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**Exempt Organization Business Income Tax Return** Form 990.T (and proxy tax under section 6033(e)) 09/01 . 2016, and ending 08/31 For calendar year 2016 or other tax year beginning ▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Department of the Treasury Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Check box if Name of organization ( Check box if name changed and see instructions ) D Employer identification number (Employees' trust, see instructions ) address changed B Exempt under section HISTORIC LANDMARKS FOUNDATION OF INDIANA, INC. **Print** 35-1162873 X 501( C/X 3 Number, street, and room or suite no. If a P.O. box, see instructions E Unrelated business activity codes 220(e) 408(e) Type (See instructions ) 1201 CENTRAL AVENUE 408A 530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) INDIANAPOLIS, IN 46202-2656 453220 531120 C Book value of all assets at end of year Group exemption number (See instructions ) G Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust H Describe the organization's primary unrelated business activity ▶ ATTACHMENT 1 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes X No If "Yes," enter the name and identifying number of the parent corporation The books are in care of ▶ MARY BURGER Telephone number ▶ (317) 639-4534 Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 222,647. Gross receipts or sales 222,647. Less returns and allowances 1 c 122,988. Cost of goods sold (Schedule A, line 7)..... 2 99,659. 99,659. Gross profit Subtract line 2 from line 1c . . . . . . . . . 3 Capital gain net income (attach Schedule D) . . . . . . . 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 4c Income (loss) from partnerships and S corporations (attach statement) 5 Rent income (Schedule C) . . . . . . . . . . . . . 6 141,798. 125,066 16,732 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 10 Exploited exempt activity income (Schedule I) . . . . . . 10 1,206. 1,664. -458. Other income (See instructions, attach schedule) . . . . . 12 12 126,730. 242,663. 115,933. Total. Combine lines 3 through 12. . 13 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income ) 14 Compensation of officers, directors, and trustees (Schedule K), 92,706. 15 Salaries and wages . . . . 15 16 Repairs and maintenance 16 17 17 18 Interest (attach schedule) JAN 0.2 2018 18 15,682. 19 Taxes and licenses 20 Charitable contributions (See instructions for limitation 20 53,411. 21 Depreciation (attach Form 4562). . . . . . 22 Less depreciation claimed on Schedule A and elsewhere on return 22b 23 24 24 25 Employee benefit programs . . . . 26 26 27 Excess readership costs (Schedule J)....... 27 41,577. 28 28 149,965. 29 -34,032. Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 30 31 Net operating loss deduction (limited to the amount on line 30) . . . . . . . . . 31 -34,032. 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 . . . . . . . . . . 1,000. 33 Unrelated business taxable income. Subtract line 33 from line 32 if line 33 is greater than line 32, -34,032. enter the smaller of zero or line 32. For Paperwork Reduction Act Notice, see instructions. Form 990-T (2016) 8X2740 1 000 1133 KR D310

Form 990-T (2016)

