				-4742049	
		street (or P O box number if mail is not delivered to street address)  O WILMINGTON DRIVE	l Ro	om/suite		hone number (see instructions) 7 – 625 – 4664	
City or town, state or province, country, and ZIP or foreign postal code					31	7-023-4004	
CARMEL IN 46033				C If exe	mption application is pending, o	heck here	
			irn of a former public cha	antv	D 1 Fo	oreign organizations, check her	• ▶ 🗌
•	57100K C	Final return Amended	•	,	1	preign organizations meeting th	
		Address change Name ch			ł	6% test, check here and attach	
	Ob I. A		_ <del>_</del> <del>.</del>		- 4		
_		ype of organization X Section 501(c)(3) exempt private	e louridation ble private foundation			ate foundation status was term n 507(b)(1)(A), check here	hated under
		1	X Cash Acc	euol	1		mantan
	-		ACC	Iuai		foundation is in a 60-month ten section 507(b)(1)(B), check he	_ 1
	ne 16) <b>i</b>		he on each hasis )				
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and		<u> </u>		(d) Disbursements
•	ait i	amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net income	for chantable purposes
		the amounts in column (a) (see instructions) )	books				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	1,200,000				
	2	Check ▶ ☐ If the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents					
<u>a</u>	b	Net rental income or (loss)					
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
ž	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				0	
(	9	Income modifications					
<i>3</i>	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold	<u> </u>				
•	C	Gross profit or (loss) (attach schedule)					
j	11	Other income (attach schedule)	1 200 000		0	0	
_	12	Total. Add lines 1 through 11	1,200,000				
ွဲ့	13	Compensation of officers, directors, trustees, etc	0				
sesued	14	Other employee salaries and wages Pension plans, employee benefits		F	E: r	CEIVED	7
ē	15	• • •	<del></del>	<del></del>	17.		!
Ä	16a	Legal fees (attach schedule) Accounting fees (attach schedule)		13	1 00	18	
Ą	1	Other professional fees (attach schedule)		18		31 2017 (6)	
Operating and Administrative	17	Interest				S S	
Stri	18	Taxes (attach schedule) (see instructions)		<del>                                     </del>	OG	)EN 117	
Ë	19	Depreciation (attach schedule) and depletion	-	<del></del>	- 00	<del></del>	,
Ē	20	Occupancy		-			
A	21	Travel, conferences, and meetings					
P	22	Printing and publications					
<u>a</u>	23	Other expenses (att. sch.)					
ü	24	Total operating and administrative expenses.					
rat		Add lines 13 through 23	0		0	0	o
be	25	Contributions, gifts, grants paid	0				0
0	26	Total expenses and disbursements. Add lines 24 and 25	0		0	Ó	0
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	1,200,000				
	b	Net investment income (if negative, enter -0-)			0		
	c	Adjusted net income (if negative, enter -0-)				0	

