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.

Open to Public Inspection ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2017 or tax year beginning 2017, and ending A Employer identification number Name of foundation WCORPORATED PLLES FOUNDATION 20 - BOI 5238 Room/suite Number and street (or P O box number if mail is not delivered to street address) WOODWARD DAIVE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here Initial return of a former public charity Check all that apply: Initial return D 1. Foreign organizations, check here ▶□ Final return ☐ Amended return 2. Foreign organizations meeting the 85% test, Address change □ Name change check here and attach computation ▶ 🗌 If private foundation status was terminated under Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶ 🗌 Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation Fair market value of all assets at J Accounting method: Cash Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) ▶□ line 16) ▶ \$ /484676 (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per purposes (cash basis only) income books the amounts in column (a) (see instructions)) 40000 Contributions, gifts, grants, etc., received (attach schedule) Top . The walt I'm wat in · 斯斯斯斯· 克斯 2 Check ► ☐ If the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 4507 4507 45635 Dividends and interest from securities 5a Gross rents . . . Net rental income or (loss) and the state of Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . 11 Other income (attach schedule) . . 4634 12 Total. Add lines 1 through 11 . Compensation of officers, directors, trustees, etc. 13 Operating and Administrative Expenses 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) . 17 Interest . 72 Taxes (attach schedule) (see instructions) STATEMENT / 18 19 Depreciation (attach schedule) and depletion . 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) Total operating and administrative expenses. 24 Add lines 13 through 23 . 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12: 27 Excess of revenue over expenses and disbursements **Net investment income** (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

		Attached schedules and amounts in the description column	Beginning of year		End of year		
Part II		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Valu	ie -	(c) Fair Market Value	
	1	Cash—non-interest-bearing	53632	3668	2	36682	
	2	Savings and temporary cash investments					
	3	Accounts receivable ►					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
	Į	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 ▶					
ts	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments—U.S. and state government obligations (attach schedule)	1291611	142744	ō	1447944	
	ь	Investments—corporate stock (attach schedule)					
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶				- 1; , , *;	
		Less: accumulated depreciation (attach schedule) ▶					
	12	Investments mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment: basis ▶	, ' ,				
	ļ	Less. accumulated depreciation (attach schedule) ▶					
	15	Other assets (describe ▶)					
	16	Total assets (to be completed by all filers—see the				4 4 4	
		ınstructions. Also, see page 1, item I)	1345243	1464122	<u>, </u>	1484626	
	17	Accounts payable and accrued expenses				- 1	
ß	18	Grants payable				, ,	
Ë.	19	Deferred revenue				100	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
į	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe ►)				The Board of	
	23	Total liabilities (add lines 17 through 22)					
'n		Foundations that follow SFAS 117, check here ▶ □				10000000000000000000000000000000000000	
ë		and complete lines 24 through 26, and lines 30 and 31.		1		"	
ā	24	Unrestricted				31,2	
ga	25	Temporarily restricted					
P	26	Permanently restricted				6.1	
5		Foundations that do not follow SFAS 117, check here ▶ □					
Net Assets or Fund Balances		and complete lines 27 through 31.	1	1111111	_		
0	27	Capital stock, trust principal, or current funds	1345243	146412	_		
Ę	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
SS	29	Retained earnings, accumulated income, endowment, or other funds					
ťΑ	30	Total net assets or fund balances (see instructions)	1345243	1464122			
Š	31	Total liabilities and net assets/fund balances (see	1-111	101111100	,	,	
_		instructions)	1345243	1464122	<u></u>		
	irt III	Analysis of Changes in Net Assets or Fund Balances	(-) I 00 (
1		al net assets or fund balances at beginning of year—Part II, colu				1246211	
_		of-year figure reported on prior year's return)			1	1272293	
2		er amount from Part I, line 27a			2	118874	
3		er increases not included in line 2 (itemize)			3	111(11100	
4	- n	lines 1, 2, and 3			4	1764122	
5	Deci	reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—l	Port II column (h) I	ne 30	5	1/1////22	
	ı ı Ola	arrier assers or runu balances at end of year (line 4 minus line 5)—	rart II, column (b), 1	116 30	6	1764/22	

