Form - 990-PF

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation (70
Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf Open to Public Inspection

| F | or ca | lendar year 2016 or tax year beginning | 10/ | 01 , 2016 | , and endi | ing | | 09/30,2017 |
|------------------|------------|---|--|---------------------------------------|-------------|---|--|--|
| | Name | of foundation | | | | Α | Employer identifi | ication number |
| | RMS | M FDN | | | | | 35- | 2034536 |
| _ | Numb | er and street (or P O box number if mail is not delivered | to street address) | | Room/suit | е В | Telephone numbe | er (see instructions) |
| | | | | | } | 1 | | |
| | PO | BOX 207 | | | | Ì | 80 | 0-830-0362 |
| | | town, state or province, country, and ZIP or foreign pos | tal code | | | | | |
| | | | | | | C | If exemption applica | tion is |
| | EVA | NSVILLE, IN 47702 | | | | - 1 | pending, check here | (|
| | | eck all that apply: Initial return | Initial return | of a former r | ublic char | rity | | |
| _ | 0.10 | Final return | Amended ret | • | abile cital | יין איי | Foreign organizat Foreign organizat | |
| | | Address change | Name change | | | - } | 85% test, check h | ere and attach |
| ᆸ | Cho | ck type of organization: X Section 501 | | | 0.0 | | computation . | ▶ ∟ |
| ï | | | | | U/ Y | | If private foundation | status was terminated |
| Ť | | Section 4947(a)(1) nonexempt charitable trust | Other taxable pri | | | | under section 507(b |)(1)(A), check here |
| ı | | (| unting method: X Ca | ash Acc | rual / | F | | n a 60-month termination |
| | | (| ther (specify) | | | | under section 507(b |)(1)(B), check here . > |
| _ | | | column (d) must be on ca | sh basis) | | | | 100 |
| L | art | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) | (a) nevenue and | (b) Net inve | estment | (0) | Adjusted net | (d) Disbursements for charitable |
| | | may not necessarily equal the amounts in | expenses per | incom | 1 | | income | purposes |
| _ | | column (a) (see instructions)) | books | | | | | (cash basis only) |
| į | 1 | Contributions, gifts, grants, etc., received (attach schedule) | | | | | | |
| | 2 | Check X if the foundation is not required to attach Sch. B. | | | | | | |
| i | 3 | Interest on savings and temporary cash investments- | | | | | | |
| | 4 | Dividends and interest from securities | 11,074. | 1 | 1,056. | | | |
| | 5a | Gross rents | | | | | | |
| | ь | Net rental income or (loss) | | | | | | |
| e | | Net gain or (loss) from sale of assets not on line 10 | 17,031. | · · · · · · · · · · · · · · · · · · · | | | | the case for the |
| n | Ď | Gross sales price for all | | | | | ~- | |
| evenue | 7 | Capital gain net income (from Part IV, line 2). | | 1 | 7,031. | | | and the second |
| 윈 | 8 | Net short-term capital gain | State of the state | - | 7,051. | | | |
| 1 | 9 | Income modifications | The state of the s | · · · · · | 29 25 33 | | | To A Mark Mark Control of the Contro |
| 1 | | Gross sales less returns | a salakusitar ada marana ata | | | | | |
| | | and allowances | | | | | | |
| ł | | Less Cost of goods sold . | | | | | | |
| ١ | | Gross profit or (loss) (attach schedule) | 1,757. | | | | | STMT 1 |
| ١ | 11 12 | Other income (attach schedule) | | | 0 007 | | | 51111 1 |
| ┥ | | | 29,862. | | 8,087. | | | 6.026 |
| ွှ | 13 | Compensation of officers, directors, trustees, etc | 7,432. | | 1,406. | | 370375 | 6,026. |
| enses | 14 | Other employee salaries and wages | | <u> </u> | NONE | | NONE | |
| ĕ | 15 | Pension plans, employee benefits | | | NONE | | NONE | |
| × | 16a | Legal fees (attach-schedule) | | | | | | |
| اه | | Accounting fees (attach schedule) STMT. 2. | 935. | | NONE | | NONE | 935. |
| ≘ | C | Other professional fees (attach schedule) | | | | | | |
| 밀 | 17 | interesti | | | | | | <u></u> |
| ministrative exp | 18 | Taxes (attach schedule) (see instructions). 3. | 73. | | 73. | | | <u> </u> |
| اج | 19 | Depreciation (attach schedule) and depletion | | | | | | |
| - 1 | 20 | Occupancy | | | | | | |
| | 21 | Travel, conferences, and meetings | | | NONE | | NONE | |
| and | 22 | Printing and publications | | | NONE | | NONE | |
| | | Other expenses (attach schedule) | | | | | | |
| | | Total operating and administrative expenses. | | | | | | |
| | | Add lines 13 through 23 | 8,440. | | 1,479. | | NONE | 6,961. |
| | 25 | Contributions, gifts, grants paid | 60,500. | | | | 1,0112 | 60,500. |
| - 1 | | Total expenses and disbursements Add lines 24 and 25 | 68,940. | | 1,479. | | NONE | |
| \neg | 27 | Subtract line 26 from line 12 | 50,740. | | -1-1-1 | | INOTAL | 07,401. |
| 1 | | Excess of revenue over expenses and disbursements | -39,078. | | ì | | | |
| 1 | | Net investment income (if negative, enter -0-) | -37,018. | <u> </u> | 6 600 | | | |
| 1 | | _ | | | 6,608. | | | |
| | <u>c</u> _ | Adjusted net income (if negative, enter -0-) | | | | | | <u></u> |