317.383.4000

Firm's EIN >44-0160260

Phone no

Use Only

Firm's name BKD, LLP

Firm's address ▶ 201 N. ILLINOIS STREET, INDIANAPOLIS,

Form	990-T (2016)		_									F	Page 3
Sch	edule A - Cost of Go	ods S	old. E	nter metho	d of invente	ory v	aluation	<b>&gt;</b>					
1	Inventory at beginning of year	ar . 1		54	,732.	6	Inventory	at end of yea	ar	6		58,2	278.
2	Purchases			126	,534.				ld. Subtract line				
3	Cost of labor						6 from	line 5 En	iter here and in	,			
4 a	Additional section 263A cos	ts					Part I, line	2		7	]	.22,9	988.
	(attach schedule)	42	.]						section 263A (w	ith re	espect to	Yes	No
b	Other costs (attach schedule		,				property	produced	or acquired for	resa	le) apply		
	Total. Add lines 1 through 4		T	181	,266.		to the org	anization?	<u> </u>			i [	х
(\$6	edule C - Rent Income ee instructions) scription of property	(From	Real F	Property a	nd Perso	nal F	Property	Leased V	Vith Real Proper	ty)			
							_						
1)													
(2)													
(3)													
4)									<del>,</del>				
		2. R	ent rece	ived or accru	ed								
	(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				rom real and age of rent fo r if the rent is	or pers	onal propert	y exceeds		ns directly connected with the income ns 2(a) and 2(b) (attach schedule)			
(1)													
2)	<del></del>					•							
(3)													
4)													
Total				Total									-
here	otal income. Add totals of col and on page 1, Part I, line 6,	column	(A)	▶			-		(b) Total deduction Enter here and on Part I, line 6, colun	page 1			
Sch	edule E - Unrelated De	bt-Fin	anced	ncome (se	e instructi	ions)							
	1. Description of debt-	-financed	property		2. Gross				debt-finance	onnected with or allocable to			
	·				p	ropert	y		ht line depreciation ich schedule)	(b) Other deductions (attach schedule)			
1)	ATTACHMENT 3		<del></del>										
(2)					ļ								
3)					ļ								
4)	<del></del>			, <del></del>	ļ								
	4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	deb	erage adju f or alloca t-financed attach sch	property	4	Colum divide colum	ed		income reportable n 2 x column 6)		Allocable dec mn 6 x total o 3(a) and 3(	of colum	
(1)							%						
2)							%						
(3)							%						
(4)							%						
						_			e and on page 1, e 7, column (A)		here and o I, line 7, co		
Total	a						_	14:	1,798.		125,066		
	dividends-received deduction	ne incli	ided in a	olump 8									
<u> </u>						<u> </u>	· · · · · ·	<u> </u>			Form 9	90-T	(2016)

, ,		Exe	mpt Co	ntrolled Or	ganizatio		ions (see					
Name of controlled organization	2. Employer identification numb	, <del>c</del> ı		ated income nstructions)		of specified	included	of column 4 to in the control	olling	6. Deductions directly connected with income in column 5		
(1)												
(2)					ļ	<del></del>	<u> </u>			ļ		
(3)					ļ		ļ			·		
(4)	_ <del>.</del>									L		
Nonexempt Controlled Organia	zations							<u> </u>				
7. Taxable Income	8. Net unrelated in (loss) (see instruc			Total of specifical payments made		includ	rt of column ed in the co ation's gros	ntrolling		Deductions directly nected with income in column 10		
(1)										<u> </u>		
(2)				<del></del>								
(3)	····			<del></del>								
(4)	<del></del>									dd columns 6 and 11		
Totals	ncome of a Sec	ction 501	 (c)(7),	(9), or (17	▶ ') Orga	Part I	here and on , line 8, colu I (See INS	mn (A)		ter here and on page 1, rt I, line 8, column (B)		
1. Description of income	2. Amount of	2. Amount of income			ctions nnected hedule)			t-asides schedule)		Total deductions     and set-asides (col. 3     plus col. 4)		
(1)									\			
(2)			_									
(3)	<u> </u>											
(4)	<del> </del>		<u> </u>									
Totals ▶ Schedule I - Exploited Exe	Enter here and Part I, line 9, c	olumn (A)	her Th	an Advert	ising In	come (	see instru	ictions)		Enter here and on page 1 Part I, line 9, column (B)		
1 Description of exploited activity	2. Gross unrelated business income from trade or from trade or unrela		Expenses directly nected with oduction of inrelated ness income  4. Net incom from unrelate or business (2 minus colu if a gain, co cols 5 throi		ne (loss) led trade (column umn 3) is not us		s income tivity that inrelated s income		ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)	<del> </del>		<del></del> .	<u> </u>		<del></del>		<del> </del>		<del></del>		
(2)				<del> </del>				<del> </del>		<del></del>		
(3)				<u> </u>				<del> </del>				
(4)				<del>                                     </del>		<del></del>		<del> </del>				
Totals	Enter here and on page 1, Part I, line 10, col (A)	Enter here page 1, F line 10, co	Part I,					<del></del>		Enter here and on page 1, Part II, line 26		
Schedule J - Advertising In	ncome (see instr	uctions)		<del></del>								
Part I Income From Per			onsol	idated Ba	sis					<del></del>		
1. Name of periodical	2. Gross advertising income	3. Dire advertising	ect	4. Adver gain or (los 2 minus c a gain, co cols 5 thm	tising ss) (col ol 3) If mpute		culation 6. Read ome cos			7. Excess readership costs (column 6 minus column 5, but not more than column 4)		
(1) THE PRESERVATIONIST	1,206	1,	664.					100.	844.	<del> </del>		
(2)	<u> </u>		<del></del>	1	İ					7		
	<del> </del>			1	ļ			<del></del>		7		
(3)												
(3) (4)				1								
(3)										<u></u>		

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶	1,206.	1,664.		<u></u>		
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶	1,206.	1,664.				

