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DLN: 93491131000348

2017

OMB No 1545-0052

## **Return of Private Foundation**

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.

▶ 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 A Employer identification number WILLIAM C MEIER FOUNDATION IMA 34-1942691 Number and street (or P O box number if mail is not delivered to street address) 4949 DEER RIDGE DRIVE NORTH B Telephone number (see instructions) (317) 581-0301 City or town, state or province, country, and ZIP or foreign postal code CARMEL, IN  $\,$  460338905  ${f C}$  If exemption application is pending, check here ☐ Initial return G Check all that apply ☐ Initial return of a former public charity D 1. Foreign organizations, check here Amended return ☐ Final return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change ☐ Name change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here  $\square$  Section 4947(a)(1) nonexempt charitable trust  $\square$  Other taxable private foundation I Fair market value of all assets at end **J** Accounting method ☐ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here ☐ Other (specify) line 16) \$ 1,909,495 (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The total (d) Disbursements for charitable Revenue and (b) Net investment Adjusted net (c) of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) equal the amounts in column (a) (see instructions) ) Contributions, gifts, grants, etc , received (attach schedule) Check ► ✓ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 34,591 34,591 Gross rents 5a b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 74.860 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 . . 109,451 109,451 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . Accounting fees (attach schedule) Other professional fees (attach schedule) رچه 11,413 11.413 0 0 [چە 2,107 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings . 0 22 Printing and publications . . . 23 Other expenses (attach schedule) 13.437 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . 26,957 11,413 135,340 135,340 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 162,297 11,413 0 135,340 27 Subtract line 26 from line 12 Excess of revenue over expenses and -52,846 disbursements 98 038 Net investment income (if negative, enter -0-) Adjusted net income(If negative, enter -0-) For Paperwork Reduction Act Notice, see instructions. Form **990-PF** (2017) Cat No 11289X

	3	Accounts receivable ▶			
- 1		Accounts receivable			
		Less allowance for doubtful accounts ▶		o	0
	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 ▶			
ا ي	8	Inventories for sale or use			
4ssets	9	Prepaid expenses and deferred charges			
¥  :	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)	232,176	189,030	189,091
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			

1,215,292

1,215,292

1,215,292

1,215,292

1

2

3

4

5

6

1,268,133

1,215,292

1,215,292 Form **990-PF** (2017)

-52,846

1,253,480

14,653

1,268,133

1,268,133

1,624,682

1,909,495

с	Investments—corporate bonds (attach schedule)	232,176	
11	Investments—land, buildings, and equipment basis ▶		
	Less accumulated depreciation (attach schedule) ▶		
12	Investments—mortgage loans		
13	Investments—other (attach schedule)	947,541	<b>%</b>
14	Land, buildings, and equipment basis ▶		
	Less accumulated depreciation (attach schedule) ▶		
15	Other assets (describe ▶)		
16	Total assets (to be completed by all filers—see the		
	ınstructions Also, see page 1, item I)	1,268,133	
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)		

Liabilities

Net Assets or Fund Balances

22

23

24

25

26

27

28 29

30

31 Part III

2

Other liabilities (describe >\_

Unrestricted

Temporarily restricted

Permanently restricted

Total liabilities(add lines 17 through 22)

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . . . . . . . . . . . . Decreases not included in line 2 (itemize) ▶

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 ▶

Capital stock, trust principal, or current funds . . . .

Total net assets or fund balances (see instructions) .