| Ð | art II | Balance Sheets description column should be for end-of-year | _ Beginning of year | End o | t year |
|--------------------|--------|--|--|--|--|
| _ | eit II | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | _ | | |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable | | | |
| | 1 | 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 NONE | | | |
| w | _ | | | | |
| ssets | | Inventories for sale or use | | | |
| Ass | 9 | Prepaid expenses and deferred charges | | | |
| • | | Investments - U S and state government obligations (attach schedule) | | | |
| | | Investments - corporate stock (attach schedule) | | | |
| | 11° | Investments - corporate bonds (attach schedule) | | | |
| | | and equipment basis Less accumulated depreciation (attach schedule) | | | |
| | 12 | Investments - mortgage loans | | | |
| | | | 585,872. | | 588,641 |
| | | edulpriterit basis | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| İ | 15 | Other assets (describe >) | | | |
| | | Total assets (to be completed by all filers - see the | | ļ | |
| | | instructions. Also, see page 1, item l) , | 585,87 <u>2</u> . | 546,793. | 588,641 |
| Ì | 17 | Accounts payable and accrued expenses | | | |
| Í | 18 | Grants payable | | | |
| es | | Defended acceptance | | | |
| Liabilities | | Loans from officers, directors, trustees, and other disqualified persons | | | |
| ١ | | Mortgages and other notes payable (attach schedule) | | | |
| | | Other liabilities (describe | | | |
| - 1 | | | | | |
| j | 23 | Total liabilities (add lines 17 through 22) | | NONE | |
| ٦ | | Foundations that follow SFAS 117, check here . > | | | |
| es | | and complete lines 24 through 26 and lines 30 and 31. | , | | |
| Balances | 24 | Unrestricted | ļ | į | |
| 등 | | Temporarily restricted | | | |
| - 1 | | Permanently restricted | | | * |
| Net Assets or Fund | | Foundations that do not follow SFAS 117, \blacksquare X | | | |
| 띡 | | check here and complete lines 27 through 31. | ` | | |
| 0 | | Capital stock, trust principal, or current funds | 585,872. | 546,793. | |
| ets | | Paid-in or capital surplus, or land, bldg, and equipment fund | | | |
| SS | | Retained earnings, accumulated income, endowment, or other funds | | | |
| ۲ | | Total net assets or fund balances (see instructions) | 585,872. | 546,793. | |
| 2 | | Total liabilities and net assets/fund balances (see | | | |
| _ | | instructions) | 585,872. | 546,793. | |
| P | | Analysis of Changes in Net Assets or Fund Balar | | | <u>- </u> |
| | | net assets or fund balances at beginning of year - Part II | | nust agree with | |
| | | of-year figure reported on prior year's return) | | | 585,872. |
| 2 | | r amount from Part I, line 27a | | | -39,078. |
| | | r increases not included in line 2 (itemize) ► ROUNDING - SA | | 3 | 4. |
| | | lines 1, 2, and 3 | | | 546,798. |
| | | eases not included in line 2 (itemize) ►ROC ADJUSTMENT | | 5 | 5. |
| | | net assets or fund balances at end of year (line 4 minus lin | ne 5) - Part II, column (h | | 546,793. |
| | | The state of the s | in the state of th | ,, <u> , , , , , , , , , , , , , , , , ,</u> | Form 990-PF (2016) |