Part	V Capital Gains and	Losses for Tax on Investme	nt Income					
	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co) (b) How acquired P—Purchase D—Donation (n)					(d) Date sold (mo , day, yr)		
1a	VERMONT ST. ST	TUDENT ASSISTANCELL	RP	P	6-21-16	12-15-17		
b	DISTRICT COLL	IMBIA		Ρ	10-05-11	6-1-17		
c_	_ HUDSON YOS, 11	VERASTRUCTURE		P	5-16-12	6-30-17		
<u>d</u>						<u> </u>		
<u> e_</u>	 							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))			
a	5000.00		5076	.11				
<u>b</u>	25000.00		25000	,00		·		
c	3000.00		<i>≥0000,</i>	00				
<u>d</u>				··				
<u>e</u>								
	Complete only for assets show	ving gain in column (h) and owned by				(h) gain minus		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (I) ol (j), if any		t less than -0-) or rom col (h))		
a						<u></u>		
b								
C								
<u>d</u>								
е		()()			 			
2	Capital gain net income or		lso enter in Pa enter -0- in Pa		2 /26	.11)		
3		or (loss) as defined in sections 1, line 8, column (c). See instruct						
Dovid		r Section 4940(e) for Reduc	ad Tay an I	· · · · · · ·	3	··········		
Part		ate foundations subject to the se						
Was t		this part blank. ection 4942 tax on the distributa allify under section 4940(e). Do n			pase period?	☐ Yes ☑ No		
1	Enter the appropriate amou	unt in each column for each year	; see the instr	uctions before m	akıng any entries.			
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions		(c) of noncharitable-use a	costs Dist	(d) inbution ratio divided by col (c))		
	2016	65620	126	9527		0517		
	2015	90500		8874		0781		
	2014	61000		277/		0579		
	2013	61700		3/69		0668		
	2012	49400	701	6848		0554		
2	Total of line 1, column (d)					3099		
3		or the 5-year base period—divid undation has been in existence if				0620		
4	Enter the net value of nonc	harıtable-use assets for 2017 fro	m Part X, line	5	. 4 13	937/1		
5	Multiply line 4 by line 3 .				. 5 BE	5410		
6	Enter 1% of net investment	t income (1% of Part I, line 27b)	<i>:</i>		. 6	46		
7	Add lines 5 and 6				. 7 BE	3456		
8		ns from Part XII, line 4				1263		
	If line 8 is equal to or great Part VI instructions.	er than line 7, check the box in F	-art VI, line 11	b, and complete t	tnat part using a 1	% tax rate. See the		

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940	35	ee ins	stru	ictio	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)	7	is 'i	***		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		<u>'</u>	,	02	<u> </u>
-	here ▶ ☐ and enter 1% of Part I, line 27b	1	-		93	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of		,			
	Part I, line 12, col (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			0	l
3	Add lines 1 and 2	3		9	<u>'3</u>	~
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			Ó	
5	- · · · · · · · · · · · · · · · · · · ·	5			· >	_
6	Credits/Payments:		20, 1	, ;		
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a		ا المراقع من المراقع والمراقع	i ju		1
b	Exempt foreign organizations—tax withheld at source 6b		0,50	18 in j.	* 1	
С	Tax paid with application for extension of time to file (Form 8868) . 6c	·-i (-i)		, <u>-3 #</u>	ار الرائع د الراء -	18
d	Backup withholding erroneously withheld 6d		လိုမျှင် ။		4	
7		7	·			
8		8				
9		9		9	3	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11		11				
	VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation of	r dic	i it		Yes	No
	participate or intervene in any political campaign?		_ [1	а		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Sinch protections for the definition	ee t	he			
	instructions for the definition		1	b		X
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any mapublished or distributed by the foundation in connection with the activities	ateri	als	` <u>.</u> ;		•
С	Delite 6 11 m = 4400 per 6 m					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•	- 1	C		X
_	(1) On the foundation ► \$ (2) On foundation managers. ► \$		1	· 19		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp		- .	, R;	idh idh	,
_	on foundation managers. ► \$	ose		`.'.	* 1	. 1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			11.	-3-1	
_	If "Yes," attach a detailed description of the activities.		- 4	2		<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, art	احامد	of	- 1,		1
-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ICICS		<u>-</u>		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•		3 a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4	_ +-		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		❖
	If "Yes," attach the statement required by <i>General Instruction T</i> .		<u> </u>	<u>-</u>	—- -	4
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 direction	ns th	at	. -	· · · . '	
	conflict with the state law remain in the governing instrument?		· ·	+		
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 F	Part Y	$v \vdash \overline{z}$	_		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	ait	`` 	-	x	—
	INDIANA				,	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney G	iene	al l		1	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			+	ار د	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942		, 0	-	$\rightarrow +$	
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If	リハン) "Yes	₹,	-	-	i
	complete Part XIV		' g		J	${\mathscr X}$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listin	a th	er 📑	+	-	
	names and addresses	۰۰۰۰	·" 1	دا م	\vee	