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

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** 

Page **3** 

Capital Gallis	(a)	ment Income	(b)		(c)	(d)
	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation		ite acquired o , day, yr )	Date sold (mo , day, yr )
1aSee Addıtıonal Data Tabl	e					
b						
С						
d						
e						
<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis pense of sale		Gain d	h) or (loss) f) minus (g)
a See Additional Data Tabl	e					
b						
С						
d						
e						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69			(I)
	(j)		(k)	$\dashv$		(h) gain minus
(i) F M V as of 12/31/69	Adjusted basis as of 12/31/69		of col (I) I (J), If any	со		less than -0-) <b>or</b> om col (h))
a See Additional Data Tabl	e					
b						
С						
d						
e						
2 Capital gain net income		If gain, also enter in F If (loss), enter -0- in		2		74,860
3 Net short-term capital of	gain or (loss) as defined in sections 1	1222(5) and (6)				
If gain, also enter in Pa in Part I, line 8	rt I, line 8, column (c) (see instruction	ons) If (loss), enter -0	)- 	3		
Part V Qualification l	Indox Section 4040(a) for Bo	duced Tay on Not	Tnyoctmont I	ncomo		
	Jnder Section 4940(e) for Re				<del>-</del>	
(For optional use by domestic p	rivate foundations subject to the sec	tion 4940(a) tax on ne	et investment inco	ome )		
If section 4940(d)(2) applies, le	eave this part blank					
Was the foundation liable for th	e section 4942 tax on the distributab	ole amount of any year	r in the base perio	d?	□ Y	es 🗹 No
If "Yes," the foundation does no	ot qualify under section 4940(e) Do	not complete this part	·			
1 Enter the appropriate an	nount in each column for each year,	see instructions before	e making any entr	ies		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitat	ole-use assets	(col	(d) Distribution rat (b) divided by o	
2016	153,666		1,751,344	•		0 087742
2015	127,909		1,871,568			0 068343
2014	142,564		1,906,225			0 074789
2013	88,222		1,853,163			0 047606
2012	158,850		1,724,410			0 092118
2 Total of line 1, column (	d)		2			0 370598
number of years the four	o for the 5-year base period—divide to addition has been in existence if less to appropriate the 2017 from	than 5 years 🔒	í í <u>  3</u>			0 07412
	ncharitable-use assets for 2017 from	•	4	_		1,785,171
5 Multiply line 4 by line 3	ent income (1% of Part I, line 27b)		5	_		132,317
	,		6	_		980
	one from Part VII line 4		· · · · · · · · · · · · · · · · · · ·	_		133,297
	ons from Part XII, line 4    ,		<u>8</u>		% tax rate Sc	135,340
instructions	att. than mie 7, theth the box in Fe	, inic 15, and con	p.ccc that part u.	g u I	tax rate De	are rait vi

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

7b

01111 220 11 (2	,
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, truste	es, f	oundation managers an	d their compensation		T
(a) Name and address		Title, and average hours per week ( <b>b)</b> devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DAVID K MEIER	PRE	S/TREASURER	0	compensation	
4949 DEER RIDGE DRIVE NORTH CARMEL, IN 46033	4				
JENNIFER S MEIER	SEC	RETARY	0		
5300 BIRKDALE ST	4				
CANTON, OH 44708	<u> </u>				
2 Compensation of five highest-pa	aid e	mployees (other than th	ose included on line 1		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					
		1			
		†			
		1			
		1			
Total number of other employees paid or	or t				0
3 Five highest-paid independent of		<u> </u>			
(a) Name and address of each person		•	· · · · · · · · · · · · · · · · · · ·	e of service	(c) Compensation
NONE	лі ра	id more than \$50,000	(6) 1996	e or service	(c) compensation
NONE			-		
			-		
			-		
			-		
			-		
T-1-1	0.00	0 fan marfaranan l armwara			
Total number of others receiving over \$5  Part IX-A Summary of Direct				<u> </u>	·
List the foundation's four largest direct charitable				ation and as the number of	
organizations and other beneficiaries served, co				lation such as the number of	Expenses
1			· · · · · · · · · · · · · · · · · · ·		
2					
3					
4					
Part IX-B Summary of Progra	m-R	elated Investments	(see instructions)		
Describe the two largest program-related inv			•	and 2	Amount
1		the made by the roundation as	aring the tax year on mics 1	and E	, another
•					
2					
-					
All other program-related investments	See	Instructions			
3		·			
-					
Total. Add lines 1 through 3 .					
<del>-</del>					Form <b>QQN-DF</b> (2017)

1a

1b

2

3a 3b

4

5

135,340

135.340

134.360

Form 990-PF (2017)

980

Part XII

1

2

3

4

5

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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. . . . . . . . . .

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

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

88,279

Form 990-PF (2017)

0

(d)

2017

_	_	_	_	_	_	_	_	_	_	٠	_	_	_	_
			ŀ	1	1	7	X	1	ī	ī		Ι		ī

**b** Total for prior years

From 2012. . . . .

