efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491319047378

2017

OMB No 1545-0052

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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. ► Information about Form 990-PF and its instructions is at www.irs.gov/form990pf . For calendar year 2017, or tax year beginning 01-01-2017 , and ending 12-31-2017 | | | | | | | | Open to Public Inspection | |
|---|----------|----------------------------------|--|---|-----------------------|----------|-----------------------|--|----------------------------------|
| For | caler | ndar year 20 | 17, or tax yea | r beginning 01-01-20 |)17 , aı | nd er | nding 12-31- | 2017 | |
| | e of fou | Indation NCES REICHART | | | | | A Employer Id | entification nui | mber |
| | | ION INC | | | | | 26-0533447 | | |
| | | street (or P O bo | ox number if mail is r | not delivered to street address) | Room/suite | | B Telephone nu | mber (see ınstru | ctions) |
| , | 373 WE. | 31 1100 NOKIII | | | | | (765) 754-7527 | 7 | |
| City or town, state or province, country, and ZIP or foreign postal code ALEXANDRIA, IN 46001 | | | | | | | C If exemption | application is pe | nding, check here |
| c cl | l | I that apply | ☐ Initial return | Instead waterway of a | former public charity | | D.1 Foreign or | annizations shor | oli hara |
| o Ci | теск ап | і спас арріу | Final return | Amended return | former public charity | | | ganizations, chec ganizations mee | ▶ ∟ |
| | | | Address char | | | | | k here and attac | |
| H C | neck ty | pe of organizati | | 501(c)(3) exempt private | foundation | | | undation status v n 507(b)(1)(A), (| |
| | Section | 4947(a)(1) no | nexempt charitabl | e trust 🔲 Other taxabl | e private foundation | | | | |
| | | et value of all a | | J Accounting method | ☑ Cash ☐ Accru | ıal | | | nonth termination |
| | | rom Part II, col \$ 4,820,572 | (c), | Other (specify) | <u> </u> | | under sectio | n 507(b)(1)(B), (| check here |
| | | | | (Part I, column (d) must | pe on casn basis) | | | | |
| Pa | rt I | • | | Expenses (The total (d) may not necessarily | (a) Revenue and | (b) | Net investment | (c) Adjusted n | (d) Disbursements for charitable |
| | | | nts in column (a) (se | | expenses per books | ` ′ | ıncome | income | purposes (cash basis only |
| | 1 | Contributions, | gıfts, grants, etc | , received (attach | 398,759 | 1 | | | , |
| | | schedule) | | | | | | | |
| | 2 | Check ► ☐ If Sch B | the foundation is | not required to attach | | | | | |
| | 3 | | vings and tempora | ary cash investments | 3,601 | | 3,601 | | |
| | 4 | Dividends and | interest from seci | urities | 80,972 | ! | 80,972 | | |
| | 5a | Gross rents | | | | | | | |
| a) | b | Net rental inco | ` , | | | | | | |
| Ę | 6a | Net gain or (lo | ss) from sale of a | ssets not on line 10 | 95,575 | <u> </u> | | | |
| Revenue | b | • | ice for all assets o | | | - | 95,575 | | |
| ď | 7 8 | | et income (from Pa n capital gain | | | 95,5/5 | | | |
| | 9 | | cations | | | | | | |
| | 10a | Gross sales les | ss returns and allo | wances | | | | | |
| | ь | Less Cost of g | goods sold | | | | | | |
| | С | Gross profit or | (loss) (attach sch | nedule) | | | | | |
| | 11 | Other Income | (attach schedule) | | | | | | |
| | 12 | | es 1 through 11 | | 578,907 | | 180,148 | | |
| | 13 | | of officers, direct | | C | 1 | 0 | | |
| ıΛ | 14 15 | | ee salaries and wa employee benefit | ges | | | | | |
| Se | 16a | | | | | | | | |
| Expenses | ь | Accounting fee | es (attach schedule | e) | | | | | |
| Ě | c | Other profession | onal fees (attach s | schedule) | | | | | |
| Administrative | 17 | Interest | | | | | | | |
| stra | 18 | Taxes (attach | schedule) (see ins | structions) | 1,412 | | 783 | | |
| Ξ | 19 | Depreciation (| attach schedule) a | and depletion | | | | | |
| Ē | 20 | | | | | | | | |
| and 4 | 21 | | | gs | | | | | |
| <u>.</u> | 22 | | | | 06-1 25-775 | | 25 747 | | |
| Operating | 23 | | | e).........rative expenses. | 25,775 | | 25,747 | | |
| era | 24 | - | _ | | 27,187 | , | 26,530 | | |
| o | 25 | | gifts, grants paid | | 201,002 | - | | | 201,00 |
| | 26 | | | ments. Add lines 24 and | | | | | |
| | | 25 | | | 228,189 | | 26,530 | | 201,00 |
| | 27 | Subtract line 2 | | neae and | 250 710 | | | | |
| | a | disbursemen | renue over expe ts | iises ailū | 350,718 | | | | |
| | ь | | ent income (if ne | • | | | 153,618 | | |
| = | C | | income(ıf negatı | <u> </u> | | | Cat No. 11289 | <u> </u> | Form 990-PF (2013 |
| or | Paner | WOLK REQUICTION | IN ACT NOTICE SE | H INSTRUCTIONS | | , | NA 11700\ | , | LARM UUIL-DE (2017 |

