# Form **990-PF**

Department of the Treasury Internal Revenue Service

# Return of Private Foundation of Section 4947(a)(1) Trust Treated as Private Foundation

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OMB No 1545-0052

2017

Open to Public Inspection

For cal	endar year 2017 or tax year beginning		, 2017	, and ending		, , , , , , , , , , , , , , , , , , , ,	
FLOR	A RICHARDSON FOUNDATION,				A	Employer identification nui 35-1076722	
	BOX 888 TERTON, IN 46304				В	Telephone number (see inst	tructions)
					С	If exemption application is	pending, check here 🕨 🗌
G Che	eck all that apply: Initial return Final return	<b>—</b>	return of a fori ided return	mer public charity	D	1 Foreign organizations, chec	<b>.</b>
H Che	Address changeck type of organization.		change exempt private	foundation 101	1	2 Foreign organizations meet here and attach computation	ting the 85% test, check
	Section 4947(a)(1) nonexempt chari		Other taxable	private foundation	E	If private foundation status under section 507(b)(1)(A)	
	m Part II, column (c), line 16)	Other (sp	ecify)		F	If the foundation is in a 60	
	2,622,818. (		(d) must be or		<u> </u>	under section 507(b)(1)(B)	<del>                                     </del>
raiti	Expenses (The total of amounts in columns (b), (c), and (d) may not n sarily equal the amounts in column (see instructions).)	eces- expen	levenue and ses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
, —	1 Contributions, gifts, grants, etc., received (attach sched	ule) .	320,000.			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
٣,	2 Check ► ☐ If the foundation is not required to atta	nch Sch B	1/2/2018	/c		Tape 1	
2	3 Interest on savings and temporary cash investments	.					1、 第2 特点发现了可能
	4 Dividends and interest from securities	·	30,493.	30,49	13	30,493.	- 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	5 a Gross rents .	<del></del>	5,000.	5,00		5,000.	
	b Net rental income or (loss) -12, 4	194.	27,5	- 11 1 m m		J. 18. 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	
R	6 a Net gain or (loss) from sale of assets not on line 10		36,114.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		19: 13 M. T.	, , ,
E V	b Gross sales price for all assets on line 6a 386, 6	586. ∫∵ <sup>‱</sup> ु		3		The street of th	
E	7 Capital gain net income (from Part IV, line	2) <u>18</u>		36,11	4.		
N U	8 Net short-term capital gain. 9 Income modifications	1 1 7 7 7	· · · · · · · · · · · · · · · · · · ·			12,260.	, , , , , , , , , , , , , , , , , , , ,
Ĕ	10 a Gross sales less	-	- 1 1 2 - 2		<del>, .</del>	3 7 6 6 6	+ + + + + + + + + + + + + + + + + + +
	allowances.	7,45	1 2 2 4 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			is the first of the second	
	<b>b</b> Less Cost of goods sold .			A Part of the Control			, ,
	C Gross profit or (loss) (attach schedule)			18 12 12 to 19 10 10 10 10 10 10 10 10 10 10 10 10 10			
	11 Other income (attach schedule)						
	12 Total. Add lines 1 through 11 .		391,607.	71,60	17.	47,753.	Contract the gray
	13 Compensation of officers, directors, trustees	s, etc	0.				<u> </u>
	14 Other employee salaries and wages						
	15 Pension plans, employee benefits.  16 a Legal fees (attachischeduje)	;					
A D	h Accounting fees (attach see) VSEE S	т 1 <del> </del>	1,025.	ļ		<del> </del>	1 025
M	C Other processional fees (attach sch)	101	1,025.		_		1,025.
OI	ممين افزا بيسم			-		<del></del>	
9 E 7	18 Taxes (attach schedule) see instrs) SEE ST	MY \$	27.				27.
, R R	19 Depreciation (attach	[ <b>Æ</b> ]					r st. Tallow is head
	schedule) and demetion	\+. P	2,479.	2,47	9.	ļ ————————————————————————————————————	
N Ý Z G E	20 Occupancy 21 Travel, conferences, and meetings	=	<del></del>				<del></del>
) A E	22 Printing and publications .	· · ·		<del></del> -	_	<del> </del>	
AEX	23 Other expenses (attach schedule)					<u> </u>	
E N	SEE STATEMEN	T 4	46,358.	15,01	5.		46,358.
E N S E S	24 Total operating and administrative		40 000	17 40			47 410
Š	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART	xv	49,889. 52,500.	17,49	4.	<del> </del>	47,410. 52,500.
	26 Total expenses and disbursements	· · ·	JZ, 500.	<del> </del>		<u>'</u>	52,500.
	Add lines 24 and 25		102,389.	17,49	4.	0.	99,910.
	27 Subtract line 26 from line 12:		- 3		-		
	a Excess of revenue over expenses and disbursements		289,218.				~ - = , - <sup>1</sup> ~ - 1
	b Net investment income (if negative, enter	0.)	202,210.	54,11	3		
	and the state of t	, ´ <del> </del>	-	- · J=/11	<u> </u>	47 752	1

