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2017

OMB No 1545-0052

Form 990-PF 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.

Open to Public Inspection

| | | | | | | | <u> </u> |
|-------------------------|----------------|---|-----------------------|-------|--------------------------|---|---|
| For | caler | ndar year 2017, or tax year beginning 01-01-20 |)17 , an | nd en | iding 12-31- | 2017 | |
| | | indation Love Foundation | | | A Employer ıd | entification numbe | • |
| | | GOODMAN | | | 30-0106879 | | |
| Num | ber and | d street (or P O box number if mail is not delivered to street address) etstone Road | Room/suite | | B Telephone nu | mber (see instruction | is) |
| | | | | | (812) 453-7485 | i i | |
| | | i, state or province, country, and ZIP or foreign postal code N 47711 | | | C If exemption | application is pending | g, check here |
| G Ch | neck al | l that apply 🔲 Initial return 🔲 Initial return of a | former public charity | | D 1. Foreign or | ganızatıons, check he | re . \Box |
| | | ☐ Final return ☐ Amended return | | | | ganizations meeting | |
| | | \square Address change \square Name change | | | , | k here and attach cor | |
| | , | pe of organization Section 501(c)(3) exempt private | | | | undation status was t n 507(b)(1)(A), chec | |
| | | | e private foundation | | | | |
| of ' | year <i>(f</i> | xet value of all assets at end from Part II, col (c), \$ 1,304,338 J Accounting method ☐ Other (specify) (Part I, column (d) must | ✓ Cash | al | | ation is in a 60-month n 507(b)(1)(B), checl | |
| Pa | rt I | Analysis of Revenue and Expenses (The total | (a) Revenue and | | | | (d) Disbursements |
| | | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) | expenses per books | (b) | Net investment income | (c) Adjusted net income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | 0 | | | | |
| | 2 | Check ▶ ☐ If the foundation is not required to attach Sch B | | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | |
| | 4 | Dividends and interest from securities | 37,333 | | 37,333 | | |
| | 5a | Gross rents | | | | | |
| a) | b | Net rental income or (loss) | | | | | |
| ž | 6a | Net gain or (loss) from sale of assets not on line 10 | 13,444 | | | | |
| Revenue | Ь _ | Gross sales price for all assets on line 6a 370,439 | | | 12.444 | | |
| ã | 7 | Capital gain net income (from Part IV, line 2) | | | 13,444 | | |
| | 8 9 | Net short-term capital gain | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | |
| | b | Less Cost of goods sold | | | | | |
| | С | Gross profit or (loss) (attach schedule) | | | | | |
| | 11 | Other income (attach schedule) | 1,514 | | | | |
| | 12 | Total. Add lines 1 through 11 | 52,291 | | 50,777 | | |
| | 13 | Compensation of officers, directors, trustees, etc | 32,070 | | 16,035 | | 16,035 |
| | 14 | Other employee salaries and wages | | | | | |
| 6S | 15 | Pension plans, employee benefits | | | | | |
| S | 16a | Legal fees (attach schedule) | 12,570 | | 6,285 | 0 | 6,285 |
| ğ | b | Accounting fees (attach schedule) | 2,163 | | 0 | 0 | 2,163 |
| Administrative Expenses | С | Other professional fees (attach schedule) | 11,837 | | 11,837 | | |
| at E | 17 | Interest | | | | | |
| S | 18 | Taxes (attach schedule) (see instructions) | 1,023 | | 1,023 | | |
| ≣ | 19 | Depreciation (attach schedule) and depletion | | | | | |
| Ē | 20 | Occupancy | | | | | |
| ק ק | 21 | Travel, conferences, and meetings | | | | | |
| ਰ | 22 | Printing and publications | 95.1 63 | | | | |
| Ē | 23 | Other expenses (attach schedule) | 62 | | | | 62 |
| Operating and | 24 | Total operating and administrative expenses. Add lines 13 through 23 | 59,725 | | 35,180 | 0 | 24,545 |
| ă | 25 | Contributions, gifts, grants paid | 72,100 | | 35,180 | <u> </u> | 72,100 |
| | 26 | Total expenses and disbursements. Add lines 24 and | 72,100 | | | | 72,100 |
| _ | | 25 | 131,825 | L | 35,180 | 0 | 96,645 |
| | 27 | Subtract line 26 from line 12 | | | | | |
| | а | Excess of revenue over expenses and disbursements | -79,534 | | | | |
| | ь | Net investment income (if negative, enter -0-) | | | 15,597 | | |
| | С | Adjusted net income(if negative, enter -0-) | | | | | |
| For | Daner | work Reduction Act Notice, see instructions. | | | Cat No. 11289 | / For | m 000-DF (2017 |