2,140,508

1,232,939

71,903

3,976,330

3,976,330

3,976,330

3,976,330

1,402

2,452,494

1,328,839

592

4,327,048

4,327,048

4,327,048

4,327,048

1 2

3

4

5

6

3,976,330

4,327,048

4,327,048

Form 990-PF (2017)

350,718

0

2,941,266

1,333,591

4,820,572

| Assets | |
|--------|--|
| | |

6

7

8

9

10a

b

C

11

12

13

14

15

16

17 18

19

20 21

22

23

24

25

26

28

29 Net 30

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27 Receivables due from officers, directors, trustees, and other

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule) ▶

Total assets (to be completed by all filers—see the

Less accumulated depreciation (attach schedule)

Less allowance for doubtful accounts ▶

Inventories for sale or use

Land, buildings, and equipment basis ▶ _

instructions Also, see page 1, item I)

Other assets (describe ▶ _

Other liabilities (describe -_

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

disqualified persons (attach schedule) (see instructions)

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Foundations that follow SFAS 117, check here ▶ ✓

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Capital stock, trust principal, or current funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Other notes and loans receivable (attach schedule)

Page **3**

| | (a) the kınd(s) of property sold (e g , re thouse, or common stock, 200 shs | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | |
|--|---|--|--|---|----------------------------|
| 1 a PUBLICLY TRADED SECU | RITIES - ST | | | | |
| b PUBLICLY TRADED SECU | RITIES - LT | | | | |
| c CAPITAL GAINS DIVIDEN | DS | | Р | | |
| d | | | | <u> </u> | |
| e | | | | | |
| (e) | (f) | | (g) | • | h) |
| Gross sales price | Depreciation allowed (or allowable) | | other basis ense of sale | | r (loss)) minus (g) |
| _ 15 | 7,286 | pius expe | 154,303 | (e) plus (i | 2,983 2,983 |
| | 7,620 | | 322,375 | | 55,245 |
| | 7,347 | | 322,373 | | 37,347 |
| | 7,347 | | | | 37,347 |
| <u>d</u> | | | | | |
| e | | | 1010110 | _ | |
| Complete only for assets | showing gain in column (h) and ow | <u> </u> | | | l) h) gain minus |
| (i) | (j) Adjusted basis | | (k) of col(ı) | | less than -0-) or |
| F M V as of 12/31/69 | as of 12/31/69 | | (j), if any | | om col (h)) |
| a | | | , | | 2,983 |
| b | | | | | 55,245 |
| С | | | | | 37,347 |
| d | | | | | · |
| e | | | | | |
| 2 Capital gain net income3 Net short-term capital g | or (net capital loss) | If gain, also enter in Pa If (loss), enter -0- in Pa 1222(5) and (6) | | 2 | 95,575 |
| If gain, also enter in Pai in Part I, line 8 | rt I, line 8, column (c) (see instructi | ons) If (loss), enter -0 | } | 3 | |
| Part V Qualification U | Inder Section 4940(e) for Re | duced Tax on Net | Investment Inc | ome | |
| For optional use by domestic p | rivate foundations subject to the sec | ction 4940(a) tax on ne | t investment incom | e) | |
| | • | , , | | , | |
| f section 4940(d)(2) applies, le | ave this part blank | | | _ | _ |
| Vas the foundation liable for th | e section 4942 tax on the distributa | ble amount of any year | in the base period? | · | es 🗹 No |
| f "Yes," the foundation does no | t qualify under section 4940(e) Do | not complete this part | | | |
| 1 Enter the appropriate am | ount in each column for each year, | see instructions before | making any entries | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitabl | le-use assets | (d) Distribution rati (col (b) divided by c | |
| 2016 | 241,637 | | 3,609,367 | | 0 066947 |
| 2015 | 198,907 | | 3,395,842 | | 0 058574 |
| 2014 | 144,500 | | 3,506,669 | | 0 041207 |
| 2013 | 125,127 | | 3,008,981 | | 0 041585 |
| 2012 | 95,467 | | 2,426,941 | | 0 039336 |
| 2 Total of line 1, column (d | i) | | 2 | | 0 247649 |
| | for the 5-year base period—divide | | | | |
| | dation has been in existence if less | | 3 | | 0 049530 |
| | ncharitable-use assets for 2017 fron | • | 4 | | 3,892,243 |
| 5 Multiply line 4 by line 3 | | | 5 | | 192,783 |
| | ent income (1% of Part I, line 27b) | | 6 | | 1,536 |
| | | | 7 | | 194,319 |
| | ons from Part XII, line 4 , | | <u>8</u> | L | 201,002 |
| If line 8 is equal to or gre | ater than line 7, check the box in Pa | art VI, line 1b, and com | plete that part usin | g a 1% tax rate Se | e the Part VI |
| INSU UCUONS | | | | Fc | orm 990-PF (2017) |