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-0	rm 990	-PF (2016) DIMARCHI FAMILY FOUNDATION,	INC.	81-47420	49		Page 2
				Beginning of year		End of	year
	Part I	Balance Sheets Attached schedules and amounts in the description cotumes should be for end-of-year amounts only (See instruction.	s)	(a) Book Value	(b) Book Value	Ī	(c) Fair Market Value
٦	1	Cash – non-interest-bearing			1,200,	000	1,200,000
	2	Savings and temporary cash investments				İ	
١	3	Accounts receivable			<del></del>		
١	J	Less allowance for doubtful accounts		İ		Ť	
١						1	
İ	4	Pledges receivable				Ť	
	_	Less allowance for doubtful accounts ▶					
ı	5	Grants receivable					
١	6	Receivables due from officers, directors, trustees, and other					
1		disqualified persons (attach schedule) (see				1	
1		instructions)					
1	7	Other notes and loans receivable (att. schedule)	_			#	
		Less allowance for doubtful accounts ▶	0			$\rightarrow$	
2	8	Inventories for sale or use			<del></del>		
SSEIS	9	Prepaid expenses and deferred charges					
ĩ	10a	Investments – U S and state government obligations (attach schedule)			·		·····
	b	Investments – corporate stock (attach schedule)					
	С	Investments – corporate bonds (attach schedule)					
	11	Investments – land, buildings, and equipment basis					
		Less accumulated depreciation (attach sch.)					
	12	Investments – mortgage loans					
	13	Investments – other (attach schedule)					
	14	Land, buildings, and equipment basis			~		
	• •	Less accumulated depreciation (attach sch )				Ţ	
	15	Other assets (describe ▶	)	-			
	16	Total assets (to be completed by all filers – see the	,				
ł	10	instructions Also, see page 1, item I)		o	1,200,	000	1,200,000
╡	17	Accounts payable and accrued expenses				***	
		•			1 ***	-	
S	18	Grants payable				$\dashv$	
ile	19	Deferred revenue			~		
<u> </u>	20	Loans from officers, directors, trustees, and other disqualified persons				-	
<u> </u>	21	Mortgages and other notes payable (attach schedule)		-			
	22	Other liabilities (describe	)				
_	23	Total liabilities (add lines 17 through 22)	<b>.</b> [7]	0		0	
		Foundations that follow SFAS 117, check here	► X				
es		and complete lines 24 through 26 and lines 30 and 31.					
rund Balance	24	Unrestricted			1,200,	000	
ĕ	25	Temporanly restricted		·			
0	26	Permanently restricted	<b>رحم</b>				
5		Foundations that do not follow SFAS 117, check here	▶ 📗				
_		and complete lines 27 through 31.					
S O	27	Capital stock, trust principal, or current funds					
sets	28	Paid-in or capital surplus, or land, bldg, and equipment fund				[	
ASS	29	Retained earnings, accumulated income, endowment, or other funds					
- 71	30	Total net assets or fund balances (see instructions)		0	1,200,	000	
Net	31	Total liabilities and net assets/fund balances (see					
		instructions)		0	1,200,	000	
	Part I	II Analysis of Changes in Net Assets or Fund Bala	nces				
		net assets or fund balances at beginning of year - Part II, column (a), lin		agree with			
		of-year figure reported on prior year's return)				1	
2		r amount from Part I, line 27a				2	1,200,000
		r increases not included in line 2 (itemize)			ľ	3	
		lines 1, 2, and 3			ľ	4	1,200,000
		eases not included in line 2 (itemize)			ľ	5	
		· · · · · · · · · · · · · · · · · · ·					

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

	FAMILY FOUNDATION,		81-4742049	)	Page 3
Part IV Capital Gains an	d Losses for Tax on Investme	ent Income	T (b) 1/2	<del></del>	
	the the kind(s) of property sold (e.g., real estate, rehouse, 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 N/A				1	
b					
C					
_ d			<b></b>	<u> </u>	<del></del>
_e		<del></del>	<u> </u>	<b></b>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	r other basis ense of sale	,	ain or (loss) (f) minus (g)
a		<b></b>		<b></b>	
_b		<del> </del>		<del> </del>	
<u> </u>			<del></del>	<del> </del>	
<u>d</u>		<del> </del>		<del> </del>	
Complete only for assets showing	gain in column (h) and owned by the four	ndation on 12/31/69			
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ss of col (i)	col (k), but no	of (h) gain minus ot less than -0-) <b>or</b> (from cof (h))
a		<del> </del>	<del></del>	<del> </del>	
b			<del></del>	I	
С					
d					
e		<u> </u>	<del></del>		
2 Capital gain net income or (net cap	oital loss)  If gain, also enter in lift (loss), enter -0- in lift (loss), enter -0- in lift (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, c	olumn (c) (see instructions) If (loss), ent	ter -0- in		1 1	
Part I, line 8			<del></del>	3	
	der Section 4940(e) for Reduc			me	
(For optional use by domestic private to	oundations subject to the section 4940(a	) tax on net investme	ent income )		
If section 4940(d)(2) applies, leave this	part blank				N/A
	n 4942 tax on the distributable amount or under section 4940(e). Do not complete		e period?		Yes No
<del></del>	ch column for each year, see the instruc	<del></del>	any entries		
(a)	(b)	T	(c)	<del></del>	(d)
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net valu	ue of nonchantable-use asse		istribution ratio i) divided by col. (c))
2015			<del> </del>		· . · · · · · · · · · · · · · · · · · ·
2014					
2013			<del></del>		
2012					
2011	<del></del>		<del></del>		<del></del>
<b></b>				1.1	
2 Total of line 1, column (d)		. 6 6		2	
•	year base period - divide the total on line	e 2 by 5, or by the		3	
number of years the foundation has	s been in existence if less than 5 years			1-3-1	
4 Enter the net value of noncharitable	e-use assets for 2016 from Part X, line 5			4	
5 Multiply line 4 by line 3				5	
6 Enter 1% of net investment income	(1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	<del></del>
8 Enter qualifying distributions from F				8	
If line 8 is equal to or greater than I Part VI instructions	ine 7, check the box in Part VI, line 1b, a	nd complete that par	rt using a 1% tax rate	See the	