STATEMENT 2

Form **990-PF** (2017)

Part	Statements Regarding Activities (continued)			
4.4	At any time dumpe the year stid the foundation directly and set in the second second set in the second seco	ļ	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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
14	Website address ► J/A The books are in care of ► 6ARY ALCES Telephone no. ► B/Z	00		17
	Located at ▶ 235 WOODWARD DRIVE EVANSVILLE, IN ZIP+4 ▶ 47	- zo 7/2	يــز حــ	? <i>!!!</i>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here and enter the amount of tax-exempt interest received or accrued during the year \Delta 15			▶ 🗌
16	At any time during calendar year 2017, 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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	f		
Por		<u> </u>	······································	
r all	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.	T	Voc	No
1a	During the year, did the foundation (either directly or indirectly):		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes Yes	'		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	4,4		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	14 (1) (1) 15 (1) (1) (1) 15 (1) (1) (1) 16 (1) (1) (1)		100
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes		感染	¥3.4
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(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			
b	termination of government service, if terminating within 90 days.)	#E		
b	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	C. July	ं शिक्षे
_	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 2017?	1c	11.0	Alexander
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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20, 20, 20, 20			4
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	- Second		3
	all years listed, answer "No" and attach statement—see instructions.)	2b	Sa	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	1,310,63	1.300	in:
	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			
4-	foundation had excess business holdings in 2017.)	3b		•
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		\
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		