(b) How acquired

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

| | Information About Officers, | Directors. | Trustees. | Foundation | Managers, | Highly Paid Employe | ees. |
|-----------|-----------------------------|------------|-----------|------------|------------|---------------------|------|
| Part VIII | and Contractors | , | , | | g , | | , |

| 1 List all officers, directors, truste | oc f | oundation managers ar | d their compensation | (see instructions) | |
|---|-------------------|--|--------------------------------------|---|---------------------------------------|
| (a) Name and address | | Title, and average hours per week (b) devoted to position | (c) Compensation (If not paid, enter | (d) Contributions to employee benefit plans and deferred | Expense account, (e) other allowances |
| DOLLAR L DEVOLUET | | | - | compensation | |
| BRIAN L REICHART 120 EAST OAK STREET | 0 10 | SIDENT | 0 | 0 | C |
| ORESTES, IN 46063 | | | | | |
| GARY B REICHART | | RESIDENT | 0 | 0 | С |
| PO BOX 311 | 0 10 | | | | |
| ORESTES, IN 46063 | | ACURER | _ | _ | |
| TINA REICHART ANDERSON 120 EAST OAK STREET | 0 50 | ASURER | 0 | 0 | |
| ORESTES, IN 46063 | | | | | |
| 2 Compensation of five highest-pa | id eı | mployees (other than ti | nose included on line 1 | —see instructions). If nor | ne, enter "NONE." |
| (a) Name and address of each employee p more than \$50,000 | aıd | Title, and average hours per week (b) devoted to position | (c) Compensation | Contributions to employee benefit plans and deferred (d) compensation | Expense account, (e) other allowances |
| NONE | | | | (a) compensation | |
| NONE | | - | | | |
| | | | | | |
| | | 1 | | | |
| | | | + | | |
| | | + | | | |
| | | | | | |
| | | 4 | | | |
| | | | | | |
| | | 4 | | | |
| | | | | 1 | |
| Total number of other employees paid or | | | | | C |
| 3 Five highest-paid independent of | | | | | |
| (a) Name and address of each person | n pai | d more than \$50,000 | (b) Typ | e of service | (c) Compensation |
| NONE | | | - | | |
| | | | | | |
| | | | 4 | | |
| | | | | | |
| | | | + | | |
| | | | | | |
| | | | - | | |
| | | | | | |
| | | | + | | |
| T-1-1 | 0.000 | N. 6 6 1 | | | |
| Total number of others receiving over \$5 | | | | <u> ▶ </u> | ι |
| Part IX-A Summary of Direct | | | . 4 | | |
| List the foundation's four largest direct charitabl organizations and other beneficiaries served, co | e activ nferen | ces convened, research paper | s produced, etc | nation such as the number of | Expenses |
| 1 | | | | | |
| | | | | | |
| | | | | | |
| 2 | | | | | |
| | | | | | |
| | | | | | |
| 3 | | | | | |
| | | | | | |
| | | | | | |
| 4 | | | | | |
| | | | | | |
| | | | | | |
| Part IX-B Summary of Progra | m-P | elated Investments | (see instructions) | | |
| | | | <u> </u> | | A ma a cont |
| Describe the two largest program-related inv | estine | ents made by the foundation d | uring the tax year on lines I | allu z | Amount |
| 1 | | | | | |
| | | | | | |
| | | | | | |
| 2 | | | | | |
| | | | | | |
| All address was | | | | | |
| All other program-related investments | See | instructions | | | |
| 3 | | | | | |
| | | | | | |
| Total Add lines 4 through 2 | | | | L | |
| Total. Add lines 1 through 3 . | • | | | | Form 990-PE (2017) |

5

1.536

199.466

Form 990-PF (2017)

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

193.076

Form **990-PF** (2017)

0

2017

| | | _ | _ | | | ′ |
|---|---|---|---|---|---|---|
| X | П | Ī | 1 | Ι | ι | J |

b Total for prior years

a From 2012. **b** From 2013. . . . c From 2014. . . d From 2015.

e From 2016.

