

Form **990-PF****Return of Private Foundation**

OMB No 1545-0052

Department of the Treasury
Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2017

Open to Public Inspection

For calendar year 2017 or tax year beginning

, 2017, and ending

, 20

Name of foundation

KAMINSKI SYLVESTER & TESSIE FDN 480051010

Number and street (or P.O. box number if mail is not delivered to street address)

Room/suite

A Employer identification number

23-7355916

B Telephone number (see instructions)

574-235-2793**P.O. BOX 1602**

City or town, state or province, country, and ZIP or foreign postal code

SOUTH BEND, IN 46634

G Check all that apply:

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at

end of year (from Part II, col. (c), line

16) ▶ \$ **829,346.**J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify)

(Part I, column (d) must be on cash basis)

C If exemption application is pending, check here. ☐D 1 Foreign organizations, check here. ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here. ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. ☐**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

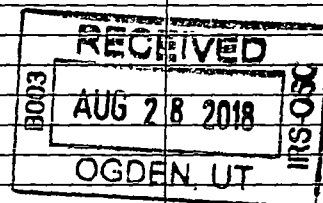
(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)	380.			
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	14,245.	14,245.	14,245.	STMT 1
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	35,393.			
b Gross sales price for all assets on line 6a 140,673				
7 Capital gain net income (from Part IV, line 2)		35,393.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	1,104.			STMT 2
12 Total. Add lines 1 through 11	51,122.	49,638.	14,245.	
13 Compensation of officers, directors, trustees, etc.	13,195.	1,167.		
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule) STMT 3	1,500.	1,500.	NONE	NONE
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions) STMT 4	118.			
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications	208.			
23 Other expenses (attach schedule) STMT 5	3,733.			
24 Total operating and administrative expenses. Add lines 13 through 23	18,754.	2,667.	NONE	NONE
25 Contributions, gifts, grants paid	41,270.			41,270.
26 Total expenses and disbursements. Add lines 24 and 25	60,024.	2,667.	NONE	41,270.
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	-8,902.			
b Net investment income (if negative, enter -0-)		46,971.		
c Adjusted net income (if negative, enter -0-)			14,245.	



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing		54.	81.	81.
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations (attach schedule)		1,981.	3,810.	3,810.
	b	Investments - corporate stock (attach schedule) . STMT 6		335,040.	294,172.	422,195.
	c	Investments - corporate bonds (attach schedule) . STMT 7		373,462.	403,466.	403,260.
	11	Investments - land, buildings, and equipment basis (attach schedule) ▶				
12	Investments - mortgage loans					
13	Investments - other (attach schedule) STMT 8					
14	Land, buildings, and equipment basis (attach schedule) ▶					
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		710,537.	701,529.	829,346.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)			NONE		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds		710,537.	701,529.	
	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see instructions)		710,537.	701,529.	
31	Total liabilities and net assets/fund balances (see instructions)		710,537.	701,529.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	710,537.
2	Enter amount from Part I, line 27a	2	-8,902.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	701,635.
5	Decreases not included in line 2 (itemize) ▶ DIFFERENCE DUE TO TIMING/ROUNDING	5	106.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	701,529.

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Part IV Capital Gains and Losses for Tax on Investment 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	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECURITIES				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 140,673.		105,280.	35,393.	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(l) Gains (Col (h) gain minus col. (k), but not less than -0- or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a			35,393.	
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2 35,393.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):		{ If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8		3

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	40,205.	779,813.	0.051557
2015	38,150.	811,283.	0.047024
2014	41,151.	842,719.	0.048831
2013	36,531.	818,379.	0.044638
2012	41,506.	775,376.	0.053530
2 Total of line 1, column (d)			2 0.245580
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			3 0.049116
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 795,013.
5 Multiply line 4 by line 3.			5 39,048.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 470.
7 Add lines 5 and 6.			7 39,518.
8 Enter qualifying distributions from Part XII, line 4. If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			8 41,270.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1		
	Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	470.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	NONE
3	Add lines 1 and 2	3	470.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	NONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	470.
6	Credits/Payments.		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	1,449.
b	Exempt foreign organizations - tax withheld at source	6b	NONE
c	Tax paid with application for extension of time to file (Form 8868)	6c	NONE
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	1,449.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	979.
11	Enter the amount of line 10 to be. Credited to 2018 estimated tax <input checked="" type="checkbox"/> 979. Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ _____ (2) On foundation managers. \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		X
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 that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" type="checkbox"/>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	X	
14 The books are in care of ▶ <u>1ST SOURCE BANK</u> Telephone no. ▶ <u>(574) 235-2790</u> Located at ▶ <u>100 N MICHIGAN, TRUST DEPT, SOUTH BEND, IN</u> ZIP+4 ▶ <u>46601</u>		
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 ▶ <u>15</u>		
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here ▶ <input type="checkbox"/>		
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 2017?		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))		
a 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 ▶	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)		X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.)		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?. ☐ Yes ☒ No(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?. ☐ Yes ☒ No(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ No(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ Nob If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions ☐ Yes ☒ NoOrganizations relying on a current notice regarding disaster assistance, check here ☐c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ Nob Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
If "Yes" to 6b, file Form 88707a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ Nob If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions.