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
fotal. Enter here and on page 1, Part II, line 14	4		

Form 990-T (2016)

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T	~	

### ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY.

HISTORIC LANDMARKS FOUNDATION OF INDIANA HAS UNRELATED BUSINESS ACTIVITY FROM ADVERTISING, SALE OF MERCHANDISE, AND RENTAL INCOME.

41,577.

# FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

RENT EXPENSE	19,373.
LICENSES & FEES	6,883.
SUPPLIES	4,382.
INSURANCE	4,222.
UTILITIES	25.
MISCELLANEOUS EXPENSE	6,692.

PART II - LINE 28 - OTHER DEDUCTIONS

٠		1		ļļ		
	80	ALLOCABLE	DEDUCTIONS	6 * (3A + 3B)	125,066.	125,066.
	7.	GROSS INCOME	REPORTABLE	(2 X 6)	141,798	141,798
		. 9	% 4 IS	OF 5	100.000	
3	5,	AVERAGE	ADJUSTED	BASIS	2,206,939. 100.000	
ATTACHMENT 3	4	AVERAGE	ACQUISITION	DEBT	2,276,508	TOTALS
			TLY CONNECTED	(3B)	71,655	
		3.	DEDUCTIONS DIRECTLY CONNECTED	( <u>3A)</u>	53,411.	
			7	GROSS INCOME	141,798.	
SCHEDULE E - UNRELATED DEBT-FINANCED INCOME			1	DESCRIPTION OF DEBT-PINANCED PROPERTY	102 NW 3RD STREET	

## Historic Landmarks Foundation of Indiana, Inc. EIN: 35-1162873 Year End: 8/31/2017 990-T Schedule E Line 3B Detail

Interest	66,594
Insurance	4,433
Utilities	420
Purchased services	208
Total Other Deductions	71.655

# Form 4562

# **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No 1545-0172

Attachment Sequence No

Department of the Treasury Internal Revenue Service Name(s) shown on return

Business or activity to which this form relates

HISTORIC LANDMARKS FOUNDATION OF INDIANA, INC

Identifying number 35-1162873

GENERAL DEPRECIATION **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 1 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If mamed filing separately, see instructions 6 (a) Description of property Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Carryover of disallowed deduction from line 13 of your 2015 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 . . . . . Carryover of disallowed deduction to 2017 Add lines 9 and 10, less line 12 . . . . Note: Don't use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property ) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 15 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't include listed property ) (See instructions ) Section A If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2016 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (business/investment use (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property placed in period service only - see instructions) SEE 3-year property DETAIL b 5-year property c 7-year property d 10-year property 100,380. S/L 8,783. e 15-year property 15.000 MQ f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental 27 5 yrs. ММ S/I property 11/01/2016 2,195,178. ММ S/L 44,628. 39 yrs I Nonresidential real мм S/I property Section C - Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L c 40-year мм 40 yrs S/L Part IV Summary (See instructions ) 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions . 53,411. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