| Forn | 1 990- | PF (2017) | | | | | | | | Page 2 |
|---------------|---------------|---|---|------------------------------|-----------------------------|-------------------------|-----------------------------------|-----|--|---------------------------------|
| Pai | rt II | Balance Sheets Sh | tached schedules and ar nould be for end-of-year | nounts in the amounts onl | e descriptio y (See inst | n column tructions) | Beginning of year (a) Book Value | | End o | f year (c) Fair Market Value |
| Ī | 1 | Cash—non-interest-be | | | | | | | | ., |
| | 2 | Savings and temporar | y cash investments | | | | 242,40 | 8 | 114,242 | 114,242 |
| | 3 | Accounts receivable | · | _ | | | | | | |
| | | Less allowance for do | oubtful accounts 🕨 _ | | | | | | | |
| | 4 | Pledges receivable | | | | | | | | |
| | | Less allowance for do | oubtful accounts 🕨 _ | | | | | | | |
| | 5 | Grants receivable | | | | [| | | | |
| | 6 | Receivables due from | officers, directors, tr | ustees, and | dother | | | | | |
| | | disqualified persons (a | attach schedule) (see | instruction | ns) | | | | | |
| | 7 | Other notes and loans | receivable (attach s | hedule) 🕨 | | | | | | |
| | | Less allowance for do | oubtful accounts 🕨 _ | | | | | | | |
| 8 | 8 | Inventories for sale or | use | | | [| | | | |
| Assets | 9 | Prepaid expenses and | deferred charges . | | | [| | | | |
| As | 10a | Investments—U S and | d state government o | bligations | (attach so | chedule) | | | | |
| | b | Investments—corporal | te stock (attach sche | dule) . | | [| 728,01 | 9 | 792,865 | 924,604 |
| | С | Investments—corporal | te bonds (attach sch | edule) . | | | 100,00 | 9 | 100,009 | 101,023 |
| | 11 | Investments—land, bu | uildings, and equipme | nt basis | - | | | + | | |
| | | Less accumulated dep | | | | | | | | |
| | 12 | Investments—mortgag | ge loans | | | | | | | |
| | 13 | Investments—other (a | attach schedule) . | | | | 179,02 | 2 | 160,812 | 164,469 |
| | 14 | Land, buildings, and e | quipment basis | | | - | | +- | | |
| | | Less accumulated der | | | | | | | | |
| | 15 | Other assets (describe | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| | 16 | Total assets (to be co | | | | · | | | | |
| | | instructions Also, see | page 1, item I) | | | | 1,249,45 | 8 | 1,167,928 | 1,304,338 |
| \dashv | 17 | Accounts payable and | accrued expenses . | | | | | + | | |
| | 18 | Grants payable | | | | - ⊢ | | + | | |
| Sa | 19 | Deferred revenue | | | | - ⊦ | | | | |
| Liabilities | 20 | Loans from officers, di | rectors, trustees, an | d other dis | qualified p | persons | | | | 1 |
| ap | 21 | Mortgages and other r | · | | | | | | | |
| 그 | 22 | Other liabilities (descri | | | | I | | | | 1 |
| | 23 | Total liabilities(add | | | | F | | 0 | 0 | 1 |
| \dashv | | · | | | | | | + | | |
| Š | | Foundations that fol | llow SFAS 117, che | ck here | ► <u></u> | | | | | |
| 106 | | and complete lines 2 | _ | iines 30 a | ina 31. | | | | | |
| <u> </u> | 24 | | | | | | | + | | |
| ă | 25 | Temporarily restricted | | | | | | + | | |
| Fund Balances | 26 | Permanently restricted | d | | | | | + | | - |
| 띹 | | Foundations that do | | 17, check | here 🕨 | ✓ | | | | |
| \$ or | | and complete lines 2 | | | | | | | | |
| Assets | 27 | Capital stock, trust pri | | | | | 1,621,59 | 2 | 1,621,592 | |
| AS S | 28 | Paid-in or capital surpl | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| Net / | 29 | Retained earnings, acc | • | • | | - ⊦ | -372,13 | + | -453,664 | - |
| - 1 | 30 | Total net assets or f | • | | • | | 1,249,45 | | 1,167,928 | |
| | 31 | Total liabilities and | net assets/fund ba | lances (se | ee instruct | tions) . | 1,249,45 | 8 | 1,167,928 | |
| | t III | | nges in Net Asset | | | | | | | |
| 1 | | l net assets or fund bala ear figure reported on p | | f year—Par • | • | | 30 (must agree wit | | - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1,249,458 |
| 2 | - | r amount from Part I, li | | | | | | | 2 | -79,534 |
| 3 | | er increases not included | | | | | | - • | 3 | , |
| 4 | | lines 1, 2, and 3 | | | | | | | 4 | 1,169,924 |
| 5 | Decr | reases not included in lii | ne 2 (ıtemıze) 🟲 📖 | | | | <u>\</u> | | 5 | 1,996 |
| , 5 | <u>z Tota</u> | I not accete or fund hale | ances at end of year | (lina 1 min | uic lina 5) | Dart II c | aluma (h) lina 20 | | اءا | 1 167 079 |