Page 2

Pär	t II.	Balance Sheets  Attached Scriedules and aniodris in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		n year
		(See Instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	49,810.	40,051.	40,051.
	2	Savings and temporary cash investments			
	3	Accounts receivable . •		¥	
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable.			4 4 7 4
		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 sch).	\$ 1 m		· · · · · · · · · · · · · · · · · · ·
Ä		Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use		·	
A S E T	9	Prepaid expenses and deferred charges			
Ś	10.	a Investments – U.S. and state government			
	'	obligations (attach schedule)			
		<b>b</b> Investments — corporate stock (attach schedule)			
		c Investments — corporate bonds (attach schedule)			
	11	Investments - land, buildings, and	8 / 11 75 × 5 5 5 4 4 9 1 1 1 1	いったができていた。	
		equipment basis		ستنده درشششششاد سدت	
		Less accumulated depreciation (attach schedule)			600.050
	12				609,850.
	12	Investments – other (attach schedule) STATEMENT 5	014 540	1 017 071	1 262 067
	13	,	914,548.	1,217,071.	1,363,067.
	14		.7	-11-10- 1 July 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Less: accumulated depreciation (attach schedule) SEE STMT 6 ► 2,479.	609,850.	607,371.	609,850.
	15	Other assets (describe ► )	337,333.	00.70.21	303,000.
	16				
			1,574,208.	1,864,493.	2,622,818.
ŀ	17	Accounts payable and accrued expenses			
À	18	Grants payable			
В	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			[1] · 中国[1] [1]
I T	21	Mortgages and other notes payable (attach schedule)			
Ī	22	Other liabilities (describe SEE STATEMENT 7 )		500.	其為。 (1) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
E S	23	Total liabilities (add lines 17 through 22)	0.	500.	
<u> </u>		Foundations that follow SFAS 117, check here			1 141 - 7 - 314
		and complete lines 24 through 26, and lines 30 and 31.			
NF	24	Unrestricted .	964,359.	1,256,623.	4 - 1 12 42 12 14
ΕU	25	Temporarily restricted	301,0031	2/200/0201	14.3
D	26	Permanently restricted .	609,849.	607,370.	
A		Foundations that do not follow SFAS 117, check here	003/013.	00.70701	
SA		and complete lines 27 through 31.			
A B S A L T A	27	Capital stock, trust principal, or current funds			A 19 19 19 19 19 19 19 19 19 19 19 19 19
SN	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
С	29	Retained earnings, accumulated income, endowment, or other funds			
O E R S	30	Total net assets or fund balances (see instructions)	1,574,208.	1,863,993.	
	31	Total liabilities and net assets/fund balances			
		(see instructions)	1,574,208.	1,864,493.	
Parl	: III	Analysis of Changes in Net Assets or Fund Balanc	es		
1	Tota	I net assets or fund balances at beginning of year — Part II, colu	ımn (a), line 30 (must a		1 574 000
		of-year figure reported on prior year's return)	•	. 1	1,574,208.
		r amount from Part I, line 27a		2	289,218.
		Increases not included in line 2 (itemize)  SEE STATEMENT	<u></u>	3	567.
		lines 1, 2, and 3		4	1,863,993.
		ases not included in line 2 (itemize)	Port II solumn (h)	5	1 003 003
6	rota	I net assets or fund balances at end of year (line 4 minus line 5)	— Fart II, Column (b), I	line 30 <b>6</b>	1,863,993.

(a) List and describ	the kind(s) of property sold (for example the kind(s) of property sold (for example thouse; or common stock, 200 shares	le, real estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo., day, yr)
1a SEE STATEMENT 9	<del></del>		B Buildion		<u> </u>
b					
С					
d					
e			<u> </u>		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba		(h) Gain or ((e) plus (f) m	
<u>a</u> b					
С					
d					
е					
Complete only for assets sh	owing gain in column (h) and owned b	y the foundation on 12/31		(I) Gains (Col.	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col (j), if any		ain minus col (k), b an -0-) or Losses (fi	
a					<u>-</u>
b					<u> </u>
С					_
d					
е					
2 Capital gain net income or (	net capital loss) — If gain, also If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	2		36,114.
, ,	or (loss) as defined in sections 1222(5)				
ın Part I, Iıne 8 .	line 8, column (c) See instructions If		- <u>3</u>		12,260.
(	ler Section 4940(e) for Reduce				
(For optional use by domestic private	e foundations subject to the section 4940	(a) tax on net investment inc	come.)		
If section 4940(d)(2) applies, leave	e this part blank N/A				
Was the foundation liable for the	section 4942 tax on the distributable a	mount of any year in the h	assa pariad?	Πvas	
	alify under section 4940(e). Do not co		ase periou.	∐Yes	∐ No
	in each column for each year, see the ins		, entries		
	th	(c)	rentiles	(4)	_
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as	sets	(d) Distribution (col (b) divided	
2016					
2015					
2014		·			
2013					
2012					
2 Total of line 1, column (d)			2		
	ne 5-year base period — divide the total o	n line 2 by 5.0, or by the			
number of years the foundat	tion has been in existence if less than	5 years	3		
4 Enter the net value of nonch	naritable-use assets for 2017 from Part	X, line 5	4	_	
5 Multiply line 4 by line 3 .			. 5		
6 Enter 1% of net investment	income (1% of Part I, line 27b)		6		_
7 Add lines 5 and 6			7		
8 Enter qualifying distributions	from Part XII, line 4		8		
If line 8 is equal to or greater t Part VI instructions.	han line 7, check the box in Part VI, line	1b, and complete that part ι	using a 1% tax ra	ate. See the	