Part IV

| (a) List and | (b) How acquired P - Purchas | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr.) | | |
|--|---|--|----------------------------------|---|--------------------|
| 1a PUBLICLY TRADED | rick warehouse, or common stock, 2 | 30 010.1120 00.7 | D - Donatio | on | |
| b | SECORTILES | | | | |
| | | | | 1 | |
| d | | | | _ | |
| e | | | | 1 | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (lo (e) plus (f) minu | |
| a 494,645. | | 477,614. | | | 17,031. |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| е | | | | | |
| Complete only for assets sh | owing gain in column (h) and owner | ed by the foundation on 12/31/69 | (| I) Gains (Col (h) ga | in minus |
| (i) F M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (ı) over col. (j), if any | | l. (k), but not less t Losses (from co | han -0-) or |
| a | | | | | 17,031. |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| lf gain, also enter in P | or (net capital loss) ain or (loss) as defined in section art 1, line 8, column (c) (see | f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7 ns 1222(5) and (6) instructions). If (loss), enter -0- in | 3 | | 17,031. |
| | | tributable amount of any year in the b | ase peri | od? | Yes X No |
| | ot qualify under section 4940(| | | | |
| 1 Enter the appropriate an | | year; see the instructions before making | ig any e | (d) | |
| Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | Distribution ra (col (b) divided by | |
| 2015 | 34,979 | | | | 0.060160 |
| 2014 | 23,247 | | | | 0.037317 |
| 2013 | 26,376 | | | | 0.042253 |
| 2012 | 36,758 | | | | 0.063299 |
| 2011 | 44,215 | . 566,227. | | · | 0.078087 |
| | | | _ | | |
| | d) | | 2 | | 0.281116 |
| | • | vide the total on line 2 by 5, or by the | | | 0 05(222 |
| number of years the fou | ndation has been in existence i | fless than 5 years | 3 | | 0.056223 |
| 4 Enter the net value of no | incharitable-use assets for 2016 | from Part X, line 5 | 4 | | 585,263. |
| 5 Multiply line 4 by line 3. | | | 5 | | 32,905. |
| 6 Enter 1% of net investme | ent income (1% of Part I, line 27 | 7b) | 6 | - <u>-</u> | 266. |
| 7 Add lines 5 and 6 | | | 7 | | 33,171. |
| | | | 8 | | 67,461. |
| If line 8 is equal to or given Part VI instructions. | reater than line 7, check the | box in Part VI, line 1b, and complete | that pa | art using a 1% ta | x rate. See th |

Capital Gains and Losses for Tax on Investment Income

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|------|---|-------------|--------------|---------------------------------------|
| | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 se | ee inst | ructio | ns) _ |
| 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) | | | |
| ь | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | <u> 266.</u> |
| | here X and enter 1% of Part I, line 27b | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J | | | |
| | 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 | | | NONE |
| 3 | Add lines 1 and 2 | | | <u> 266.</u> |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | NONE |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | | 266. |
| 6 | Credits/Payments | | | |
| а | 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 104 . | | | |
| b | Exempt foreign organizations - tax withheld at source | | | |
| С | Tax paid with application for extension of time to file (Form 8868) 6c NONE | | | |
| đ | Backup withholding erroneously withheld | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 104. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | 162. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be. Credited to 2017 estimated tax ► NONE Refunded ► 11 | | | |
| Part | VII-A Statements Regarding Activities | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did | d it | Y | es No |
| | participate or intervene in any political campaign? | | la | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes | | | |
| _ | Instructions for the definition)? | | lb | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate. | · · - | _ | |
| | published or distributed by the foundation in connection with the activities | //0.5 | | ļ |
| c | Did the foundation file Form 1120-POL for this year? | | 10 | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | · · | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| u | (1) On the foundation \$ \$ | ¥. | " 金 | |
| | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposés | l. | 75 | |
| · | on foundation managers, > \$ | 1 | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 1 | 2 | X |
| ~ | | · · | | 1-7 |
| 3 | If "Yes," attach a detailed description of the activities. | | | |
| | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | 3 | Х |
| | | | la | $\frac{1}{X}$ |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | ⊢ | lb | |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | | 5 | $\frac{1}{x}$ |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | ··· - | - | - ^ |
| c | If "Yes," attach the statement required by General Instruction T | | | - (|
| 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 | | _ | x |
| | conflict with the state law remain in the governing instrument? | | 6 | X |
| | 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 | χν - | 7 | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | 1 | |
| | IN | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger | | ,, | v |
| _ | (or designate) of each state as required by General Instruction G ⁷ If "No," attach explanation | • • - | 3b | X |
| | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) | | | Ì |
| | 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Y | | | |
| | complete Part XIV | · · · | 9 | <u>X</u> |
| | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing t | | | |
| | names and addresses | | 10 | X |
| | | Form | 990- | PF (2016) |