(a) Name and address	(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 account, other allowances
SEE STATEMENT 9		13,195.		

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

Total number of other employees paid over \$50,000 ☐ NONE

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE

Total number of others receiving over \$50,000 for professional services **NONE**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
2	
All other program-related investments See instructions.	
3 NONE	

Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	807,120.
b	Average of monthly cash balances	1b	NONE
c	Fair market value of all other assets (see instructions).	1c	NONE
d	Total (add lines 1a, b, and c)	1d	807,120.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	807,120.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	12,107.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	795,013.
6	Minimum investment return. Enter 5% of line 5	6	39,751.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	39,751.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	470.
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	470.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	39,281.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	39,281.
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	39,281.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	41,270.
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	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	41,270.
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	470.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	40,800.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				39,281.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			NONE	
b Total for prior years 20____, 20____, 20____		NONE		
3 Excess distributions carryover, if any, to 2017:				
a From 2012	3,387.			
b From 2013	NONE			
c From 2014	710.			
d From 2015	NONE			
e From 2016	1,489.			
f Total of lines 3a through e	5,586.			
4 Qualifying distributions for 2017 from Part XII, line 4. ► \$ 41,270.				
a Applied to 2016, 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			
d Applied to 2017 distributable amount				39,281.
e Remaining amount distributed out of corpus.	1,989.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,575.			
b Prior years' undistributed income. Subtract 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		
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions			NONE	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018.				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 required - see instructions)	NONE			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	3,387.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	4,188.			
10 Analysis of line 9				
a Excess from 2013	NONE			
b Excess from 2014	710.			
c Excess from 2015	NONE			
d Excess from 2016	1,489.			
e Excess from 2017	1,989.			

Form **990-PF** (2017)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SEE STATEMENT 29				41,270.
Total			▶ 3a	41,270.
b Approved for future payment				
Total			▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	14,245.	
5 Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	35,393.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a _____					
b CLASS ACTION CLOSE			14	1,104.	
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)				50,742.	
13 Total. Add line 12, columns (b), (d), and (e)				50,742.	

(See worksheet in line 13 instructions to verify calculations.)

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

Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)



NOT APPLICABLE

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | |
|--|------------|-----------|
| <p>1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p>a Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p>b Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> | <p>Yes</p> | <p>No</p> |
| | | |
| | | |
| 1a(1) | | X |
| 1a(2) | | X |
| | | |
| 1b(1) | | X |
| 1b(2) | | X |
| 1b(3) | | X |
| 1b(4) | | X |
| 1b(5) | | X |
| 1b(6) | | X |
| 1c | | X |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign
Here**

Signature of officer or trustee
 Patrick O'Connell

8-23 10

Date

OFFICER

May the IRS discuss this return with the preparer shown below?
See instructions. ☐ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

Date _____

Check <input type="checkbox"/> if self-employed	PTIN
---	------

Firm's name

Firm's EIN ▶

Firm's address ►

Phone no.