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Page	٦

Part	VII-B Statements Regarding Activities			4720 IV	lay be H	equire	a (contil	lueu)	,		
5a	During the year, did the foundation pay or incur a	ny amo	unt to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt to			n (sectio	on 4945(e))? .	☐ Yes	₩ No			
	(2) Influence the outcome of any specific public										
	directly or indirectly, any voter registration driv						Yes	No			
	(3) Provide a grant to an individual for travel, stud		ther similar r	ourposes	s? .	_	Yes	₩ No			
	(4) Provide a grant to an organization other than					ibed in					- }
	section 4945(d)(4)(A)? See instructions						Yes	No		,	}
	(5) Provide for any purpose other than religious,					ational	163	2			
	purposes, or for the prevention of cruelty to cl	hildren :	or animals?	o, intorar	y, or cauc		☐Yes	No	1 :	,	
	If any answer is "Yes" to 5a(1)–(5), did any of the									,	
b	Regulations section 53.4945 or in a current notice r	nansau	a disastor as	quality t	2 Socupet	ructions	ilis desci	IIA			
	· ·					luctions	Λ		5b	,	
	Organizations relying on a current notice regarding disaster assistance, check here									4,1	.
С	If the answer is "Yes" to question 5a(4), does the			exemp	tion from	the tax			1, 1		-
	because it maintained expenditure responsibility			•		NJA	∐ Yes	∐ No	100		M,
	If "Yes," attach the statement required by Regula					-			117	[`.;]	
6a	Did the foundation, during the year, receive any f				to pay pre	miums				37 34	j
	on a personal benefit contract?						Yes Yes	X No	77 1 L	111	
b	Did the foundation, during the year, pay premium	s, direc	tly or indired	tly, on a	a personal	benefit	contract	? .	6b		X
	If "Yes" to 6b, file Form 8870.							,		10 A	
7a	At any time during the tax year, was the foundation a	party to	a prohibited	l tax shel	lter transac	tion?	☐ Yes		1. The state of th	Y'	
b	If "Yes," did the foundation receive any proceeds	or have	e any net inc	ome att	ributable t	o the tr	ansaction	n? .	7b		
Par	t VIII Information About Officers, Direct	ors, T	rustees, Fo	oundati	ion Mana	agers,	Highly F	Paid E	nploy	ees,	
	and Contractors									_	
1	List all officers, directors, trustees, and found								•		
	(a) Name and address		, and average s per week		pensation ot paid,	emplo	ontribution yee benefit	plans	(e) Expe		
			d to position		er -0-)		rred compe		omer	allowan	
GA	ey I ALLES 235 WOODWARD	aan			ก		\sim				
E	VANSVILLE, IN 4771Z	وساس	TUENI		2					ر	
KIC	NEERLY E ALLES 235 WOODWARD	۔ سربہ	low-		a		$\boldsymbol{\mathcal{D}}$				
	VANSVILLE, IN 47712	XL)	/ /KER>		\mathcal{U}		\mathcal{O}_{-}				
ASI	HEY EALLS 235 WOODWARD	سدد را ر	nettina 4	<u>_</u>	\mathcal{O}		\bigcirc		,	$^{\prime}$	
	EVALSVILLE, IN 477/2	VICE 1	ALEXIDEN,	7 4	レ		\cup		L		
		- 1-41	Ab a Al-	- i= -!:	ded as !!				.) I£ ~	<u> </u>	ontor
2	Compensation of five highest-paid employee	s (othe	er than thos	se inclu	iaea on li	ne 1—:	see insti	uctions	sj. IT N	one,	enter
	"NONE."	 -					40.0				
	(A)	,	(b) Title, and a	average	(c) Compe	neation	(d) Contrib employee plans and		(e) Expe	ense ac	count,
	(a) Name and address of each employee paid more than \$50,00	·	hours per v devoted to p	osition	(c) Compe	isauon	plans and compen	deferred	other	allowar	ices
						-					
						-					
			_								
	A () A (
	<i>[</i> [1]										
	,			ļ							
						-					
				İ							
Total	number of other employees poid eyer \$50,000							. ▶			
iota	number of other employees paid over \$50,000	•	· · · ·	· · ·	· · ·				Form 9 9	n-pr	(2017)
										, v - r f	120171

	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En	nployees,
3 Five high	and Contractors (continued) phest-paid independent contractors for professional services. See instructions. If none, enter "NON"	E."
<u> </u>	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		-
	- NINF	-
	140700	
Total number	of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the found organizations	ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
	\sim	· ,
3		
4		
B . IV B	Deleted by the standard from t	
Part IX-B	Summary of Program-Related Investments (see instructions) wo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	wo largest program-related investments made by the foundation during the tax year on lines it and z	, under
2	N/77	
All other progr	am-related investments. See instructions	
3		
Total Add lin	es 1 through 3	-
Total Add III	CO THIROUGHO	Form 990-PF (2017

Part		gn fo	undations,
	see instructions.)	~	•
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	1369778
b	Average of monthly cash balances	1b	45157
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1414935
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1414935
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	ınstructions)	4	21224
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	13937//
6	Minimum investment return. Enter 5% of line 5	6	69686
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► □ and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	69686
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b	100	
С	Add lines 2a and 2b	2c	93
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	69779
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	69779
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	69779
Part	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	71263
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	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	7/263
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		,,,
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7/263
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	whe	