| Pär | t VII-A Statements Regarding Activities (continued) | | | |
|------------|--|--|----------------------------|-------------|
| | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | T | Yes | No |
| • • | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | Х |
| 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 | | Х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ► OLD NATIONAL WEALTH MANAGEMENT Telephone no. ► (800) 830 | -036 | 2 | |
| • • | Located at ▶ P.O. BOX 207, EVANSVILLE, IN ZIP+4 ▶ 47702 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | TT |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 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 | | Х |
| | See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the name of | - T. C. S. | | |
| | the foreign country | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | - WW 94 - SEA | | |
| | 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): | | | 100 |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | 200 | W. 1 | 194 |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | |
| | disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | in Air | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | 111 | | |
| | the benefit or use of a disqualified person)? | | | |
| | (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.) | | *** | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | Sa | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | X |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| ` ′c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | | | |
| | were not corrected before the first day of the tax year beginning in 2016? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| 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? | | | |
| | If "Yes," list the years | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | 35 | | 7,7 |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | 01 | | |
| | all years listed, answer "No" and attach statement - see instructions.) | 2b | احداد | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | 300 |
| 2- | Pod the foundation hold are allowed 20% death and the state of the sta | | | S4454 |
| 34 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | | |
| h | · | | 7 | |
| J | 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 | 7.88 | W. 12 | |
| | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of | | | 18.2 |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | 1.55 | | |
| | foundation had excess business holdings in 2016) | 3b | . 152 ali 186 i | |
| 4 a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | 1. 1000 | | اثد |
| _ | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? | 4b | | Х |
| | | orm 99 | 0-PF | |

| orm : | 990-PF (2016) | | 35-20 | 34536 | | Page 6 |
|-------|--|---|---|--|-------------------------|---------------|
| Par | t VII-B Statements Regarding Activities f | or Which Form 4 | 720 May Be Req | uired (contเกินed) | | |
| 5a | During the year did the foundation pay or incur any amout (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public ele | nce legislation (sectio | | | | |
| | directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or o | | | | 1 1 | |
| | (4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, chemical and a section of the /li> | paritable, scientific, | | Yes X No | | |
| b | purposes, or for the prevention of cruelty to children If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53 4945 or in a current notice regar | transactions fail to | qualify under the e | xceptions described in | , | |
| | Organizations relying on a current notice regarding disas | ter assistance check | here | | | 1 |
| С | If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility for the if "Yes," attach the statement required by Regulations sec | grant? | • | | , | |
| 6a | Did the foundation, during the year, receive any fur on a personal benefit contract? | nds, directly or indir | | ns Yes X No | , | |
| b | Did the foundation, during the year, pay premiums, direc | | | ict? | . 6b | X |
| | If "Yes" to 6b, file Form 8870. | | , | | | |
| 7a | At any time during the tax year, was the foundation a pa | rty to a prohibited tax | shelter transaction?. | . Yes X No | , | |
| b | If "Yes," did the foundation receive any proceeds or have | | | | | |
| Par | Information About Officers, Directo and Contractors | rs, Trustees, Fou | indation Manager | s, Highly Paid Em | ployees, | |
| 1 | List all officers, directors, trustees, foundation ma | | | | | |
| | (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense other allow | |
| SEE | STATEMENT 4 | | 7,432. | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2 | Compensation of five highest-paid employees "NONE." | (other than thos | se included on line | | ons). If nor | ie, enter |
| (a) | Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense other allov | |
| ION | | [| NONE | NONE | NO | NE |
| (OIA) | | | NONE | NONE | NO | MEI |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | 1 | | | | |

NONE Form **990-PF** (2016)

| 3 Five highest-paid independent contractors for professional services (see instruction | s). If none, enter "NON | E." |
|---|-----------------------------|-------------------------|
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | NONE |
| 10110 | | 1101112 |
| | ····· | |
| | | |
| | | <u> </u> |
| | | |
| | | |
| otal number of others receiving over \$50,000 for professional services | | NONE |
| Part IX-A Summary of Direct Charitable Activities | <u> </u> | |
| List the foundation's four largest direct charitable activities during the tax year include relevant statistical informations and other beneficiaries served, conferences convened, research papers produced, etc | ation such as the number of | Expenses |
| 1N/A | | |
| | | |
| 2 | | |
| <u> </u> | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see instructions) | - | <u> </u> |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | | Amount |
| 1 NONE | | |
| | | |
| 2 | | |
| | | |
| All other program-related investments. See instructions | | |
| 3NONE | | |
| | | (|
| | | |
| otal. Add lines 1 through 3 | <u> </u> | Form 990-PF (201 |