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
-----	-----	-----	-----
BLACKROCK STRAT INC OPP-INS	1,037.	1,037.	1,037.
FEDERATED INST HI YLD BOND FUND	1,644.	1,644.	1,644.
FIDELITY CONTRA FUND #022	106.	106.	106.
OAKMARK INTERNATIONAL-INST	606.	606.	606.
ISHARES MSCI EAFE ETF	582.	582.	582.
METROPOLITAN WEST TOTAL RETURN BD-I	3,541.	3,541.	3,541.
FEDERATED GOVT OBLI FD-PRM	7.	7.	7.
FEDERATED TREASURY OBLIGA-SS	7.	7.	7.
MORGAN STANLEY INSTL INTL EQ	134.	134.	134.
AMER FNDS NEW WORLD-F3	408.	408.	408.
BOSTON PARTNERS INV ALL CAP VAL INST	1,464.	1,464.	1,464.
T ROWE PR MID CAP GROW-I	253.	253.	253.
STERLING CAP STR S/C VAL-INS	81.	81.	81.
VANGUARD 500 INDEX FUND-ADM	1,254.	1,254.	1,254.
WASATCH-1ST SOURCE INCOME FU	3,121.	3,121.	3,121.
	-----	-----	-----
TOTAL	14,245.	14,245.	14,245.
	=====	=====	=====

FORM 990PF, PART I - OTHER INCOME
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
WELL FARGO CLASS ACTION LAWSUIT	1,104.

TOTALS	1,104.
	=====

FORM 990PF, PART I - ACCOUNTING FEES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
TAX PREPARATION FEES	1,500.	1,500.		
	-----	-----	-----	-----
TOTALS	1,500.	1,500.	NONE	NONE
	=====	=====	=====	=====

FORM 990PF, PART I - TAXES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
FOREIGN TAXES ON QUALIFIED FOR	112.
FOREIGN TAXES ON NONQUALIFIED	6.

TOTALS	118.
	=====

KAMINSKI SYLVESTER & TESSIE FDN 480051010

23-7355916

FORM 990PF, PART I - OTHER EXPENSES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
OTHER EXPENSES	3,733 .
TOTALS	----- 3,733 . =====

KAMINSKI SYLVESTER & TESSIE FDN 480051010
FORM 990PF, PART II - CORPORATE STOCK
=====

23-7355916

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
FIDELITY CONTRA #022	67,549.	112,274.
ISHARES MSCI EAFE INDEX FD	15,795.	20,741.
AMER FNDS NEW WORLD F3	24,138.	30,045.
T ROWE PRICE MID CAP GROWTH	22,150.	32,649.
BOSTON PARTNERS INV ALL CAP VA	65,651.	110,511.
MORGAN STANLEY INS INTL EQ-1		
VANGUARD 500 INDEX FUND-ADM	38,890.	51,541.
STERLING CAP ST VAL-INS	24,456.	27,972.
OAKMARK INTERNATIONAL INST	35,543.	36,462.
	-----	-----
TOTALS	294,172.	422,195.
	=====	=====

KAMINSKI SYLVESTER & TESSIE FDN 480051010

23-7355916

FORM 990PF, PART II - CORPORATE BONDS
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
FED INST HI YLD BOND FUND	29,806.	30,810.
BLACKROCK STRAT INC	31,703.	31,269.
METROPOLITAN WEST TR BOND	169,735.	171,014.
WASATCH -1ST SOURCE INCOME FUN	172,222.	170,167.
	-----	-----
TOTALS	403,466.	403,260.
	=====	=====

KAMINSKI SYLVESTER & TESSIE FDN 480051010

23-7355916

FORM 990PF, PART II - OTHER INVESTMENTS
=====

COST/

FMV

C OR F

DESCRIPTION

FEDERATED TREAS OBLIG MMF

C

TOTALS

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

=====

OFFICER NAME:

CAROL EVANS

ADDRESS:

13633 HAYNES AVENUE
MISHAWAKA, IN 46545

TITLE:

PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 1,000.

OFFICER NAME:

NORMAN MATUSZAK

ADDRESS:

2701 OAK LEAF CIRCLE
SOUTH BEND, IN 46628

TITLE:

VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 450.

OFFICER NAME:

MARY PLUTA

ADDRESS:

57291 PEGGY DRIVE
SOUTH BEND, IN 46619

TITLE:

TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 1,000.

OFFICER NAME:

ELAINE DULCET

ADDRESS:

59845 SYCAMORE ROAD
NORTH LIBERTY, IN 46554

TITLE:

SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 1,000.

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

OFFICER NAME:

MARK KLOTA

ADDRESS:

19447 KERN ROAD

SOUTH BEND, IN 46614

TITLE:

SCHOLARSHIP CHAIR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 1,000.

OFFICER NAME:

CAMILLE BUJEKER

ADDRESS:

50575 MALLOW COURT

GRANGER, IN 46530

TITLE:

MEMBER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 500.