	990-PF (2016) DIMARCHI FAMILY FOUNDATION, INC. 81-4742049				Р	age <b>4</b>
	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)	. 1				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	-1-		<del>, , , - , -</del>		
	here and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	1				
2	Part I, line 12, col. (b)  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0
2	Add lines 1 and 2	3				<u>_</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				0
6	Credits/Payments	_ <u>`</u>		···········		
а	2016 estimated tax payments and 2015 overpayment credited to 2016	1				
b	Exempt foreign organizations – tax withheld at source 6b	1				
c	Tax paid with application for extension of time to file (Form 8868)  6c	1				
d	Backup withholding erroneously withheld 6d	- 1				
7	Total credits and payments Add lines 6a through 6d	7				
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				
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				
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?			1b		X
	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					
C	Did the foundation file Form 1120-POL for this year?			1c		X
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 ▶ \$	_				
е	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?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					₹,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N/A	4a		_
b	If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a laundation termination dissolution or substantial contraction during the year?		14 / TA	4b 5		x
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "You," attach the statement required by General Instruction T.			3		
6	If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
J	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	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			7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE				,	
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	X	Ī
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			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses			10		X
				· QC	M-Pi	(2016)

Form	990-PF (2016) DIMARCHI FAMILY FOUNDATION, INC. 81-4742049				Р	age <b>5</b>
	rt VII-A Statements Regarding Activities (continued)					
					Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					v
	person had advisory privileges? If "Yes," attach statement (see instructions)			12	Х	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			13		L
	Website address ► N/A The books are in care of ► RICHARD & SUE DIMARCHI Teleph	ono no <b>•</b>	317-6	25-	466	4
14	The books are in care of ► RICHARD & SUE DIMARCHI Teleph  10890 WILMINGTON DRIVE	one no 🕨	J., 0			•
	Located at CARMEL IN	ZIP+4 ▶	46033	,		
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 – Check here					<b>▶</b> 🗂
13	and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b>   ·	15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	_			Yes	No
. •	over a bank, securities, or other financial account in a foreign country?			16		$\mathbf{x}_{-}$
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
	the foreign country			<u> </u>		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)	_	(==)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_				
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	¬	<b>.</b>			
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after	¬ <sub>v</sub>	<b>v</b>			
	termination of government service, if terminating within 90 days )	Yes	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations		N/A	1b		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?			10		
_	Organizations relying on a current notice regarding disaster assistance check here					
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		,			
~	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and					
_	6e, Part XIII) for tax year(s) beginning before 2016?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					
	all years listed, answer "No" and attach statement – see instructions )		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	<b>▶</b> 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		<u></u>			
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		/-			
	foundation had excess business holdings in 2016 )		N/A	3b		<b>U</b>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					v
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?			4b	an. Pi	X (2016)
				-onn <b>J</b> i	-U-F	(ZU10)