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

7b

| 011111 3 3 0 1 1 (2 | | | | | | | | | | | | |
|---------------------|--|--|--|--|--|--|--|--|--|--|--|--|
| Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors | | | | | | | | | | | |

| 1 List all officers, directors, truste | oc f | oundation managers an | d their compensation (| (see instructions) | |
|---|-----------|---|---|---|---------------------------------------|
| List an officers, uncetors, truste | | | | (d) | |
| (a) Name and address | | Title, and average hours per week (b) devoted to position | (c) Compensation (If not paid, enter -0-) | Contributions to employee benefit plans and deferred compensation | Expense account, (e) other allowances |
| CYNTHIA JEAN PEPPER | PRESIDENT | | 10,690 | 0 | С |
| 1700 Conlin Avenue |]1 0 | | | | |
| Evansville, IN 47714 | 1/7/05 | - DDECIDENT/TDEACHDED | 10.000 | | |
| ANN ELIZABETH GOODMAN | 1 0 | PRESIDENT/TREASURER | 10,690 | 0 | [|
| 6700 Whetstone Road Evansville, IN 47711 | | | | | |
| LINDA W LOVE | SECI | RETARY | 10,690 | 0 | C |
| 3400 CONLIN AVENUE | 10 | | 10,000 | · | |
| EVANSVILLE, IN 47714 | | | | | |
| 2 Compensation of five highest-pa | id eı | mployees (other than th | ose included on line 1 | —see instructions). If nor | ie, enter "NONE." |
| (a) Name and address of each employee pa more than \$50,000 | aid | 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 |
| | | | | | |
| | | 1 | | | |
| Total number of other employees paid ov | er \$º | <u> </u> 50.000, | | | |
| 3 Five highest-paid independent co | | | | | F". |
| (a) Name and address of each perso | | | | e of service | (c) Compensation |
| (a) Name and address of each perso | ıı paı | a more than \$50,000 | (5) 1,50 | or service | (c) compensation |
| | | | | | |
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| Total number of others receiving over \$50 | 0,000 | o for professional services. | | | |
| Part IX-A Summary of Direct (| | | | | |
| List the foundation's four largest direct charitable | activ | vities during the tax year Inclu | de relevant statistical informa | ation such as the number of | Evnances |
| organizations and other beneficiaries served, con | feren | ces convened, research papers | produced, etc | | Expenses |
| 1 | | | | | |
| | | | | | |
| | | | | | |
| 2 | | | | | |
| _ | | | | | |
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| 3 | | | | | |
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| 4 | | | | | |
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| Part IX-B Summary of Program | m-P | elated Investments | See instructions) | | |
| Describe the two largest program-related inve | | | · · · · · · · · · · · · · · · · · · · | and 2 | Amount |
| | cscine | ents made by the roundation at | ining the tax year on lines I t | and 2 | Amount |
| 1 | | | | | |
| | | | | | |
| 3 | | | | | |
| | | | | | |
| | | | | | |
| All of | _ | | | | |
| All other program-related investments | See | instructions | | | |
| 3 | | | | | |
| | | | | | |
| | | | | | |
| Total. Add lines 1 through 3 . | • | | | • | |
| | | | | | Form QQ0-DE (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

1a

1b

2

3a 3h

4

5

96,645

96.645

96.489

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156

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

income Enter 1% of Part I. line 27b (see instructions).