OFFICER NAME:

REV CHARLES ZAWISTOWSKI

ADDRESS:

159 N SUMMIT DRIVE

SOUTH BEND, IN 46619

TITLE:

MEMBER AT LARGE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 500.

OFFICER NAME:

1ST SOURCE BANK

ADDRESS:

PO BOX 1602

SOUTH BEND, IN 46634

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 7,745.

TOTAL COMPENSATION:

13,195.
=====

KAMINSKI SYLVESTER & TESSIE FDN 480051010
FORM 990PF, PART XV - LINES 2a - 2d

23-7355916

=====

RECIPIENT NAME:

MARK A KLOTA, SCHOLARSHIP CHAIR

ADDRESS:

PO BOX 1524

SOUTH BEND, IN 46634

E-MAIL ADDRESS: MARKKLOTA@GMAIL.COM

FORM, INFORMATION AND MATERIALS:

SEE ATTACHED

SUBMISSION DEADLINES:

SEE ATTACHED APPLICATION

RESTRICTIONS OR LIMITATIONS ON AWARDS:

SEE ATTACHED APPLICATION

STATEMENT 11

KAMINSKI SYLVESTER & TESSIE FDN 480051010

23-7355916

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

M.R. FALCONS NEST 4

ADDRESS:

3212 KELLER

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

YOUTH FUND

FOUNDATION STATUS OF RECIPIENT:

NC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

COMMUNITY FOUNDATION

OF ST JOSEPH COUNTY

ADDRESS:

205 W JEFFERSON BLVD

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

\$500 EACH TO FOUR NAMED CHARITIES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:

OUR LADY OF THE ROAD

ADDRESS:

744 S MAIN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 200.

STATEMENT 12

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

VIVIAN CRUMLISH

ADDRESS:

1091 RIVERSIDE DR
SOUTH BEND, IN 46616

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:

JENNIFER CUKROWICZ

ADDRESS:

1106 CHIMES BOULEVARD
SOUTH BEND, IN 46615

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:

LEXI HARMACINSKI

ADDRESS:

51638 MEDFIELD TR
SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

JONATHON UNDERLY

C/O ST JOSEPH HIGH SCHOOL

ADDRESS:

453 N NOTRE DAME AVE

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

RIVER REMBLE

C/O MARIAN HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

KENNETH KLIMEK

ADDRESS:

333 SOUTH TWYCKENHAM DRIVE

SOUTH BEND, IN 46615

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

KAREN KLIMEK

ADDRESS:

333 SOUTH TWYCKENHAM DRIVE

SOUTH BEND, IN 46615

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:

FAITH SCHERPEREEL

C/O MARIAN HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

KELLY SKWARCAN

C/O MARIAN HIGH SCHOOL

ADDRESS:

1131 S LOGAN ST

MISHAWAKA, IN 46544

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ZACHARY BRYAN

C/O SAINT JOSEPH HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

EMMA ALBERTSON

C/O SAINT JOSEPH HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

RUSTY DAY

C/O SAINT JOSEPH HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

KATELYN GRZEGOREK

C/O TRUST DEPARTMENT

ADDRESS:

100 NORTH MICHIGAN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ALEX KOKOT

ADDRESS:

15347 ROSCOMMON LANE

GRANGER, IN 46530

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:

HANNA HOPSON

C/O MARIAN HIGH SCHOOL

ADDRESS:

1131 S LOGAN ST

MISHAWAKA, IN 46544

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

ALEXIS FELTY

ADDRESS:

453 N NOTRE DAME AVE

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

=====

RECIPIENT NAME:

ABBAY TAFELSKI

ADDRESS:

ST. JOSEPH HIGH SCHOOL

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

ELIZABETH MORYL

C/O MARIAN HIGH SCHOOL

ADDRESS:

1131 S LOGAN ST

MISHAWAKA, IN 46544

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

MICHAEL DERANEK

ADDRESS:

19335 STRAWBERRY HILL

SOUTH BEND, IN 46614

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

LYDIA FELL

C/O MARIAN HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

NICHOLAS ANDRYSIAK

C/O ST. JOSEPH HIGH SCHOOL

ADDRESS:

453 N NOTRE DAME AVE

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

CADENCE SZAJKO

C/O MARIAN HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

LAUREN PIENIAZKIEWICZ

C/O SAINT JOSEPH HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

MEGAN SIMMONS

ADDRESS:

2529 SUMMIT RIDGE

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:

KATHERINE UNDERLY

C/O ST. JOSEPH HIGH SCHOOL

ADDRESS:

453 N NOTRE DAME AVE

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

EMMA KARCZEWSKI

C/O SAINT JOSEPH HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

CONNOR LITKA

C/O SAINT JOSEPH HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

ALEXANDRA OSOWSKI

C/O SAINT JOSEPH HIGH SCHOOL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

RYAN LAPPAN

C/O ST JOSEPH HIGH SCHOOL

ADDRESS:

453 N NOTRE DAME AVE

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

HOLY FAMILY CHURCH

ADDRESS:

56405 MAYFLOWER ROAD

SOUTH BEND, IN 46619

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

Z.B. FALCONS NEST 80

ADDRESS:

323 SOUTH SHERIDAN

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

YOUTH FUND

FOUNDATION STATUS OF RECIPIENT:

NC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

ST. VINCENT DE PAUL

ADDRESS:

520 CRESCENT AVENUE

SOUTH BEND, IN 46617

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

ST. JOSEPH REGIONAL MEDICAL CENTER
AND AFFILIATES

ADDRESS:

5215 HOLY CROSS PARKWAY
MISHAWAKA, IN 46545

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SISTER MAURA CHAPIN CENTER

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

CHRIST THE KING CHURCH

ADDRESS:

52473 SR 933
SOUTH BEND, IN 46637

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

LOGAN CENTER

ADDRESS:

2505 EAST JEFFERSON BOULEVARD
SOUTH BEND, IN 46615

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

=====

RECIPIENT NAME:

CAMP MILLHOUSE

ADDRESS:

25600 KELLY ROAD

SOUTH BEND, IN 46614

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 750.

RECIPIENT NAME:

ST. JUDE PARISH

ADDRESS:

19704 JOHNSON ROAD

SOUTH BEND, IN 46614

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

YOUTH SUMMER CAMP

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

ST. STANISLAUS KOSTKA CHURCH

ADDRESS:

55756 TULIP ROAD

NEW CARLISLE, IN 46552

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

MICHIANA PUBLIC BROADCASTING CORP
WNIT

ADDRESS:

300 WEST JEFFERSON
SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

ST. AUGUSTINE'S CHURCH

ADDRESS:

1501 WEST WASHINGTON
SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

WOMAN'S CARE CENTER

ADDRESS:

PO BOX 1230
MISHAWAKA, IN 46546

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

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RECIPIENT NAME:

CENTER FOR THE HOMELESS

ADDRESS:

813 S MICHIGAN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 860.

RECIPIENT NAME:

FOREVER LEARNING INSTITUTE

ADDRESS:

54191 IRONWOOD ROAD

SOUTH BEND, IN 46635

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

NEIGHBORHOOD RESOURCES &

TECHNICAL SERVICES CORP

ADDRESS:

217 S MICHIGAN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

FOOD BANK OF NORTHERN INDIANA

ADDRESS:

702 CHAPIN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

ST. MARY'S POLISH NATIONAL CHURCH

ADDRESS:

159 NORTH SUMMIT DRIVE

SOUTH BEND, IN 46619

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

NC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

SOUTH BEND SYMPHONY ORCHESTRA

ADDRESS:

127 N MICHIGAN STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,000.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ST. PATRICK CATHOLIC CHURCH

ADDRESS:

331 S. SCOTT STREET

SOUTH BEND, IN 46601

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

TAYLOR KOWALSKI

ADDRESS:

453 N NOTRE DAME AVE

SOUTH BEND, IN 46616

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

I

AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:

HOLY FAMILY ADOPTION AGENCY

C/O HOLY CROSS PARISH

ADDRESS:

920 WILBER STREET

SOUTH BEND, IN 46628

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

MISHAWAKA FOOD PANTRY, INC.

ADDRESS:

315 LINCOLNWAY WEST

MISHAWAKA, IN 46544

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100.

RECIPIENT NAME:

QUEEN OF PEACE CHURCH

ADDRESS:

4508 VISTULA ROAD

MISHAWAKA, IN 46544

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 700.

RECIPIENT NAME:

CHOPIN FINE ARTS CLUB

ADDRESS:

57310 PEACHSTONE DRIVE

SOUTH BEND, IN 46619

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,160.

TOTAL GRANTS PAID:

41,270.
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