Part 2	Undistributed Income (see instruction	ons)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7	,	1		69779
2	Undistributed income, if any, as of the end of 2017:			· •	
a	Enter amount for 2016 only	' •	•		1: -
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2017:				
	From 2012	, .		et ay ti	
a			` '	'	
D	From 2013	, ,	,	-	
C	From 2014		, and a second		the state of the state of
d	From 2015	,			
е	From 2016				
f	Total of lines 3a through e			Specify () (1	
4	Qualifying distributions for 2017 from Part XII,		٠, ٠		
	line 4. ► \$ <u>7/263</u>	,	'		, , ,
а	Applied to 2016, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
С	Treated as distributions out of corpus (Election				. 1
	required—see instructions)			stilling to by the	Part Market and
d	Applied to 2017 distributable amount	W. Jan Sale Land	Company of the second	[1] 被张马克克,高黎·克尔克克	69779
е	Remaining amount distributed out of corpus	1484		問題を持ている。	
5	Excess distributions carryover applied to 2017		A STATE OF THE STA	的名词 的复数地位	
	(If an amount appears in column (d), the same			MARKET AND	
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		The state of		
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b	the same of the same			State of the
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions				
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions				
f	Undistributed income for 2017. Subtract lines	1989年 - 第428年前3月2日 7月2日 - 第448年 - 五五月前日本	er migrate e sa cupi. Timin e letter et sa cupi.	The same and the	
	4d and 5 from line 1. This amount must be				
	distributed in 2018				
7	Amounts treated as distributions out of corpus		CAMPAGE AND		· · · · · · · · · · · · · · · · · · ·
•	to satisfy requirements imposed by section		77.7		
	170(b)(1)(F) or 4942(g)(3) (Election may be				The state of the s
	required—see instructions)				"大多是
8	Excess distributions carryover from 2012 not			TE TOTAL PERIOR	
•	applied on line 5 or line 7 (see instructions) .		Contract of the second selection of the second		The state of the s
9	Excess distributions carryover to 2018.	444			Programming the programming th
-	Subtract lines 7 and 8 from line 6a	1484			在一些中的 1000 1000 1000 1000 1000 1000 1000 10
10	Analysis of line 9:	The property of the second	2000年度1000年7月	RECEIPTED TO	The state of the s
а	Excess from 2013 15763		Tank 「	THE THE PROPERTY OF THE PARTY O	programme of the progra
b	Excess from 2014			The same of the same of the same of	LA SAMPAGE THE PROPERTY OF THE PARTY OF THE
c	Excess from 2015 32910	The first in the f	1. 14年1月7月 - 1544年 - 1721年 - 1744年 14. 14月1日 - 1744年		The state of the s
d	Excess from 2016				
е	Excess from 2017 1484		hander of all the short start in the		10.00
<u> </u>					Form 990-PF (2017)

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A guestion 0		Page 10
	If the foundation has received a ruling				<u>"</u>	
ıa	foundation, and the ruling is effective for			private operating		,
_	,				L	
	Check box to indicate whether the four		operating founda		ection 📙 4942(j)	(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(6) 10431
	each year listed			 		
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test - enter:			j		
	(1) Value of all assets					
	(2) Value of assets qualifying under			/		
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3			/		
	of minimum investment return shown in					
_	Part X, line 6 for each year listed					
С	"Support" alternative test-enter:					
	(1) Total support other than gross			1		
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income .	/				
Part		n (Complete th	is part only if t	he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-				,	
1	Information Regarding Foundation		,		 	
' a	List any managers of the foundation	_	ited more than 20	% of the total contr	ributions received	by the foundation
u	before the close of any tax year (but of					by the loundation
	GARY ALLES	8 1 1 /	D POP	STATEME	<i></i>	
			,,,,			
b	,					irge portion of the
	ownership of a partnership or other en	nuty) or which the	toundation has a	10% or greater inte	erest	
2	Information Regarding Contribution		• •	· •		
	Check here ► ☐ if the foundation	•	•		-	•
	unsolicited requests for funds. If the f		gıfts, grants, etc.,	to individuals or o	rganizations unde	r other conditions,
	complete items 2a, b, c, and d. See ir	nstructions				
a	The name, address, and telephone nu	ımber or email add	dress of the perso	n to whom applica	tions should be a	ddressed:
	1/2		•	• •		
	N/7					
b	The form in which applications should	d be submitted and	d information and	materials they sho	uld include:	
	1/4					
	N/II					
С	Any submission deadlines:	10		<u> </u>		
	<i>N</i> ,					
d	Any restrictions or limitations on av	vards, such as b	y geographical a	reas, charitable fie	elds, kinds of ins	titutions, or other
	factors:					
	NIH					
						Form 990-PF (2017)