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

e From 2016. . . . .

d From 2015. . . .

0-PF (20	017)			
XIII	Undistributed Income	(see	instructions)	

Distributable amount for 2017 from Part XI, line 7

73.465

49 123

35.740 67,858

49,123

35.740

67.858

47.061

2 Undistributed income, if any, as of the end of 2017 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

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. .

**b** Excess from 2014. .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

(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

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  (a)

Corpus

226.186

47.061

273,247

73.465

199,782

0

(b)

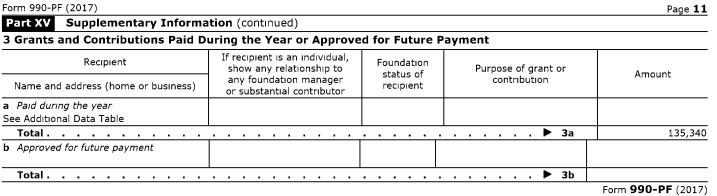
Years prior to 2016

(c)

2016

factors

NO GRANTS TO INDIVIDUALS OR FOR DEBT RETIREMENT NO GRANTS FOR GENERAL



ter gross	amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions
	and contracts from government agencies					
_	rship dues and assessments					
Intere	st on savings and temporary cash					
	ments					
	ds and interest from securities			14	34,591	
	tal income or (loss) from real estate financed property.					
	ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income.					
	r (loss) from sales of assets other than					
ınvent	ory			18	74,860	
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
Other r	evenue <b>a</b>					
	al Add columns (b), (d), and (e).				109,451	
Total.	Add line 12, columns (b), (d), and (e)			1;	3	
	Add life 12, coldiffis (b), (d), and (e).					
	orksheet in line 13 instructions to verify calcul	ations )				
	orksheet in line 13 instructions to verify calculate  Relationship of Activities to the	ations ) e Accomplish	ment of Exem	pt Purposes		,
art XVI	orksheet in line 13 instructions to verify calcul	ations ) e Accomplish income is report	ment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	ted importantly to	,
art XVI ne No.	Prksheet in line 13 instructions to verify calculated Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplish income is report	ment of Exem	<b>pt Purposes</b> f Part XVI-A contribu	ted importantly to	,
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orm 99	90-PF (2017)							Pa	age <b>1</b> :
Part	XVII Information Re Exempt Organi		ers To a	ind Transact	ions and I	Relationships With Nonchai	itable		
	the organization directly or in of the Code (other than section					ganization described in section 50: political organizations?	ı	Yes	No
<b>a</b> Trai	nsfers from the reporting foun	dation to a nonchari	table exe	empt organizatio	on of				
(1)	Cash						1a(1)	_	No
٠,	Other assets						1a(2)		No
	er transactions Sales of assets to a nonchar	ıtable exempt organ	ızatıon.				1b(1)		No
	Purchases of assets from a r	·	-				1b(2)	_	No
	Rental of facilities, equipmen	•					1b(3)	_	No
	Reimbursement arrangement Loans or loan guarantees.						1b(4) 1b(5)	_	No No
٠.	Performance of services or m						1b(5)	_	No
٠, ,	ring of facilities, equipment, r	<u>'</u>	-				1c		No
of t ın a	he goods, other assets, or ser ny transaction or sharing arra	vices given by the reingement, show in co	eporting f olumn <b>(d</b>	foundation If th	ne foundation he goods, ot	should always show the fair market in received less than fair market va- ther assets, or services received	lue	ngomo	nte
(a) Line	(b) Amount involved	(c) Name of nonchar	itable exer	npt organization	(a) Desc	cription of transfers, transactions, and sl	naring arra	ingemei	nts
					-				
		L							
des	he foundation directly or indirective or indirective of the cribed in section 501(c) of the fees," complete the following s  (a) Name of organization	Code (other than se	ection 50		ection 527? .	· -	☐ Yes	✓	No
		, it is true, correct, a				companying schedules and stateme er (other than taxpayer) is based o			
Sign Here	*****			2018-04-16	*	retu	the IRS d rn the prepa		