Part

2

| -PF (2) | 017 |) |
|---------|-----|---|
| | _ | 1 |

a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 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) 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. . c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

Subtract lines 7 and 8 from line 6a

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

| | art XIIII | Unaist | :rid | utea | TUC | ome | <u> </u> |
|---|---------------|--------|------|------|------|------|----------|
| | | | | | | | |
| | | | | | | | |
| 1 | Distributable | amount | for | 2017 | from | Part | ΧI |

| art XIII | Undistributed Income (see instructions | | | | | | | |
|-------------|--|--|--|--|--|--|--|--|
| | | | | | | | | |
| Distributab | le amount for 2017 from Part XI, line 7 | | | | | | | |
| Undistribut | ed income, if any, as of the end of 2017 | | | | | | | |

15,639

15.639

7.926

(a)

Corpus

15.639

7.926

23,565

23,565

0

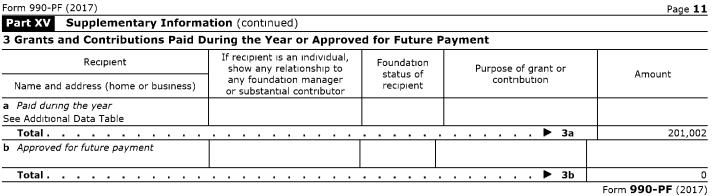
(b)

Years prior to 2016

(c)

2016

| ori | m 990-PF (2017) | | | | | Page 10 |
|------------|---|----------------------|---------------------------|-------------------------|-----------------------|----------------------------|
| i | Part XIV Private Operating Found | ations (see instr | uctions and Part \ | VII-A, question 9) | | |
| 1a | If the foundation has received a ruling or de | | | erating | | |
| L | foundation, and the ruling is effective for 20 | • | - | | 1 4043/5\/3\ == F | 7 4043(-)(5) |
| | Check box to indicate whether the organization Enter the lesser of the adjusted net | | ating foundation de: T | | J 4942(j)(3) or L | ے (5)(ر _ا 4942(|
| 2 a | income from Part I or the minimum | Tax year | (b) 2016 | Prior 3 years | (4) 2014 | (e) Total |
| | investment return from Part X for each | (a) 2017 | (b) 2016 | (c) 2015 | (d) 2014 | |
| ь | year listed | | | | | |
| | 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 | | | | | |
| | for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | |
| _ | alternative test relied upon "Assets" alternative test—enter | | | | | |
| а | (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 | | | | | |
| | 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 | | | | | |
| | Supplementary Information | (Complete this | part only if the | organization had | d \$5,000 or moi | e in |
| ŀ | assets at any time during th | | ructions.) | | | |
| l a | Information Regarding Foundation Mana- List any managers of the foundation who have | | than 2% of the tota | al contributions receiv | ved by the foundation | on |
| | before the close of any tax year (but only if | they have contribut | ed more than \$5,00 | 00) (See section 507 | (d)(2)) | |
| b | List any managers of the foundation who own | | | | arge portion of the | |
| | ownership of a partnership or other entity) o | or which the loundar | ion has a 10% or g | reater interest | | |
| | | | | | | |
| | | | | | | |
| | Information Regarding Contribution, Gr | C:ft | balawahin ata Du | | | |
| 2 | | | | _ | | |
| | Check here ► ☐ If the foundation only mak | | | | | |
| | unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a | | ants, etc. (see instri | uctions) to individual | s or organizations u | naer |
| | | | | | | |
| а | The name, address, and telephone number of | or e-mail address of | the person to whon | n applications should | be addressed | |
| | TINA REICHART ANDERSON 120 EAST OAK ST | | | | | |
| | ORESTES, IN 46063 | | | | | |
| | (765) 754-7527 | | | | | |
| b | The form in which applications should be sul | | | · | | |
| | THE FOUNDATION HAS DEVELOPED APPLICATIONS INCLUDE THE FOLLOWING | | | | | |
| | DEPENDING ON THE TYPE OF SCHOLARSHIP | | | | | |
| | DESIGNED TO MEASURE ABILITY AND APTI | | | | | |
| | DESCRIBING THE APPLICANT'S INTERESTS A LIST OF PAST HONORS AND RECOGNITIO | | | | | |
| | NAMES OF THE EDUCATIONAL INSTITUTION | IS TO WHICH THE A | PPLICANT INTENDS | TO APPLY | | |
| С | Any submission deadlines N/A | | | | | |
| d | Any restrictions or limitations on awards, su | ch as by geographic | al areas, charitable | fields, kinds of instit | utions, or other | |
| | factors THE NUMBER OF ANNUAL SCHOLARSHIPS A | ND OTHER EDUCAT | IONAL GRANTS MAI | DE BY THE FOUNDAT | ION WILL BE DEPEN | IDENT UPON THE |
| | FOUNDATION'S RESOURCES AND OTHER PR | OGRAMS WITH RE | SPECT TO SCHOLAR | SHIPS AWARDED FO | R REGULAR STUDY | AT AN |
| | EDUCATIONAL INSTITUTION EACH SCHOLA TO EXCEED THE ANTICIPATED COST OF THE | | | | | |
| | INCIDENTAL EXPENSES FOR HIS OR HER AT | | | | | |
| | EDUCATIONAL GRANTS USED TO ACHIEVE | A SPECIFIC OBJECT | VE OR TO ENHANCI | E RECIPIENTS' CAPA | CITIES OR SKILLS E | ACH SUCH |
| | SCHOLARSHIP OR OTHER EDUCATIONAL GR SCHOLARSHIP OR EDUCATIONAL GRANT WI | | | | | |
| | TO ACHIEVE A SPECIFIC OBJECTIVE OR TO | | | | 5 510101612 | 223101120 |