Forn	n 4562 (2016)											35	-1162	873	Page 2
	rt V Listed Pro	perty (Include antertainment, reci	automobile	s, ce	rtain o	ther v	ehicles	, cer	rtain aire	craft, d	ertain	comp	uters,	and p	
	Note: For a	any vehicle for what is (a) through (c) of	ich you are	using	the si	andard	l mileag Section	ge rat Cıfa	e or dec	lucting	lease 6	expense	e, comp	lete or	n <b>iy</b> 24a,
		Depreciation and								mits fo	r passe	nger au	tomobil	es.)	
24a	Do you have eviden					$\overline{}$	es X		24b if "\					Yes	X No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost	(d) or other b		(e) sis for depri siness/inve use only	estment	(f) Recovery period	Met	g) hod/ ention	Depre	h) eciation uction	Elected	(i) section 179 ost
25	Special depreciati		qualified lis				ın serv	rice d		<u> </u>	$\top$			1	
		sed more than 50%				e (see	instruct	ions)	<u></u>	<del></del>	. 25			L	
26	Property used mo	re than 50% in a qi	ualified busin	ess us	e										
			<del> </del>	6						ļ				L	<del>-</del>
				6				_	<u> </u>					ļ	
		<u> </u>	<u> </u>	6					L			L	·	L	
27	Property used 50°	% or less in a qualif	<del></del>			<del></del>									
		ļ	<del> </del>	6						S/L -		<u> </u>		}	
		ļ		%					<u></u>	S/L -		<del> </del>		]	
		<u> </u>		6						S/L -	<del></del>	ļ		1	
28	Add amounts in co	olumn (h), lines 25	through 27	Enter	here ar	id on li	ne 21, p	age 1			. 28	L	<del></del>	<b>}</b>	
29	Add amounts in co	olumn (I), line 26 E	•								• • • •	• • • •	. 29	L	
_			Sectio												
	nplete this section fo our employees, first ar													rovided	venicles
y			T Occilon o to		a)		·	T				<del></del>		· · ·	
	Total business/investment miles driven during the year (don't include commuting miles)						( <b>b)</b> ncle 2	l v	(c) ehicle 3		d) icle 4		e) ıcle 5		(f) icle 6
30															
• •							}		}		}		<b> </b> -		
	Total commuting r	· · · · · ·					<del> </del>		<del> </del> -				<del></del> -		
32	2 Total other personal (noncommuting)							1		1		1		ł	
	miles driven						<u> </u>		<del> </del>		<del></del>				
33	Total miles drive							ļ						1	
		2	1	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34	Was the vehicle		· -		-140	163	110	163	110	168	140	163	140	163	140
25	Was the vehicle	y hours?					<del> </del>		<del> </del>		<del>                                     </del>		-		
35		related person? .							i						İ
36	Is another vehic				-		<del> </del>		<del></del>	-	-				<del>                                     </del>
30	_	e available for										L			
		ection C - Question								-					
	swer these question				eption t	o com	pleting	Section	on B for	vehicle	s used	by em	oloyees	who a	ren't
	re than 5% owners		· <del>'</del>												
37	Do you maintain your employees?	a written policy s										mmutin	g, by	Yes	No
38	Do you maintain	a written policy s	statement tl	nat pr	ohibits	persor	nal use	of ve	hicles, e	xcept o	commu				
		he instructions for					rs, direc	ctors,	or 1% or	more o	wners				
	Do you treat all us														
40	Do you provide r		-			s, obta	ıın ınfor	matio	n from	your er	nployee	es abou	ut the		Į
		s, and retain the info													
41	Do you meet the re	equirements conce ver to 37, 38, 39, 4	erning qualifi 10. or 41 is "	ed aut Yes." d	omobile Ion't co	e demo molete	nstratio Section	in use' n B for	? (See ins	truction	ns)				<u> </u>
Pa	rt VI Amortizat						-							<u></u>	
			(b)								(e			45	
	(a) (b) Description of costs				Am	(C) nortizable	e amount	İ	(d) Code se	ction	Amorti perio		Amortiza	<b>(f)</b> ition for th	hie voar
	·		begins		<u> </u>						percei		7OIII28		year
42	Amortization of co	sts that begins dur	ing your 201	6 tax	year (se	e instr	uctions)								
					<u> </u>						<u> </u>				
43												43			
44	Total. Add amour	nts in column (f) Si	ee the instru	ctions	for whe	ere to re	eport .	<u></u>				44			
													For	m 456	2 (2016)

HISTORIC LANDMARKS FOUNDATION OF INDIANA, INC 35-1162873

FORM 990-T

# UNRELATED BUSINESS TAXABLE INCOME - LINE 34 NET OPERATING LOSS

	Net Operating Loss Available for Use		(2,568)	•	(5,765)	(24,977)	(38,794)	(63'29)	(40,577)	(29,353)	(10,285)	(25,988)	(39'639)	(41,095)	(44,690)	(34,032)	(401,562)	<b>(-)</b>	
	Net Av.			224															
LINE 32	Unrelated business	taxable income before	specific deductions	(2,792)	224	(5,765)	(24,977)	(38,794)	(63,799)	(40,577)	(29,353)	(10,285)	(25,988)	(39,639)	(41,095)	(44,690)	(34,032)	(401 562)	/->>'.>.'
YEAR	ENDING	taxab	eds	8/31/2004	8/31/2005	8/31/2006	8/31/2007	8/31/2008	8/31/2009	8/31/2010	8/31/2011	8/31/2012	8/31/2013	8/31/2014	8/31/2015	8/31/2016	8/31/2017		
YE	N N N																	TOTAL	- - - -