Title Signature of officer or trustee Date

Paid

(see instr )? 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature PTIN Date Check if self-P00227658 employed ▶ □ MICHAEL A BOKESCH 2018-04-16 **Preparer** Firm's name ▶ PNC BANK NA Firm's EIN ▶22-1146430 **Use Only** Firm's address ► 116 ALLEGHENY CENTER MALL Phone no (412) 762-9161 PITTSBURGH, PA 15212

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d						
	kınd(s) of property sold (e g , real e use, or common stock, 200 shs ML0	<b>(b)</b> How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
25000 GENERAL ELEC CAP CO	ORP SR UNSEC SER MTN		2010-05-28	2017-02-15		
197 359 HARBOR FD CAP APP	RECIATION FD			2010-05-28	2017-03-06	
195 ISHARES TR MSCI EAFE	IDX			2010-05-28	2017-03-06	
997 742 LITMAN GREGORY MA	997 742 LITMAN GREGORY MASTERS INTERNATIONAL FUND CLASS IS				2017-03-06	
391 393 MFS VALUE FUND CL	ASS I FUND 893			2010-05-28	2017-03-06	
835 966 DREYFUS/STANDISH	GLOBAL FIXED INCOME FUND			2015-12-17	2017-08-15	
25000 VERIZON COMMUNICA	ATIONS UNSC			2014-12-16	2017-11-30	
25000 BANK OF AMERICA CO	PRP SR UNSEC			2014-05-16	2017-12-01	
234 PIMCO 0-5 YEAR HIGH Y	IELD CORPORATE BOND FUND			2014-04-17	2017-12-01	
CAPITAL GAIN DIVIDENDS			Р			
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns e - h		
(e) Gross sales price	(e) Gross sales price Depreciation allowed (f) (or allowable) Cost or other basis (g) plus expense of sale					
25,000			25,000			
12,183			6,211	5,972		
11,832			9,551		2,281	
15,465			11,803		3,662	
15,006			7,922		7,084	
17,948			17,781		167	
26,541			25,000	1,541		
25,000			25,000			
23,511			24,988		-1,477	
					55,630	
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	nsi-l		
Complete only for assets show	ring gain in column (h) and owned b	y the foundation	on 12/31/69		(h) gain minus t less than -0-) <b>or</b>	
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69		ss of col (ı) ol (ʒ), ıf any		rom col (h))	
					5,972	
					2,281	
					3,662	
					7,084	
					167	
					1,541	
					-1,477	

orm 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							
ST ELIZABETH SETON CHURCH 5890 BUCKWHEAT RD MILFORD, OH 45150	NONE	PC	GENERAL SUPPORT	12,500			
MERCY MEDICAL CENTER 1320 MERCY DR NW CANTON, OH 44708	NONE	PC	GENERAL SUPPORT	10,000			
ST JOAN OF ARC CHURCH 6414 MONTOUR STREET SOUTH PARK TOWNSHIP, PA 15129	NONE	PC	GENERAL SUPPORT	500			
MOUNTAIN MONTESSORI PRESCHOOL PO BOX 498 WHITESBURG, KY 41858	NONE	PC	GENERAL SUPPORT	10,000			
TOUGALOO COLLEGE 500 WEST COUNTY LINE ROAD	NONE	PC	GENERAL SUPPORT	20,000			

TOUGALOO, MA 46062

Total . . . 3a

Form 990PF Part XV Line 3 - Gran	1	†	1	
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	Contribution	
a Paid during the year				
THE KIM YIRGA SCHOLARSHIP FUND 6116 WILSON MILLS ROAD MAYFIELD, OH 44143	NONE	PC	GENERAL SUPPORT	7,500
CENTRAL CATHOLIC HIGH SCHOOL 15300 GRAY ROAD NOBLESVILLE, IN 46062	NONE	PC	GENERAL SUPPORT	2,700
SUSAN G KOMEN FOUNDATION 100 E WAYNE STREET SOUTH BEND, IN 46601	NONE	PC	GENERAL SUPPORT	500
VISUALLY IMPAIRED PRESCHOOL SERVICES1906 GOLDSMITH LANE LOUISVILLE, KY 40218	NONE	PC	GENERAL SUPPORT	100
PACEM IN TERRIS 26399 MINNESOTA HIGHWAY 47 NW ISANTI, MN 55040	NONE	PC	GENERAL SUPPORT	3,000