| Part | X Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.) | gn foundations, | |
|-------------|---|-------------------|------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes: | | |
| а | Average monthly fair market value of securities | 1a | 594,176. |
| b | Average of monthly cash balances | 1b | NONE |
| С | Fair market value of all other assets (see instructions) | 1c | NONE NONE |
| d | | 1d | 594,176. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | <u> </u> | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | NONE |
| 3 | Subtract line 2 from line 1d | 3 | 594,176. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see | | |
| | instructions) | 4 | 8,913. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 585,263. |
| _6_ | Minimum investment return. Enter 5% of line 5 | 6 | 29,263. |
| Part | XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found | dations | |
| | and certain foreign organizations check here ▶ and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 29,263. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 2a 266. | | |
| | Income tax for 2016. (This does not include the tax from Part VI.) 2b | 1 | |
| | Add lines 2a and 2b | 2c | 266. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 28,997. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | NONE |
| 5 | Add lines 3 and 4 | 5 | 28,997. |
| 6 | Deduction from distributable amount (see instructions) | 6 | NONE |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | 7 | 28,997. |
| Part | XII Qualifying Distributions (see instructions) | ' | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | T | |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 67,461. |
| | Program-related investments - total from Part IX-B | 1b | 07, 401. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| _ | purposes | 2 | NONE |
| 3 | Amounts set aside for specific charitable projects that satisfy the. | | NONE |
| а | Suitability test (prior IRS approval required) | 3a | NONE |
| b | Cash distribution test (attach the required schedule) | 3b | NONE |
| 4 | | 4 | |
| 5 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | - | 67,461. |
| • | | 5 | 266 |
| 6 | Enter 1% of Part I, line 27b (see instructions) | 6 | 266. |
| O | Adjusted qualifying distributions. Subtract line 5 from line 4 | | 67,195. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculations for the section 4940(e) reduction of tax in those years. | aiculating whethe | rollspander em r |

Form 990-PF (2016)

| Form 990-PF (2016) | | ž. | | - Page 9 |
|---|---------------|----------------------------|---------------------|--------------------|
| Part XIII Undistributed Income (see inst | ructions) | | | - <u> </u> |
| 1 Distributable amount for 2016 from Part XI, | (a) Corpus | (b) Years prior to 2015 | (c) 2015 | (d) 2016 |
| line 7 | | | | 28,997. |
| 2 Undistributed income, if any, as of the end of 2016 | | | 17017 | 1 |
| a Enter amount for 2015 only | | | NONE NONE | |
| b Total for prior years 20 14 ,20,20 | ļ | NONE | | |
| 3 Excess distributions carryover, if any, to 2016 | | | | |
| a From 2011 NONE | - | | | |
| b From 2012 NONE | - | | | |
| c From 2013 NONE | -{ | | | |
| d From 2014 NONE | - | | | |
| e From 2015 | 175 | | | |
| f Total of lines 3a through e | 175. | | | |
| 4 Qualifying distributions for 2016 from Part XII, |] | | • | |
| line 4 ▶ \$ 67,461. | | | NONE | |
| a Applied to 2015, but not more than line 2a | | | NONE | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | NONE | | |
| c Treated as distributions out of corpus (Election | | | | |
| required - see instructions) | NONE | | | 20 007 |
| d Applied to 2016 distributable amount | 38,464. | | | 28,997. |
| e Remaining amount distributed out of corpus | NONE | | | NONE |
| 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: | | | | NONE |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 38,639. | | | , |
| b Prior years' undistributed income. Subtract | | | | 100 1 |
| line 4b from line 2b | | NONE | | _ ^ |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | NONE | Age that was a fine | |
| d Subtract line 6c from line 6b, Taxable | | | | |
| amount - see instructions | | NONE | | |
| e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instructions | | | NONE | |
| f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 | | | | NONE |
| 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 | ļ | | | |
| required - see instructions) | NONE | | <u> </u> | |
| 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) | NONE | | | |
| 9 Excess distributions carryover to 2017. | 1 | | | |
| Subtract lines 7 and 8 from line 6a , | 38,639. | | · | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2012 NONE |] | | | |
| b Excess from 2013 NONE |] | | | |
| c Excess from 2014 NONE | } | | | |
| d Excess from 2015 | | | | |
| e Excess from 2016 | <u> </u> | | L | Form 990-PE (2015) |