orm	990-PF (2016) DIMARCHI FAM	LY FOUNDATION, 1	INC. 81-4	742049			Page <b>6</b>
Pa	art VII-B Statements Regardin	g Activities for Which Fo	rm 4720 May Be R	equired (contin	ued)		
5a	During the year did the foundation pay or in	cur any amount to					1
	(1) Carry on propaganda, or otherwise atte	mpt to influence legislation (section	on 4945(e))?	Y	es X No		
	(2) Influence the outcome of any specific p	ublic election (see section 4955),	or to carry on,				
	directly or indirectly, any voter registrati	on drive?		Y	es 🗓 No		
	(3) Provide a grant to an individual for trave	el, study, or other similar purposes	s?	Ye	s X No		
	(4) Provide a grant to an organization other	r than a chantable, etc , organizati	ion described in	_			
	section 4945(d)(4)(A)? (see instructions	s)		Y	s X No		
	(5) Provide for any purpose other than relig	gious, chantable, scientific, literary	, or educational				
	purposes, or for the prevention of cruel	ty to children or animals?			es X No		
b	If any answer is "Yes" to 5a(1)–(5), did any	of the transactions fail to qualify u	inder the exceptions desc	cribed in			
	Regulations section 53 4945 or in a current	notice regarding disaster assistar	nce (see instructions)?		N/A	5b	
	Organizations relying on a current notice re-	garding disaster assistance check	here		▶ 🔲		
C	If the answer is "Yes" to question 5a(4), does	es the foundation claim exemption	from the tax				
	because it maintained expenditure response	bility for the grant?		N/A 🗌 Ye	s 🗌 No		
	If "Yes," attach the statement required by R	egulations section 53 4945–5(d)					1
6a	Did the foundation, during the year, receive	any funds, directly or indirectly, to	pay premiums				1
	on a personal benefit contract?			Y€	es X No		
þ	Did the foundation, during the year, pay pre	miums, directly or indirectly, on a	personal benefit contract	?		6b	X
	If "Yes" to 6b, file Form 8870			_	_		
7a	At any time during the tax year, was the fou	ndation a party to a prohibited tax	shelter transaction?	L Ye			
	If "Yes," did the foundation receive any proc				N/A	7b	
Pa		cers, Directors, Trustees,	, Foundation Mana	gers, Highly Pa	aid Employee	es,	
	and Contractors						
1 L	ist all officers, directors, trustees, founda	ation managers and their comp	ensation (see instruction	ons).			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Eyna	nse account,
	(a) Name and add	ress	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowances
	<del></del>				compensation		
	CHARD DIMARCHI	CARMEL	PRESIDENT				
	890 WILMINGTON DRIVE	IN 46033	1.00	0	0		0
	E DIMARCHI	CARMEL	SECRETARY				
	890 WILMINGTON DRIVE	IN 46033	1.00	0	0		0
	RIA DIMARCHI CHABENNE	INDIANAPOLIS	BOARD MEMBER				
	1 E. 67TH STREET	IN 46220	1.00	0	0		0
	RISTINA DIMARCHI	CARMEL	BOARD MEMBER				
	890 WILMINGTON DRIVE	IN 46033	1.00	0	0		0
2	Compensation of five highest-paid empl	oyees (other than those include	ed on line 1 – see instru	uctions). If none, e	nter		
	"NONE."		I- "".				
	(a) Name and address of each ampleus and		(b) Title, and average		(d) Contributions to employee benefit	(e) Expe	nse account,
	(a) Name and address of each employee paid	more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
					compensation		
NO:	NE		+	İ			
			·				
			<del></del>				
					·		
Otal	number of other employees paid over \$50,0	. <u> </u>					
Juli	number of other employees paid over \$50,0	JU			<u>▶</u>		0

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	n About Officers, Directors, Trustees, Fo		
	actors (continued)		
3 Five highest-paid indepen	endent contractors for professional services (see i		
	Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		<del></del>	<del></del>
	<del></del>		
		,	
Total number of others recovers	aver CEO 000 for preferenced converse		
	over \$50,000 for professional services		
Part IX-A Summary	y of Direct Charitable Activities		
	nantable activities during the tax year. Include relevant statistical informatived, conferences convened, research papers produced, etc.	tion such as the number of	Expenses
1 N/A		<del></del>	
			-
			<u> </u>
2			
	<del></del>	<del></del>	
3			
			1
4			
			}
			<u> </u>
	y of Program-Related Investments (see in		<del></del>
1 N/A	investments made by the foundation during the tax year on lines 1 and 2	2	Amount
1 N/A			
2			<del> </del>
	<del></del>	· · · · · · · · · · · · · · · · · · ·	<u> </u>
All other program-related investments Ser	De Instructions		
3			
Total. Add lines 1 through 3		<del>-</del>	<del></del>

			923211 Pç
Form	990-PF (2016) DIMARCHI FAMILY FOUNDATION, INC. 81-4742049	_	Page 8
	Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn founda	tions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		
	purposes		_
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	1,200,000
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,200,000
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0	_
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,200,000
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	18,000
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,182,000
6	Minimum investment return. Enter 5% of line 5	6	484
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foundation	ons
	and certain foreign organizations check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	484
2a	Tax on investment income for 2016 from Part VI, line 5	_	
b	Income tax for 2016 (This does not include the tax from Part VI )	<b>-</b>	
С	Add lines 2a and 2b	2c	· · · · · · · · · · · · · · · · · · ·
3	Distributable amount before adjustments Subtract line 2c from line 1	3	484
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	484
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	484
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0
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	