Supplementary Information (continued)

Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor 509(4)(1) a Paid during the year CAMBUC EDUCATION FOUNDATION 5000 SERVE COMPYLITY LEDS 520 S. GENNIGHOF EVANSVILLE, IN 17714 1000 HOUSE OF BREAD AND PEACE SERVE COMMUNITY NEEDS 250 E. CHANDLER EVANSUILLE, IN 2050 YOUNG LIFE AID DISADIANTAGO YORA F.O. POX 500 COLOFADO SPAYA65, CO BOAD 1 MATER DEL 10530,87 SEAVE COMMY LITY NEEDS 1300 HARMONY WAY EVANSVILLE, IN 4772 SISTEMS OF ST. BENEDICT 2000 EAVE COMMUNITY HEEDS BOZ C. JOTH ST. FERDINAND, IN 47532 ST. VINCENT DEPAYL 1000 SERVE COMMUNITY NEWS 1231 DAINE CLALLE MT. VERNOW, IN YXXX REITZ HIGH SAPOL AID STUDENTS IN NEED 2000 350 A. DAGIGE OLVO EVANSVILLE IN YTHIS SCHMALZ P.T.O. PEUEF FUND 2000 HURALANE PELIEF MATY, TEXAS 3a 7/190.87 **b** Approved for future payment

Part XV

Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 1000 KAIROS MINISTRIES PRISON MINISTERY 503/aYi) 6133 GRENCAETT DA. HEWBYSHIN THESE GLENWOOD ALIGHBOADDON ASSOCIATION SEAVE COMMUNITY LEEDS PU. BOX 2007 EVANSVILLE, WY7726 DZANAM FAMILY SHELTER SHELTER FOR POOR 1000 1100 READ EVANSVILLE, IN 47110 CEMPHAIN DIE HOWSI-16 FUR POOR P.O. BOX 5386 EVANSVILLEIN YTHE EVANSVILLE CHAISTIAN LIFE CENTER SERVE CO. MMWIN SER 509 S. KENTUCKY EVANOVILLEIN YOTH 4000 ST. ANDHONY YOUTH GROUP AID DISADVANTAGO YUUTH 713 A 2ND ST. EVANSHILLE, 1.4 477/0 1000 ST. VHICETT DEPAUL FOOD PANTRY FOOD FOR POOR BUG N. LAFAVETRE EVANSVILLE IN 47711 HAPITAT 1000 HOUSING FOR POOR 560 E. DIAMOND AV. EVANKUILLEIN YTTII 1000 C.A.J.E. 713 A SECOLD AV. EVANSVILLE, IN 47710 2000 SERVE COMMUNITY NEEDS ST. VINCENT DAY CARE 1000 DAYLAGE FOR LOW NOOME 730 W. DELAWARE EVANSVILLE, IN 47711 CENTER FOR FAMILY LIFE
7131 2ND ST. EVANSVILLE, IN 47710 1000 SEAVE COMMUNITY EEDS ST. ANTHONY ST. VINCENT DEPAUL 713 A. 240 ST. ENASVILLE, IN 47710 SERVE COMMUNITY NEBIS 3000 CHTAEACH MINISTRIES 1000 SERVE COMMUNITY NEEDS 734 W. DELAWARE EVONSVILLE, IN 47711 ALL SAINTS OUT ABOUT MINISTRIES 1000 SEPVE COMMY (ITY NEEDS 713 N. 2NOST. EVANSVILLE, IN 47710 ST. BENEDICT'S 1760 SERVE COMMUNITY NEEDS 1928 LINCOLN EVANSVILLE IN 47714 b Approved for future payment