| . Pa | rt XIV Private Op | erating Foundations | s (see instructions ar | nd Part VII-A, questi | on 9) 🔒 . | NOT APPLICABLE |
|------|--|---|---|---|--|------------------------|
| 1 a | If the foundation has | | | | eting | |
| | foundation, and the ruling | j is effective for 2016, en | ter the date of the ruling | | ▶∟ | |
| b | Check box to indicate v | whether the foundation | is a private operating | foundation described in | section 4942() |)(3) or 4942(j)(5) |
| 2 a | Enter the lesser of the ad- | Tax year | | Prior 3 years | | (e) Total |
| | justed net income from Part | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | |
| | I or the minimum investment return from Part X for each | | | | | |
| | year listed | ļ | | ! | | |
| b | 85% of line 2a | ļ | | <u> </u> | | |
| c | Qualifying distributions from Part | | | | | |
| | XII, line 4 for each year listed . | | | | | |
| a | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities Subtract line | | | | | |
| 3 | 2d from line 2c | <u> </u> | | | | |
| | alternative test relied upon | | | | | |
| а | "Assets" alternative test - enter | | | | | |
| | (1) Value of all assets (2) Value of assets qualifying under section | | | | | |
| h | 4942(j)(3)(B)(i) | | | · | | <u></u> |
| | "Endowment" alternative test- enter 2/3 of minimum invest- | | | | | į |
| | ment return shown in Part X, | | | | | |
| _ | line 6 for each year listed | | / | | | <u> </u> |
| · | "Support" alternative test - enter (1) Total support other than | | | ! | } | } |
| | gross investment income | | | | | |
| | (interest, dividends, rents, payments on securities | 1 | | • | | } |
| | 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) | | | | | |
| | port from an exempt | | | | } | |
| | organization | | | | | |
| Pai | t XV Supplemen | tary Information (C | Complete this part | only if the founda | tion had \$5,000 o | more in assets at |
| | | uring the year - see | | • | | |
| | Information Regarding | | | | | |
| а | List any managers of before the close of any | the foundation who he tax year (but only if the | nave contributed more ney have contributed n | e than 2% of the tota nore than \$5,000). (S | al contributions receive ee section 507(d)(2).) | ved by the foundation |
| | N/A | | | | | |
| b | List any managers of ownership of a partner | | | | | y large portion of the |
| | N/A | | | | | |
| 2 | Information Regarding | Contribution, Grant, | Gift, Loan, Scholarshi | p, etc., Programs: | | |
| | Check here ▶ ☐ If t | | | | itable organizations : | and does not accent |
| | unsolicited requests for other conditions, comp | or funds. If the found | ation makes gifts, gra | | | |
| a | The name, address, an | d telephone number o | r e-mail address of the | person to whom app | lications should be ad | dressed: |
| | SEE STATEMENT 6 | | | , , , , , , , , , , , , , , , , , , , | | |
| b | The form in which appl | | omitted and information | n and materials they | should include. | |
| | SEE ATTACHED ST | | | , | | |
| | 01 | | | | | |
| c | Any submission deadling | nes | | | | |
| | SEE ATTACHED ST | CATEMENT FOR LI | INE 2 | | | |
| | | | | | | |
| d | Any restrictions or li | mitations on awards | , such as by geogra | phical areas, charita | able fields, kinds of | institutions, or other |
| | factors | | | | | |
| _ | SEE ATTACHED ST | TATEMENT FOR LI | NE 2 | | | |
| JSA | | | | | | Form 990-PF (2016) |

Form 990-PF (2016) ... Page **11** Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year SEE STATEMENT 10 60,500. 60,500. **b** Approved for future payment

JSA 6E1491 1 000

Total

Form 990-PF (2016)