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 ST FRANCIS OF ASSISI SCHOOL NONE PC GENERAL SUPPORT 5,800 6850 MAYFIFLD ROAD GATES MILLS, OH 44040 MERCY DEVELOPMENT FOUNDATION NONE PC **GENERAL SUPPORT** 20,000

4365 FULTON DRIVE NW CANTON, OH 44718				
ST ELIZABETH ANN SETON CHURCH 330 3RD AVENUE CARNEGIE, PA 15106	NONE	PC	GENERAL SUPPORT	100
CAROLINE SYMMES ENDOWMENT 12441 CREEKWOOD LANE CARMEL, IN 46032	NONE	PC	GENERAL SUPPORT	10,000
BENEDICTINE SISTERS OF ERIE 6101 EAST LAKE ROAD	NONE	PC	GENERAL SUPPORT	7,500

ERIE, PA 16511 Total .

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, 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 ST DOMINIC CHURCH NONE PC GENERAL SUPPORT 5,000 3450 NORWOOD ROAD SHAKER HEIGHTS, OH 44122 WESTSIDE CHRISTIAN ACADEMY NONE PC BUILDING FUND, TUITION 6,700 23096 CENTER RIDGE ROAD WESTLAKE, OH 44145 NONE PC GENERAL SUPPORT 7,500 THE GATHERING PLACE 23300 COMMERCE PARK BEACHWOOD, OH 44122 COLLEGE NOW GREATER CLEVELAND NONE PC GENERAL SUPPORT 5,000 50 PUBLIC SOUARE STE 1800 CLEVELAND, OH 44113

PC

CASSIUS RUDOLPF

SCHOLARSHIP

250

135,340

RESILLIENC PARTNERS NED

PO BOX 21217

3a

Total . . . .

NONE

Recipient If recipient is an individual, show any relationship to any foundation manager

Name and address (home or business)

Recipient If recipient is an individual, show any relationship to any foundation manager

Recipient If recipient is an individual, show any relationship to any foundation manager

Recipient If recipient is an individual, show any relationship to any foundation manager

Recipient If recipient is an individual, show any relationship to any foundation manager

Recipient If recipient is an individual, show any relationship to any foundation manager

a Paid during the year				
DRESS OF SUCCESS 32 EAST 31ST STREET NEW YORK, NY 10016	NONE	PC	GENERAL SUPPORT	

690

135,340

or substantial contributor

Total .

3а

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491131000348						
TY 2017 Investments - Other Schedule								
Name: \	WILLIAM C MEIER	R FOUNDATION IMA						

1,363,655

666,811

0-1 (71		1:-1-1-1-01		- 1 634		
Investments Other Schedule 2						
EIN:	34-1942691					

MUTUAL FUNDS - EQUITY

Investments Other Schedule 2						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
MUTUAL FUNDS - FIXED	AT COST	263,729	261,027			

AT COST

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491131000348		
TY 2017 Other Expenses Schedule						
Name: WILLIAM C MEIER FOUNDATION IMA						
EIN:	: 34-1942691					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

MISCELLANEOUS FEES OR EXPENSES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491131000348			
TY 2017 Other Increases Schedule						
Name:	WILLIAM C ME	IER FOUNDATION IMA				
EIN:	34-1942691					
Description Amount						

ROUNDING ADJ FOR SALES AND TRANSACTIONS

Category Amount Net Investment Adjusted Net Disbursements Income Income for Charitable							
Name: WILLIAM C MEIER FOUNDATION IMA EIN: 34-1942691							
TY 2017 Other Professional Fees Schedule							
efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLI	N: 93491131000348			

11,413

Purposes

PNC AGENT FOR TRUSTEE FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491131000348			
TY 2017 Taxes Schedule							
Name	: WILLIAM C	MEIER FOUNDATIO	ON IMA				
<b>EIN:</b> 34-1942691							
Category	Amount	Net Investment	Adjusted Net	Disbursements			
cutego.y	Amount	Income	Income	for Charitable Purposes			
FEDERAL TAX PAYMENT - PRIOR YE	347	0		0			
FEDERAL ESTIMATES - PRINCIPAL	1,760	0		0			