Form 990-PF (2016)

0

3a

3b

4

5

6

Amounts set aside for specific charitable projects that satisfy the

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b (see instructions)

Cash distribution test (attach the required schedule)

amount - see instructions 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

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)

Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)

Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9

Excess from 2012

Excess from 2013

Excess from 2014 Excess from 2015

Excess from 2016

Form 990-PF (2016)

484

factors NONE

Any submission deadlines

APPLICATIONS ARE ACCEPTED AT ANY TIME

Any restrictions or limitations on awards, such as by geographical areas, chantable fields, kinds of institutions, or other

Page 11

Part XV Supplementary Information (continued)							
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	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient	ļ				
a Paid during the year			[				
N/A			}				
	}		ļ				
			ļ .				
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			<b>,</b>				
			L				
<u>Total</u>	<del></del>		▶ 3a				
b Approved for future payment N/A			]				
N/A			1 }				
			[				
			<b>(</b>				
			[				
			1				
Total			▶ 3b				

Page **12** 

Part XVI-A Analysis of Income-Producing A	ctivities				
nter gross amounts unless otherwise indicated	Unrelate (a) Business code	d business income (b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)
1 Program service revenue			ļ		
a			<u> </u>		
b	_		<u> </u>		<del></del>
c	_		<b>_</b>		
d	_		<b></b>		
e			<b></b> _		
f					
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal property					<del></del>
7 Other investment income			<b>†</b>		<del></del>
8 Gain or (loss) from sales of assets other than inventory			$\vdash$		
Net income or (loss) from special events	} <del></del>		<del> </del>		
		·	+		
Other squares 2	<del></del>		<del>  </del>		
1 Other revenue a			<del> </del>		
b	<del>-    </del>	<del></del>	-		
c	<del>-</del>	<del></del>	<del> </del>		
d	<del></del>		<del> </del>		
e					
2 Subtotal Add columns (b) (d) and (e)	1 1	(	)	0	0
2 Subtotal Add columns (b), (d), and (e)	L	<del></del>			
3 Total. Add line 12, columns (b), (d), and (e)	L1		- <b>L</b> 1	13	
Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )		- 1		13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities to the		ent of Exempt P		13	
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incom	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incom	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0
3 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the  Line No. Explain below how each activity for which income accomplishment of the foundation's exempt pure	ie is reported in colu	ent of Exempt Pourn (e) of Part XVI-A	contribute	13s	0

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orm	990-PF (2 <del>0</del> 1			Y FOUNDATION			1-4742049			Pag	ge <b>13</b>
Pa	rt XVII	Information Regardanization	_	ansfers To and Tra	nsaction	ns and Rel	ationships Wit	n Noncharitab	le		
1	Did the orga			e in any of the following w	ith any oth	er organizatio	n described		1	Yes	No
	in section 50	01(c) of the Code (other	r than section	n 501(c)(3) organizations	) or in secti	on 527, relatır	ng to political				
	organization	s?								- 1	
а	Transfers fro	om the reporting founda	ation to a noi	nchantable exempt organ	ization of					-	
	(1) Cash								1a(1)		X
	(2) Other as	ssets							1a(2)		X
b	Other transa	actions								1	·
	(1) Sales of	assets to a noncharita	ble exempt	organization					15(1)	l	X
	(2) Purchas	ses of assets from a no	ncharitable e	exempt organization					1b(2)		<u> </u>
	(3) Rental of	of facilities, equipment,	or other asse	ets					1b(3)		X
	(4) Reimbu	rsement arrangements							1b(4)		X
	(5) Loans o	r loan guarantees							1b(5)		X
	(6) Perform	ance of services or me	mbership or	fundraising solicitations					1b(6)		<u> </u>
C	Sharing of fa	acilities, equipment, ma	iling lists, oth	ner assets, or paid emplo	yees				1c	1	X
d				plete the following schedu		• •	•				
				ven by the reporting found							
	value in any	transaction or sharing	arrangemen	t, show in column (d) the	value of the	e goods, othe	r assets, or services	received			
	(a) Line no	(b) Amount involved	(c) Nan	ne of nonchantable exempt organ	ization	(d)	Description of transfers, tr	ansactions, and shanng a	arrangement	s 	
N/Z	<u> </u>	ļ <del></del>	<del> </del>			<u> </u>					
		<del></del>	ļ	<del></del> _		<u> </u>	<del></del>				
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	la tha farrad		li efficate di c	uth as allated to any aver							
28		•	•	vith, or related to, one or r han section 501(c)(3)) or			ations			s X	No
		• •	-	nan section 50 f(c)(5)) or	in Section :	0411				3 [42]	140
		nplete the following sch  a) Name of organization	edule	(b) Type of organizat	tion		(c) Descri	otion of relationship			
	A\N	ay Hame of Organization		(b) Type of organiza	tion	<del> </del>	(0) 50001)	Alon of Total distrib			
	.,,	<del></del>		<del>                                     </del>		<del> </del>	<del>"                                    </del>				
				<del> </del>		<del> </del>					
		· · · · · · · · · · · · · · · · · · ·		<del> </del>		<del> </del>	<del></del>				
		<del></del>		<del> </del>		<del> </del>	<del></del>	<del></del>			
	Under per	nalties of penury, I declare the	at I have examin	I ned this return, including accomp	anying sched	L ules and stateme	nts, and to the best of my	knowledge and belief, if	i is true,		
				han taxpayer) is based on all info				May the IRS dis		um	
Sigr	, }	( )	()					with the prepare	er shown bel	w	,
Her		<b>//</b> /	V					(see instruction	s)? X	/es	No
1011	1	レスト	<b>^</b>		16	.50.17	PRES	IDENT			
	Signi	ature of officer or trustee			Date		Title				