	gross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	-{ (e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1	Program service revenue:					<u> </u>
	a b			+		
	c					
	d					
	е					
	f			<u> </u>		
_	g Fees and contracts from government agencies					
_	Membership dues and assessments			111	4507	
3	Interest on savings and temporary cash investments Dividends and interest from securities			14	45635	
5	Net rental income or (loss) from real estate:			ELECTED I	STATE OF THE STATE	
Ĭ	a Debt-financed property	Con - 1 - 1 - 1 - 2 - 2 - 2	ar arrest a grade of a state of the	THE PROPERTY OF THE PARTY OF TH	7 1 12 Sec. 1 1 1 2 3 1 1	
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income			ļ		
8	Gain or (loss) from sales of assets other than inventory	ļ				
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory Other revenue: a					
11	h	<u> </u>				
	c			1		
	d					
	е					
12	Subtotal. Add columns (b), (d), and (e)	Z. 1. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1. 2. 1.			50/42	
13	Total. Add line 12, columns (b), (d), and (e)				13_50	142
	worksheet in line 13 instructions to verify calculation					
	t XVI-B Relationship of Activities to the					
	e No. Explain below how each activity for which	income is repo	ortea in column in by providing fu	(e) of Part XVI ands for such purp	-A contributed i oses), (See instru	mportantly to the
	accomplishment of the foundation's exempt pu	iposes (outer uta				CUURIS.)
	Explain below how each activity for which accomplishment of the foundation's exempt pu		 -	<u> </u>		
	▼ accomplishment of the foundation's exempt pu	iposes (outer uta				Cuoris.y
	accomplishment of the foundation's exempt pu	iposes (outer tha				Cuoris.)
	▼ accomplishment of the foundation's exempt pu	iposes (outer una				Cutoris.,
<u> </u>	accomplishment of the foundation's exempt pu	poses (outer uta				CUOIS.)
	accomplishment of the foundation's exempt pu	poses (outer tha				COURS.)
N	accomplishment of the foundation's exempt pu	poses (outer uta				CUOIS.)
N	accomplishment of the foundation's exempt pu	poses (outer uta				CUOIS.)
N	accomplishment of the foundation's exempt pu	poses (outer uta				COURS.)
√	accomplishment of the foundation's exempt pu	poses (outer uta				COURS.)
√	accomplishment of the foundation's exempt pu	poses (outer una				CUOIS.)
√	accomplishment of the foundation's exempt pu	poses (outer uta				CUOIS.)
N	accomplishment of the foundation's exempt pu	poses (outer uta				COURS.)
√	accomplishment of the foundation's exempt pu	poses (outer uta				COURS.)
√	accomplishment of the foundation's exempt pu	poses (outer una				COURS.
√	accomplishment of the foundation's exempt pu	poses (outer uta				COURS.)
<i>√</i>	accomplishment of the foundation's exempt pu	poses (outer uta				COURS.
<i>√</i>	A accomplishment of the foundation's exempt pu	poses (outer una				
	accomplishment of the foundation's exempt pu					
	accomplishment of the foundation's exempt pu					
<i>√</i>	A accomplishment of the foundation's exempt pu					

Form 99	30-PF (20									age 10
Part	XVII	Information Organization		fers to and Trans	actions and Re	lationships	With N	onchari		
1	Did th	e organization d	irectly or indirectly either than section 5	ngage in any of the fo 501(c)(3) organization	ollowing with any ns) or in section	other organız n 527, relati	ation des	scribed solitical	Yes	No
	_	izatıons?								
а	Trans	fers from the rep	orting foundation to	a noncharitable exen	npt organization o	of-				4
		ash						•	1a(1)	X
		her assets							1a(2)	×
b		transactions:							45 (4)	1
			a nonchantable exer	•					1b(1)	X
				ble exempt organizat			•	•	1b(2) 1b(3)	 X
				assets					1b(3)	
			_						1b(5)	メ メ メ X X X
		_		p or fundraising solic			•		1b(6)	12
С				ts, other assets, or pa					1c	 文
d				" complete the follo		olumn (b) sh	ould alw	avs shov		
u	value	of the goods, of	ther assets, or service	es given by the repo	rting foundation.	If the foundat	tion recei	ived less	than fair	market
	value	in any transaction	on or sharing arrange	ement, show in colum	ın (d) the value of	the goods, o	ther asse	ts, or se	rvices rec	eived.
(a) Lin		b) Amount involved		aritable exempt organization		otion of transfers,				
								•		
										. <u> </u>
		14								
	70	/ / l								_
		<u> </u>								
				<u> </u>			·			
										