| er gross amounts unless otherwise indicated | | Unrelated bus | siness income | Excluded by section | (e) Related or exemple | |
|---|---|--|----------------------|---------------------------------------|---------------------------|--------------------------------------|
| | ees and contracts from government agencies mbership dues and assessments | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | · · | | | | | |
| | | | | 14 | 3,601 | |
| | | | | 14 | 80,972 | |
| | • • | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | 18 | 95,575 | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| b | | | | | | |
| c | | | | | | |
| b c d e | | | | | | |
| b c d e Subtota Total. | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) | lations) | 0 | 13 | 180,148 | |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,1 |
| b c d e Subtota Total. / (See wo Irt XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,1 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,1 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,1 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,1 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d e Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |
| b c d Subtota Total. / (See wo | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex | lations) e Accomplishr income is reported | ment of Exemp | pt Purposes F Part XVI-A contribut | Bted importantly to | 180,14 |

| orm | 990-P | (2017) | | | | | | | | Pa | ge 13 |
|--------|---------|---|--|---------------------------------------|----------------------------|-----------------------------------|---|---------------------------------|-----------------------|------------------|--------------|
| Pa | rt XVI | Information Re Exempt Organi | | fers To and 1 | [ransacti | ons and | Relationships Witl | n Nonchari | table | | |
| | | organization directly or in e Code (other than sectio | | | | | | | | Yes | No |
| а Т | ansfer | s from the reporting foun | idation to a noncha | arıtable exempt | organızatıc | n of | | | | | |
| (: | L) Cas | sh | | | | | | | 1a(1) | | No |
| (: | 2) Oth | er assets | | | | | | | 1a(2) | | No |
| | | ansactions | | | | | | | | | |
| • | • | es of assets to a nonchar | | | | | | | 1b(1) | | No |
| | - | chases of assets from a r | | | | | | | 1b(2) | | No |
| - | - | ntal of facilities, equipmer mbursement arrangemen | * | | | | | | 1b(3) 1b(4) | | No No |
| - | - | ns or loan guarantees. | | | | | | | 1b(5) | | No |
| • | - | ormance of services or m | | | | | | | 1b(6) | | No |
| • | - | of facilities, equipment, r | | - | | | | | 1c | | No |
| d If | the ar | swer to any of the above oods, other assets, or ser ansaction or sharing arra | e is "Yes," complete vices given by the | e the following so reporting found | chedule Co ation If th | olumn (b) s e foundatio | should always show the n received less than fa | e fair market ir market valu | | | |
| (a) Li | ne No | (b) Amount involved | (c) Name of nonch | arıtable exempt or | ganization | (d) Des | cription of transfers, trans | actions, and sha | iring arra | ngemen | its |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | - | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| d | escribe | undation directly or indired in section 501(c) of the complete the following s | Code (other than | | | | · - | | ☐Yes | ✓ | No |
| | 103, | (a) Name of organization | | (b) Туре | e of organiza | tion | (c) Des | cription of relati | onship | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | , | | | | | | | | |
| | of | ider penalties of perjury, my knowledge and belief nich preparer has any kno | f, it is true, correct | ive examined thi c, and complete | s return, ır Declaratıo | ncluding acc n of prepare | companying schedules er (other than taxpaye | and statemen -) is based on | nts, and all infor | to the mation | best n of |

| | ibed in section 501(c) of the s," complete the following s | | in 501(c)(3)) or in sect | tion 527? | □ Yes ☑ No |
|--------------|--|--|---------------------------------|-----------|--|
| | (a) Name of organizati | on | (b) Type of organization | on | (c) Description of relationship |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | of my knowledge and belie | f, it is true, correct, and | | | ng schedules and statements, and to the be than taxpayer) is based on all information o |
| | which preparer has any known | owicage | | | |
| Sign Here | ****** | - The state of the | 2018-11-14 | ***** | May the IRS discuss this return with the preparer shown below |