Preparer's signature

46240

L. M. HENDERSON & COMPANY,

450 E 96TH ST STE 200

INDIANAPOLIS, IN

Date 19/27/1 P01244705 PTIN 20-5520612

Firm's EIN

Phone no

Form 990-PF (2016)

317-566-1000

Check 1

Paid

Preparer

Use Only

Print/Type preparer's name

Firm's name

Firm's address 🕨

MICHAEL A. RASOR

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

Department of the Treasury Internal Revenue Service

Name of the organization

**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.

**Employer identification number** 

81-4742049

_DIMARCHI FAM	ILY FOUNDATION, INC.	81-4742049
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt chantable trust <b>not</b> treated as a private	e foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private fou	undation
	501(c)(3) taxable private foundation	
	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . 1(7), (8), or (10) organization can check boxes for both the General Rule	and a Special Rule See
General Rule		
	i filing Form 990, 990-EZ, or 990-PF that received, during the year, conti or property) from any one contributor. Complete Parts I and II. See instri ontributions.	
Special Rules		
regulations under s 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form d that received from any one contributor, during the year, total contribution of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	990 or 990-EZ), Part II, line ions of the greater of (1)
contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the the year, total contributions of more than \$1,000 exclusively for religious nal purposes, or for the prevention of cruelty to children or animals.	s, charitable, scientific,
contributor, during to contributions totaled during the year for a General Rule appli	in described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the the year, contributions exclusively for religious, chantable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, chantable, etc., purpose. Don't complete any of these to this organization because it received nonexclusively religious, chance during the year.	s, but no such lions that were received f the parts unless the
990-EZ, or 990-PF), but it m	nat isn't covered by the General Rule and/or the Special Rules doesn't fil nust answer "No" on Part IV, line 2, of its Form 990, or check the box or to certify that it doesn't meet the filing requirements of Schedule B (Form	n line H of its Form 990-EZ or on its

PAGE 1 OF 1

Page 2

Name of organization

DIMARCHI FAMILY FOUNDATION, INC.

Employer identification number 81-4742049

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	RICHARD & SUE DIM 10890 WILMINGTON CARMEL		\$ 1,200,000	Person X Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
140.	Name, audres	3, and an 1.4	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.		b) s, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.		b) s, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.		b) s, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.		b) s, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)

923211 DIMARCHI FAMILY FOUNDATION, INC. **Federal Statements** 81-4742049 Page 1 FYE: 12/31/2016 Form 990-PF, Part XV, Line 2b - Application Format and Required Contents Description NO SPECIFIC FORM EXCEPT REQUEST SHOULD BE WRITTEN Form 990-PF, Part XV, Line 2c - Submission Deadlines Description APPLICATIONS ARE ACCEPTED AT ANY TIME Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description NONE