										
		. formalation almo	ath, or indirectly offi	liated with, or relate	d to one or more	tay-eyempt	organiza	ations		
Za				ction 501(c)(3)) or in s		· · · ·] Yes [☐	No
h			e following schedule.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					_ 103 <u>_</u>	110
		(a) Name of organ		(b) Type of orga	anization	(c)	Descriptio	n of relation	nship	
		(a) Name of organ		(-) -) (-)			<u> </u>			
		10								
		$-\lambda I/H$					-			
		-///// -		· · · · · · · · · · · · · · · · · · ·						
	Unde	er penalties of perjury, I	I declare that I have examine	d this return, including accord	panying schedules and	statements, and to	the best of	my knowled	ige and belief	, it is true,
Sigi	n corre	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled correct, and complete Declaration of preparer other than taxpayer) is based on all information of which preparer has any knowledge						May the IF	RS discuss th	is return
Her	1 1	Atressa - (alles	4-15-18	PRESI	DENT			reparer showr	
		nature of officer of tru	stee	Date	Title			See made	CIIOIIS [] TE	;s∐N0
Doi:	 4	Print/Type preparer	r's name	Preparer's signature		Date	Chec	k ∏ ıf F	PTIN	
Paic								mployed		
	parer Only	Firm's name ▶				F	irm's EIN 🕨	<u> </u>		
USE	- Ciny	Firm's address ▶				P	hone no			
								C,	.m 990-F	F (2017)

Schedule B

(Form 930, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

AL			JCDRPORATE	9	20-8015238	
Organiz	ation type (check o	one)·				
Filers of	f:	Section:				
Form 99	0 or 990-EZ	☐ 501(c)() (enter number) org	anization		
		4947(a)(1) no	onexempt charitable tr	ust not treated as a private fo	oundation	
		☐ 527 political	organization			
Form 99	0-PF	501(c)(3) exe	empt private foundation	า		
		4947(a)(1) no	onexempt charitable tro	ust treated as a private found	dation	
		☐ 501(c)(3) tax	able private foundation	1		
Note: O instruction General	ons. Rule For an organization	n filing Form 990, 9 or property) from a	90-EZ, or 990-PF that	received, during the year, co	entributions totaling \$5,000	
Special		contributions.				
Special	nules					
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	contributor, during	the year, total cont	tributions of more than	filing Form 990 or 990-EZ th \$1,000 exclusively for religion elty to children or animals. Co	us, charitable, scientific,	
	contributor, during contributions totals during the year for General Rule appl	the year, contributed more than \$1,00 an exclusively religions to this organiza	tions exclusively for rel 00. If this box is checken gious, charitable, etc., p	b) filing Form 990 or 990-EZ to igious, charitable, etc., purposed, enter here the total contributions. Don't complete any ed nonexclusively religious, c	oses, but no such butions that were received of the parts unless the	

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

ALLES FOUNDATION INCORPORATED

Employer identification number 20 -8015238

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
/	GARY ALLES 235 WOODWARD DRIVE EVANSVILLE, IN 47712	\$ 140,000,00	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

STATEMENT 2-FOR	n 990-PF, PART VII-A, L	INE 10 SUBSTRUTIAL	CONTRIL
NAME	ADDRESS	CITY, STAT	E, ZIH
GARY ALLES	235 Woodwhad Da	WE EVANSVILLE	E,IN
	ORM 990-PF, PARTX	NANGE V, LINE IA CONTRY OR	ERS W BUTED O # Score
STATEMENT 3-F			

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