| Part XVI-A Analysis of Income-Produ | ucing Acu | VILLES | | | |
|---|----------------------|----------------------|--|--------------------------|---|
| Enter gross amounts unless otherwise indicated | Unrela | ited business income | Excluded by | section 512, 513, or 514 | (e) |
| 1 Program service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions.) |
| a | | | | | |
| b | | | | | |
| c | ļ | | ļ | | |
| d | <u> </u> | | | | |
| e | <u> </u> | | ļ | | |
| f | <u> </u> | | | | |
| g Fees and contracts from government agencies | } | | | | |
| 2 Membership dues and assessments | <u> </u> | | | · | |
| 3 Interest on savings and temporary cash investments | ļ | | 14 | 11,074. | |
| 4 Dividends and interest from securities | \ | | 14 | 11,014. | |
| 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. 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | 18 | 17,031. | |
| 9 Net income or (loss) from special events • • • | | | | - · / · | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue a | | | | | |
| b OTHER REVENUE | | | 1 | 1,757. | |
| c | | | | | |
| d | | | | | |
| e | | | L | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | <u> </u> | 29,862. | 29,862. |
| Line No. Explain below how each activit accomplishment of the foundation | | | | | |
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| Form 99 | 00-PF (2 | 016) | | | _ | | 35-2034536 | | | Pag | ge 13 |
|----------|----------|--------------------------------|--|--|---|----------------------------------|--|-------------------------------------|--------------|-----------|----------------|
| Part | XVII | Information R Exempt Organ | | ansfers To | and Transac | | d Relatio <u>n</u> ships V | Vith Nonch | narit | able | , |
| U | n secti | | | | | - | ny other organization ection 527, relating t | | | Yes | No |
| аΤ | ransfe | rs from the reporting | g foundation to | a noncharital | ble exempt org | anization of | • | 1 | | | |
| (| 1) Cas | h | | | | | | | a(1) | | _X_ |
| - | - | er assets ransactions. | • • • • • • • • | | | | | 1 | la(2) | | _ X_ |
| (| 1) Sale | es of assets to a non | charitable exer | npt organizati | ion | | | 1 | lb(1) | | X |
| (: | 2) Pur | chases of assets fro | m a noncharital | ble exempt or | ganızation | | | 1 | lb(2) | | X |
| | | | • | | | | | | lb(3) | | X |
| | | _ | | | | | | | Ib(4) | | X |
| | | _ | | | | | | | b(5) b(6) | | X |
| | | | | | | | | | 1c | | X |
| | | | | | | | Column (b) should a | | | air m | |
| | | | | | | | If the foundation re | | | | |
| v | alue II | n any transaction of | r sharing arran | gement, shov | v in column (d | the value | of the goods, other | assets, or ser | vices | rece | ed. |
| (a) Line | e no | (b) Amount involved | (c) Name of | noncharitable exe | empt organization | (d) Des | cription of transfers, transac | ctions, and sharin | g arra | ngeme | nts |
| | -+ | | | | | | | | | | |
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| d | escrib | | of the Code (c | other than sec | | or in section | re tax-exempt organiz n 527? (c) Descrip | | | es 🔼 | No |
| | | | | | | | | | | | |
| | | | | 1 | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | Under | penalties of perjury, I declar | re that I have exam normograficatives than | nined this return, in taxpayer) is based or | ncluding accompanying n all information of who | schedules and ch preparer has | statements and to the best any knowledge | of my knowledge | and b | elief, it | is true, |
| Sign | OR. | i National Wealt | of O'++ | | | | | May the IRS | discus | s this | return |
| Here | Sign: | ature of officer or trustee | ec run | 12/ Date | 01/2017 | Trtle | TEE | with the prep (see instructions) | T | yes | below |
| | 1 | O NATIONAL WE | מו.דע אמאמ | | | Title | | (see instructions) | |] Tes [| N ₀ |
| | 7 23 | Print/Type preparer's na | | Brerayer's | Paty / | 1 | Date Ch | neck of PT | īN | | |
| Paid | l | KELLY KOWALC | | Kel | UKMM | lland | / | | 013 | 8768 | 36 |
| Prepa | l | | NST & YOU | NG U.S. L | fip. | // | Firm's Ell | 2.4.5 | | | |
| Use C | nly | | 5 N. WACK | | | | | | | | |
| | ļ | СН | TCAGO. TI | ۲, | 6 | 0606 | Phone no | 312-87 | 9-2 | 000 | |

Form 990-PF (2016)

gramma en

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

9/2016 FEDERAL TAX REFUND FORM 990PF

1,757.

TOTALS

1,757.

| CHARITABLE PURPOSES | 1 1 1 1 | 935. | 1 | 935. | H H H H H H H H H H H H H H H H H H H |
|------------------------------|--|--------------------------------|---|--------|---|
| ADJUSTED NET INCOME | 1 1 1 1 | | 111111111111111111111111111111111111111 | NONE | H H H H H U H H H |
| NET INVESTMENT INCOME | 1 1 1 1 | | 1 1 1 1 1 1 1 1 1 1 1 1 1 | NONE | |
| REVENUE AND EXPENSES (| `I . I I I I I I I I I I I I I I I I I I | 935. | 1 1 1 1 1 1 1 1 1 1 1 | 935. | |
| DESCRIPTION | 1 | TAX PREPARATION FEE (NON-ALLOC | | TOTALS | |

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STATEMENT

STATEMENT

| - TAXES | 11 11 11 11 11 11 11 11 11 11 11 11 11 |
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| NET INVESTMENT INCOME | 1 1 1 | 73. |
|--------------------------------|---------------------------------------|---------------------------------------|
| REVENUE AND EXPENSES PER BOOKS | | 73. 73. |
| DESCRIPTION | ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; | FOREIGN TAXES ON QUALIFIED FOR TOTALS |

RMSM FDN 35-2034536

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

OFFICER NAME:

OLD NATIONAL WEALTH MANAGEMENT

ADDRESS:

PO BOX 207

EVANSVILLE, IN 47702

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

COMPENSATION

7,432.