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

64,969

64,969

Form **990-PF** (2017)

2017

| | | _ | ٠ | | |
|---|---|---|---|---|---|
| X | Ŧ | Ī | Ī | Γ | ι |

Part

|)-PF (20 | 017) | | |
|----------|----------------------|------|---------------|
| KIII | Undistributed Income | (see | instructions) |

| ple amount for 2017 from Part XI, line 7 |
|---|
| ted income, if any, as of the end of 2017 |
| ount for 2016 only |

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

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

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

6 Enter the net total of each column as

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 required—see instructions).

| 1 | Distributable amount for 2017 from Part XI, lin |
|---|--|
| 2 | Undistributed income, if any, as of the end of 2 |
| а | Enter amount for 2016 only |
| b | Total for prior years 2015 , 2014 , 2013 |
| 3 | Excess distributions carryover, if any, to 2017 |

From 2012.

b From 2013. . . . c From 2014. . .

e From 2016.

d From 2015. . . .

of the end of 2017 2014, 2013 16.719 17,756

17.957

10.125 41,861

17.756 17,957

10.125

41.861

31.676

(a)

Corpus

104.418

31.676

136,094

16.719

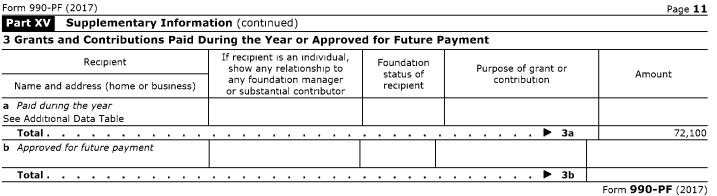
119,375

(b)

Years prior to 2016

(c)

2016



| Form 990-PF (20 | | | | Page 12 |
|--|----------------------------------|---------------------------|--------------------------------------|----------------|
| Part XVI-A | Analysis of Income-Producing | ng Activities | T | |
| Enter n <u>ross amo</u> | unts unless otherwise indicated. | Unrelated business income | Excluded by section 512, 513, or 514 | (e) |
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| orm 990- | PF (2017) | | | | | | Pa | ge 13 |
|------------------|---|----------------------|------------------------------|-------------|--|--------|-----|--------------|
| Part X\ | Information Re Exempt Organi | | fers To and Transact | ions and I | Relationships With Nonchari | table | | |
| | e organization directly or in the Code (other than section | | | | ganization described in section 501 political organizations? | | Yes | No |
| a Transfe | ers from the reporting foun | idation to a noncha | ırıtable exempt organizatio | on of | | | | |
| (1) C | ash | | | | | 1a(1) | | No |
| (2) 0 | ther assets | | | | | 1a(2) | | No |
| b Other | transactions | | | | | | | |
| (1) S | ales of assets to a nonchar | itable exempt orga | nızatıon | | | 1b(1) | | No |
| (2) P | urchases of assets from a r | noncharitable exem | npt organization | | | 1b(2) | | No |
| (3) R | ental of facilities, equipmer | nt, or other assets. | | | | 1b(3) | | No |
| (4) R | eımbursement arrangemen | nts | | | | 1b(4) | | No |
| (5) Lo | oans or loan guarantees. | | | | | 1b(5) | | No |
| (6) Pe | rformance of services or m | embership or fund | raising solicitations | | | 1b(6) | | No |
| c Sharın | g of facilities, equipment, r | nailing lists, other | assets, or paid employees | | | 1c | | No |
| (a) Line No | (b) Amount involved | (), | aritable exempt organization | (=, ==== | cription of transfers, transactions, and sha | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | foundation directly or indire | • | · · | | | | | |
| describ | ped in section 501(c) of the | Code (other than | section 501(c)(3)) or in se | ection 527? | | ∐ Yes | ✓ | No |
| b If "Yes | ," complete the following s | | | | | | | |
| | (a) Name of organization | on | (b) Type of organiza | ation | (c) Description of relati | onship | | |

| of th | e good | er to any of the above ls, other assets, or ser saction or sharing arra | vices given b | y the re | porting 1 | oundation If th | e foundati | ion receive | ed less than fair ma | arket value |
|--------------|---------|---|------------------|-----------|-----------|------------------|---------------|---------------|------------------------|---|
| (a) Line | No | (b) Amount involved | (c) Name of | noncharit | able exer | npt organization | (d) De | escription of | transfers, transaction | ns, and sharing arrangements |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| desc | rıbed ı | dation directly or indir n section 501(c) of the mplete the following s (a) Name of organization | Code (other | , | ction 50 | • | ection 527 | | | ☐ Yes ☑ No |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | of my | | , it is true, co | | | | | | | statements, and to the best based on all information of |
| Sign Here | * | **** | | | | 2018-04-24 | <u> </u> | ***** | | May the IRS discuss this return with the preparer shown below |
| | 9 | ignature of officer or t | rustee | | | Date | , | Title | | (see instr)? Yes No |
| | | Print/Type preparer's | s name | Prepare | er's Sıgn | ature | Date | | Check if self- | PTIN |