Paid

Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00369624 employed ▶ □ STEVEN A WARNER 2018-11-14 **Preparer** Firm's name ► KSM BUSINESS SERVICES INC Firm's EIN ▶35-2123203 **Use Only** Firm's address ▶ 202 W BERRY STREET SUITE 600 Phone no (260) 496-8297

FORT WAYNE, IN 46802

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AGAPE THERAPEUTIC RIDING N/A PC. GENERAL SUPPORT 47,050 RESOURCES INC 24970 MT PLEASANT RD

| CICERO, IN 46024 | | | | |
|---|-----|----|--|---------|
| ALEXANDRIA COMMUNITY CENTER 315 S HARRISON ST ALEXANDER, IN 46001 | N/A | PC | \$750 FOR KIDS FALL SPORTS, \$250 FOR KIDS SPONSORSHIPS TO THE LEAGUES | 1,000 |
| EAST MAIN ST CHRISTIAN CHURCH 1801 MAIN ST ELWOOD, IN 46036 | N/A | PC | \$15,000 FOR BUILDING FUND, \$1,000 FOR BIBLES FOR SOLDIERS | 16,000 |
| Total | | | . | 201,002 |

За

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | |
|--|---|-------------------------|--|--------|--|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount | |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | | |
| a Paid during the year | | | | | |
| ELWOOD COMMUNITY DEVELOPMENT CORPORATION 108 S ANDERSON ST ELWOOD, IN 460362013 | N/A | PC | TO PROVIDE ENTERTAINMENT FOR THE ANNUAL GLASS FESTIVAL | 1,500 | |
| ELWOOD CONCERTS IN THE PARK 2132 NORTH A ST ELWOOD, IN 46036 | N/A | PC | GENERAL SUPPORT | 2,000 | |
| ELWOOD ELEMENTARY SCHOOL 1803 NORTH J ST | N/A | PC | EARLY EDUCATION MATCHING GRANT FOR FRAN AND ERNIE | 25,000 | |

| ELWOOD CONCERTS IN THE PARK 2132 NORTH A ST ELWOOD, IN 46036 | N/A | PC | GENERAL SUPPORT | 2,000 |
|--|-----|----|---|--------|
| ELWOOD ELEMENTARY SCHOOL 1803 NORTH J ST ELWOOD, IN 46036 | N/A | PC | EARLY EDUCATION MATCHING GRANT FOR FRAN AND ERNIE LEARNING CENTER | 25,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ELWOOD ELEMENTARY SCHOOL N/A PC GENERAL SUPPORT 35,000 1803 NORTH J ST **ELWOOD, IN 46036**

| ELWOOD INTERMEDIATE SCHOOL 1207 N 19TH ST ELWOOD, IN 46036 | N/A | PC | LIBRARY PROJECT | 40,000 |
|--|-----|----|---|--------|
| ELWOOD JRSR HIGH SCHOOL 1137 N 19TH ST ELWOOD, IN 46036 | N/A | PC | \$10,000 FOR NEW UNIFORMS FOR PANTHER BAND | 10,000 |

| | ELWOOD, IN 46036 | | | | |
|---|---|-----|----|---|-------|
| | ELWOOD JRSR HIGH SCHOOL 1137 N 19TH ST ELWOOD, IN 46036 | N/A | PC | \$10,000 FOR NEW UNIFORMS FOR PANTHER BAND | 10,00 |
| П | · | | | | 1 |

Total .

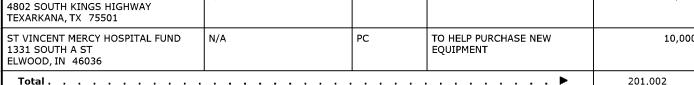
3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year INDIANA FAMILY AND SOCIAL SECURITY | N/A GOV OFFICE OF EARLY CHILDHOOD 4.452 ADMINISTRATION AND OUT OF SCHOOL LEARNING 402 W WASHINGTON ST ROOM W-361 INDIANADOLIS IN 46204

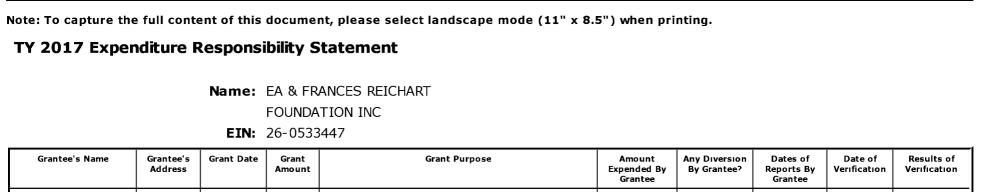
| 11101711711 0213, 111 10201 | | | | |
|--|-----|----|---------------------------|---------|
| OPTIMIST INTERNATIONAL - OPTIMIST CLUB OF ELWOOD IN 1208 MAIN ST ELWOOD, IN 46036 | N/A | NC | FOR FIREWORKS IN THE PARK | 1,000 |
| ORESTES CHRISTIAN CHURCH 17 E OAK ST ORESTES, IN 46036 | N/A | PC | GENERAL SUPPORT | 3,000 |
| Total | | | | 201,002 |