. ...

OFFICER NAME:

SUSAN WALBRIDGE

ADDRESS:

PO BOX 207

EVANSVILLE, IN 47702

TITLE:

CHAIRPERSON

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

JOHN UNDERWOOD

ADDRESS:

PO BOX 207

EVANSVILLE, IN 47702

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

JOHN GIANT

ADDRESS:

PO BOX 207

EVANSVILLE, IN 47702

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

RMSM FDN 35-2034536

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

OFFICER NAME:

JANE SURBECK

ADDRESS:

PO BOX 207

EVANSVILLE, IN 47702

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

LAURA WYRICK

ADDRESS:

PO BOX 207

EVANSVILLE, IN 47702

TITLE:

DIRECTOR

. , .

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

TOTAL COMPENSATION:

7,432.

RMSM FDN FORM 990PF, PART XV - LINES 2a - 2d

35-2034536

RECIPIENT NAME:

ATTN: CARRIE H GUTMAN

ADDRESS:

116 E BERRY STREET

FORT WAYNE, IN 46802

RECIPIENT'S PHONE NUMBER: 260-310-6661

FORM, INFORMATION AND MATERIALS:

APPLICATION, COPY OF 501 (C) (3) EXEMPTION LETTER, BUDGET

SUBMISSION DEADLINES:

ONE WEEK PRIOR TO BOARD MEETINGS

RESTRICTIONS OR LIMITATIONS ON AWARDS:

FOR QUALIFYING ORGANIZATIONS UNDER IRC SECTION 501 (C) (3)

35-2034536 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: PHI SIGMA KAPPA FOUNDATION INC ATTN MARSHA SPEARS ADDRESS: 2925 E 96TH ST INDIANAPOLIS, IN 46240 RELATIONSHIP: NONE PURPOSE OF GRANT: OPERATING SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: KATE'S KART, INC ADDRESS: 429 E DUPONT ROAD, # 119 FORT WAYNE, IN 46825 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 12,500. AMOUNT OF GRANT PAID RECIPIENT NAME: THE LEAGUE FOR THE BLIND AND DISABLED IN ADDRESS: 5821 S ANTHONY BLVD FORT WAYNE, IN 46816-3701 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

5,000.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CANCER SERVICE OF NORTHEAST INDIANA ADDRESS: 6316 MUTUAL DR FORT WAYNE, IN 46825 RELATIONSHIP: NONE PURPOSE OF GRANT: OPERATING SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: ALLEN CO FT WAYNE HISTORICAL SOCIETY INC ADDRESS: 302 E BERRY STREET FORT WAYNE, IN 46802 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: HOPE ALIVE ADDRESS: 1747 WELLS STREET FORT WAYNE, IN 46808 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT

AMOUNT OF GRANT PAID

A. . .

FOUNDATION STATUS OF RECIPIENT:

2,500.

. . . . RMSM FDN 35-2034536 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CHRIST CHILD SOCIETY OF FORT WAYNE ADDRESS: PO BOX 12708 FORT WAYNE, IN 46864 RELATIONSHIP: NONE PURPOSE OF GRANT: OPERATING SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 3,000. RECIPIENT NAME: MUSTARD SEED FRNITURE BANK ADDRESS: 3636 ILLINOIS RD FORT WAYNE, IN 46804 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: THE BRANDON FOUNDATION ADDRESS: 3029 E PAULDING RD FORT WAYNE, IN 46816 RELATIONSHIP: NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

STATEMENT

PC

OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

٠,

10,000.

RMSM FDN 35-2034536 FORM 990PE, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: WELLSPRING INTERFAITH SOCIAL SERVICES ADDRESS: 1316 BROADWAY FORT WAYNE, IN 46802 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: FORT WAYNE CENTER FOR LEARNING ADDRESS: 2510 EAST DUPONT RD STE 203 FORT WAYNE, IN 46825 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: 10,000. AMOUNT OF GRANT PAID TOTAL GRANTS PAID: 60,500.

STATEMENT 10