Sidney I Dill

Firm's name ► BKD LLP

Firm's address ▶ P O Box 628

Evansville, IN 477040628

Paid **Preparer**

Use Only

P01262937

Phone no (812) 428-6500

Fırm's EIN ▶

employed ▶ □

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 CARING PAWS RESCUE NONE PC CHARITABLE 3,500 1501 VANN AVENUE EVANSVILLE, IN 47714 TRI STATE FOOD BANK NONE PC 6,500 BACKPACK PROGRAM AND KID'S 801 E MICHIGAN STREET CAFE 00 00

| EVANSVILLE, IN 47711 | | | | |
|---|------|----|------------|-------|
| SALVATION ARMY-TOY TOWN 1040 N FULTON AVENUE EVANSVILLE, IN 47710 | NONE | PC | CHARITABLE | 7,500 |
| TRI STATE MULITIPLE SCLEROSIS ASSN 971 KENMORE DRIVE EVANSVILLE, IN 47711 | NONE | PC | CHARITABLE | 7,000 |

PC

CHARITABLE

2,500

72,100

NONE

ALZHEIMER'S ASSOCIATION

101 NW 1ST STREET EVANSVILLE, IN 47708

Total .

3a

| Form 990PF Part XV Line 3 - Grant | ts 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 | | | | |
| EASTER SEALS REHABILITATION CENTER 3701 BELLEMEADE AVENUE EVANSVILLE, IN 47714 | NONE | PC | CHARITABLE | 5,000 |
| SANTA CLOTHES CLUB 1138 WASHINGTON SQUARE EVANSVILLE, IN 47715 | NONE | PC | CHARITABLE | 10,000 |
| ST VINCENT DE PAUL FOOD PANTRY 809 N LAFAYETTE AVENUE EVANSVILLE, IN 47711 | NONE | PC | CHARITABLE | 2,000 |
| EVANSVILLE ARC 615 W VIRGINIA STREET EVANSVILLE, IN 47710 | NONE | PC | CHARITABLE | 2,000 |
| EVANSVILLE CHRISTIAN LIFE CENTER 509 S KENTUCKY AVENUE EVANSVILLE, IN 47714 | NONE | PC | CHARITABLE | 2,500 |
| Total | | | | 72,100 |

| Form 990PF Part XV Line 3 - Grant | ts 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 | | | | |
| MARION EDUCATIONAL OUTREACH 700 HERNDON DRIVE EVANSVILLE, IN 47711 | NONE | PC | CHARITABLE | 2,500 |
| CHEMO BUDDIES 5718 STRINGTOWN ROAD EVANSVILLE, IN 47711 | NONE | PC | CHARITABLE | 2,000 |
| UNITED CARING SHELTER 324 NW 6TH STREET EVANSVILLE, IN 47708 | NONE | PC | CHARITABLE | 2,000 |
| CATHOLIC FOUNDATION OF SOUTHWESTERN INDIANA 4200 N KENTUCKY AVENUE EVANSVILLE, IN 47711 | NONE | PC | CHARITABLE | 2,500 |
| ALBION FELLOWS BACON CENTER PO BOX 3164 EVANSVILLE, IN 47731 | NONE | PC | CHARITABLE | 8,500 |
| Total | | | | 72,100 |

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 ROTARY CLUB OF EVANSVILLE NONE PC **CHARITABLE** 1,600 402 COURT STREET EVANSVILLE, IN 47708 CASA728 COURT STREET NONE PC CHARITABLE 1,500 EVANSVILLE, IN 47708

| EVANSVILLE RESCUE MISSION 500 E WALNUT STREET EVANSVILLE, IN 47713 | NONE | PC | CHARITABLE | 1,500 |
|--|------|----|------------|-------|
| UNITED METHODIST HOME 2521 N BURKHARDT ROAD EVANSVILLE, IN 47715 | NONE | PC | CHARITABLE | 1,500 |

Total . 3a 72,100

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | | DLN: 93491134029838 | | |
|--------------------------------------|---------------|-------------------------|------------------------|---|--|--|
| TY 2017 Accounting Fees Schedule | | | | | | |
| | : Edward W L | ove Foundation | | | | |
| Category Am | nount N | et Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| BKD LLP | 2,030 | | | 2,030 | | |