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year RUNNIN WI THERAPEUTIC CENTER N/A PC GENERAL SUPPORT 5,000 N/A PC TO HELP PURCHASE NEW 10,000 **EOUIPMENT**



За



10/26/17

THE PURPOSE OF THE GRANT WAS TO PROMOTE CIVIC PRIDE

PROVIDING FIREWORKS THROUGH THE OPTIMISTS' EVENT

AND LESSEN THE FINANCIAL BURDEN ON LOCAL GOVERNMENT BY

DLN: 93491319047378

2017-10-26

As Filed Data -

2017-05-25

efile GRAPHIC print - DO NOT PROCESS

1208 MAIN

ELWOOD, IN

46036

OPTIMIST INTERNATIONAL -

OPTIMIST CLUB OF ELWOOD

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319047378 | | | | |
|--|--|---------------------|--|--|--|--|
| TV 2017 To 101 101 10 10 10 10 10 10 10 10 10 10 1 | - Dd- G-l | | | | | |
| 14 2017 Investments Corporat | TY 2017 Investments Corporate Bonds Schedule | | | | | |
| | | | | | | |
| Mama. E | A 9. EDANCES DE | TCUADT | | | | |

622,984

83,559

615,774

84,065

name: EA & FRANCES REICHARI

FOUNDATION INC

| | | | • | |
|--|--|--|---|--|
| | | | | |
| | | | _ | |

DODGE & COX INCOME (DODIX)

JP MORGAN INFLATION MANAGED BOND (JRBSX)

| investments Corporate Bonds Schedule | | |
|--|---------------------------|----------------------------------|
| Name of Bond | End of Year Book Value | End of Year Fair Market Value |
| CARILLON REAMS CORE PLUS BOND CL I (SCPZX) | 629,000 | 627,048 |

26-0533447

| enie draphic print - Do Not Process | AS FIIEU Data - | DEN: 93491319047378 |
|-------------------------------------|-----------------|---------------------|
| | | |
| | | |
| | | |

TY 2017 Investments Corporate Stock Schedule

Name: EA & FRANCES REICHART

FOUNDATION INC

| EIN: 26-0533447 | | | | |
|--|---------------------------|----------------------------------|--|--|
| Name of Stock | End of Year Book Value | End of Year Fair Market Value | | |
| AQR MANAGED FUTURES FUND (AQMIX) | 132,014 | 128,827 | | |
| ARTISAN INTERNATIONAL ADV (APDIX) | 292,758 | 327,705 | | |
| FMI LARGE CAP FUND (FMIHX) | 146,850 | 178,398 | | |
| OAKMARK INTERNATIONAL CL (OAKIX) | 63,119 | 100,184 | | |
| LAZARD US EQTY CONCENTRATED PRT (LEVIX) | 167,536 | 177,876 | | |
| NUANCE CONCENTRATED VALUE FUND | 163,202 | 178,269 | | |
| MATTHEW ASIAN GROWTH & INCOME (MICSX) | 144,485 | 155,050 | | |
| TORTOISE MLP & PIPELINE FD INSTL (TORIX) | 78,200 | 77,112 | | |
| SCHWAB FUNDAMENTAL US LARGE CO (SFLNX) | 365,860 | 433,308 | | |
| TWEEDY BROWNE GLOBAL VALUE (TBGVX) | 260,146 | 281,891 | | |
| VANGUARD 500 INDEX ADMIRAL (VFIAX) | 395,360 | 579,262 | | |
| VANGUARD TOTAL STOCK MARKET (VTSAX) | 31,318 | 78,055 | | |
| VICTORY GLOBAL NATURAL RESOURCES | 89,363 | 118,651 | | |
| WILLIAM BLAIR MACRO ALLOCATION (WMCIX) | 122,283 | 126,678 | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DI | N: 93491319047378 | | | |
|--------------------------------------|-----------------|---------|-------------------|--|--|--|
| TY 2017 Other Assets Schedule | | | | | | |
| Name: E | A & FRANCES RE | TICHART | | | | |

FOUNDATION INC.