NH HENDRICKS & ASSOC

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491134029838 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2017 Depreciation Schedule

Name: Edward W Love Foundation EIN: 30-0106879

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491134029838 |
|--------------------------------------|---------------------|---------------------|
| TY 2017 Investments Corpora | te Bonds Schedule | 2 |
| | | |
| Name: | Edward W Love Found | dation |
| EIN: | 30-0106879 | |

| Investments Corporate Bonds Schedule | | | | | |
|--------------------------------------|--|---------------------------|----------------------------------|--|--|
| Name of Bond | | End of Year Book Value | End of Year Fair Market Value | | |
| GOLDMAN SACHS | | 100,009 | 101,023 | | |

| Y | 2017 | Investments | Corporate Stock Schedule | |
|---|------|-------------|---------------------------------|--|

Name: Edward W Love Foundation

ETAL. 20 0100070

| EIN: 50-01006/9 | |
|-----------------|----|
| Name of Stock | Eı |

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662,908

129,957

Value

End of Year Fair

DLN: 93491134029838

SEE ATTACHED ACCOUNT 3075-6184

SEE ATTACHED ACCOUNT 1867-5261

End of Year Book

Market Value

793,937

130,667

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491134029838 |
|--------------------------------------|-----------------|---------------------|
| TY 2017 Investments - Other S | Schedule | |
| | | |

Name: Edward W Love Foundation

EIN: 30-0106879

| Investments Other Schedule 2 | | | |
|------------------------------|-----------------------|------------|----------------------------------|
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
| LOCORR MANAGED FUTURES | AT COST | 30,736 | 29,238 |
| BLACKROCK BUILD AMERICA | AT COST | 25,009 | 28,987 |
| FIRST TRUST ELECTION 16 | AT COST | 25,487 | 29,026 |
| LORD ABBETT SHORT DURATION | AT COST | 79,580 | 77,218 |

| efile GRAPHIC print - DO NOT PROCESS | S As Filed Data - | -] | DLI | N: 93491134029838 | | |
|--------------------------------------|----------------------------------|--------------------------|------------------------|---|--|--|
| TY 2017 Legal Fees Schedul | ΓΥ 2017 Legal Fees Schedule | | | | | |
| _ | | | | | | |
| | ne: Edward W Lo N: 30-0106879 | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |

6,285

6,285

12,570

KAHN, DEES, DONOVAN & KAHN

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 9349113402 | 9838 |
|--------------------------------------|-----------------|--------------|-----------------|------|
| TY 2017 Other Decreases Sch | edule | | | |
| Name | | Farmdahaa | | |
| Name: | Edward W Love | e Foundation | | |
| EIN: | 30-0106879 | | | |
| De | escription | | Amount | |
| COST BASIS ADJUSTMENT | | | 1 | ,996 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: | : 93491134029838 | |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|
| TY 2017 Other Expenses Schedule | | | | | |
| | | | | ! | |
| Name: Edward W Love Foundation | | | | | |
| EIN: 30-0106879 | | | | | |
| Other Expenses Schedule | | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |

| Expenses per Inc | | |
|------------------|-------------|------------|
| | Description | Net In |

POSTAGE

SUPPLIES

DLN: 93491134029838

Name: Edward W Love Foundation

EIN: 30-0106879

2016 990-PF TAX REFUND

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| Other Income Schedule | | | |
|-----------------------|-----------------------------------|--------------------------|---------------------|
| Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income |
| | | | |

1.514

| efile GRAPHIC print - DO NOT PROCES | SS As Filed Data | - | DLN | N: 93491134029838 |
|--|------------------|-----------------------|------------------------|---------------------------------|
| TY 2017 Other Professional Fees Schedule | | | | |
| | | | | |
| Name: Edward W Love Foundation | | | | |
| EIN: 30-0106879 | | | | |
| Catagony | Amazunt | Not Investment | Adiusted Not | Dishuwaamanta |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable |
| | | | 211001112 | Purposes |

11,837

11,837

HILLIARD LYONS ADVISORY FEE

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DL | N: 93491134029838 |
|--------------------------------------|---------------|--------------------------|------------------------|---|
| TY 2017 Taxes Schedule | | | | |
| | | | | |
| Name: | Edward W Lo | ove Foundation | | |
| EIN: | 30-0106879 | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| FOREIGN TAX PD-HILLIARD LYONS | 1,023 | 1,023 | | |