Description

Other Assets Schedule

DIVIDENDS RECEIVABLE

EIN: 26-0533447

End of Year - Book Value

592

End of Year - Fair

592

Market Value

Book Value

Beginning of Year -

1,402

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLI | N: 93491319047378 | |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|
| TY 2017 Other Expenses Schedule | | | | | |
| | | | | | |
| Name | EA & FRANCES | REICHART | | | |
| | FOUNDATION II | NC | | | |
| EIN | N: 26-0533447 | | | | |
| Other Expenses Schedule | | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |
| ADVISOR FEES | 25,607 | 25,607 | | 0 | |
| BANK FEES | 140 | 140 | | 0 | |
| PENALTIES & INTEREST | 28 | 0 | | 0 | |

| efile GRAPHIC print - DO NOT PROCE | ESS As Filed Data | - | DLI | N: 93491319047378 |
|------------------------------------|-------------------|----------------|--------------|----------------------------|
| TY 2017 Taxes Schedule | | | | |
| | | | | |
| Name: EA & FRANCES REICHART | | | | |
| FOUNDATION INC | | | | |
| EIN: 26-0533447 | | | | |
| Category | Amount | Net Investment | Adjusted Net | Disbursements |
| Jacogo. y | | Income | Income | for Charitable Purposes |
| FEDERAL EXCISE TAX | 629 | 0 | 1 | 0 |
| FOREIGN TAXES | 783 | 783 | | 0 |

| efile GRAPHIC print - DO | NOT PROCESS | As Filed Data - | | | | DLN: 93491319047378 | |
|--|---|--|--|--|--|---|--|
| Schedule B | | Schedu | ule of Contributo | ors | | OMB No 1545-0047 | |
| (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service | ► Information a | bout Schedule B (F | Form 990, 990-EZ, or 990 Form 990, 990-EZ, or 990-P <u>ww <i>ırs gov/form</i>990</u> | | ons is at | 2017 | |
| Name of the organization EA & FRANCES REICHART | | | | | Employer id | lentification number | |
| FOUNDATION INC | | | | | 26-0533447 | | |
| Organization type (check | one) | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or 990-EZ 501(c)() (enter number) organization | | | | | | | |
| 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | | |
| | ☐ 527 politic | cal organization | | | | | |
| Form 990-PF | ☑ 501(c)(3) | exempt private fo | undation | | | | |
| | ☐ 4947(a)(1 | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | |
| 501(c)(3) taxable private foundation | | | | | | | |
| | | | PF that received, during to omplete Parts I and II S | | | | |
| Special Rules | | | | | | | |
| under sections 509 | (a)(1) and 170(b)(one contributor, di | (1)(A)(vı), that che uring the year, tota | g Form 990 or 990-EZ th cked Schedule A (Form al contributions of the gre plete Parts I and II | 990 or 990-EZ), P | art II, line 13, | 16a, or 16b, and that | |
| during the year, tot | al contributions of | more than \$1,000 | or (10) filing Form 990 o exclusively for religious animals Complete Parts | , charitable, scien | | | |
| during the year, co If this box is check purpose Don't con | ntributions <i>exclusi</i> ed, enter here the aplete any of the p | ively for religious, total contributions parts unless the G e | or (10) filing Form 990 of charitable, etc., purposes that were received during eneral Rule applies to the or more during the year | s, but no such con ng the year for an ns organization be | itributions tota exclusively re cause it recei | aled more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i> | |
| Caution. An organization of 990-EZ, or 990-PF), but it Form 990-EZ or on its Fori 990-EZ, or 990-PF) | must answer "No' | on Part IV, line 2 | , of its Form 990, or ched | ck the box on line | H of its | | |
| For Paperwork Reduction Act for Form 990, 990-EZ, or 990-F | | ructions | Cat No 30613X | Schedu | ıle B (Form 990 | , 990-EZ, or 990-PF) (2017) | |

Name of organization Employer identification number EA & FRANCES REICHART 26-0533447 FOUNDATION INC Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 REICHART FAMILY CHARITABLE TRUST Person **Payroll** 3545 W 1100 N \$ 398,759 Noncash ALEXANDRIA, IN46001 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (d) (b) (c) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

| Schedule B (Form | 990, 990-EZ, or 990-PF) (2017) | | Page 4 |
|--|--|--|--|
| Name of organizat EA & FRANCES REIC FOUNDATION INC | | | Employer identification number 26-0533447 |
| than \$1, organiz the year | ,000 for the year from any one contributor | r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$ | d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and | (e) Transfer of gift ZIP 4 F | t Relationship of transferor to transferee |
| (2) | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and | (e) Transfer of gift | t Relationship of transferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and | (e) Transfer of gift | t Relationship of transferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and | (e) Transfer of gift | t Relationship of transferor to transferee |
| | | | Schedule B (Form 990, 990-EZ, or 990-PF) (2017) |