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ns)
1 a	Exempt operating foundations described in section 4940(d)(2), check here X and enter 'N/A' on line 1.	3 76 2 11 12 24
	Date of ruling or determination letter 2/13/86 (attach copy of letter if necessary – see instructions)	
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	N/A
	check here. ► and enter 1% of Part I, line 27b	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	***************************************
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	
3	Add lines 1 and 2	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	
	Credits/Payments:	, 1
а	2017 estimated tax pmts and 2016 overpayment credited to 2017	
b	Exempt foreign organizations — tax withheld at source	
	Tax paid with application for extension of time to file (Form 8868).	-
	Backup withholding erroneously withheld	•
	Total credits and payments. Add lines 6a through 6d	
	Enter any penalty for underpayment of estimated tax. Check here  If Form 2220 is attached.	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9	<del></del>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<del></del>
	Enter the amount of line 10 to be Credited to 2018 estimated tax	
_	VII-A Statements Regarding Activities	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes No
b	participate or intervene in any political campaign?  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?  See the instructions for the definition	
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	1 b X
d	Did the foundation file Form 1120-POL for this year?  Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation   \$ 0. (2) On foundation managers.  \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	1c X
	foundation managers. >\$ 0.	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
	If 'Yes,' attach a detailed description of the activities.	7.7
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes .	3 X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b N/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
	If 'Yes,' attach the statement required by General Instruction T	5. 5. 6 5.
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	
	By language in the governing instrument, or	
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> </ul>	6 X
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV	7 X
	Enter the states to which the foundation reports or with which it is registered. See instructions.	<del>  '   ^   .</del>
	IN	
	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation	8b X
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If 'Yes,' complete Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10 X
BAA	Fi	orm <b>990-PF</b> (2017)

Par	TVII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule. See instructions	_	11 Ye:	s No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement. See instructions		12	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	? [	13 X	
	Website address FLORARICHARDSON.COM  The backs are at a second for THANNETTE DARGE.	=		,
14	The books are in care of ► JEANNETTE BAPST  Located at ► 10 CREST DRIVE - DUNE ACRES CHESTERTON IN  Telephone no. ► 21  ZIP + 4 ► 46304	9-707	-0627	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here	<u>-</u> j	√Ā	-
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	Ľ.	Ye:	s No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	7.5 1.7		
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	1.2	Ye	s No
1 a	During the year, did the foundation (either directly or indirectly):	NI-		
		No [		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	No 🗓		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No 🕌		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? $\boxed{X}$	No .		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes	No S		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )  Yes	No S		
t	If any answer is 'Yes' to 1a(1)—(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions.		1 b	N/A
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?		1 c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	£ 5		
а		No A		
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20	1.3		
t	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer 'No' and attach statement — see instructions)		2 b	N/A
c	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.		51 70	1, 1
	► 20 , 20 , 20 , 20	:		1
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	No		-
t	of If 'Yes,' did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to	, <u>, , , , , , , , , , , , , , , , , , </u>		, , , , , , , , , , , , , , , , , , ,
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017)		3 b	N/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a	X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of	<u>'</u> -		
	the tax year beginning in 2017?		4 b	X
BAA		Form	1 <b>990-PF</b>	(2017)

Part VII-B   Statements Regarding Activit		n 4/20 May Be Rec	uired (continued)	
5 a During the year, did the foundation pay or incur a	•			Yes No
(1) Carry on propaganda, or otherwise attempt	·		Yes X	No Fig.
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra			<b>⊢</b> −	No
(3) Provide a grant to an individual for travel,			. Yes X	No Cartain
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc , organ		Yes X	No Section 1
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific on of cruelty to children	c, literary, or or animals? .	Yes X	] No
<b>b</b> If any answer is 'Yes' to 5a(1)—(5), did <b>any</b> or described in Regulations section 53 4945 or in a See instructions	f the transactions fail to current notice regarding o	qualify under the exce	ptions	5 b N/A
Organizations relying on a current notice rega	irding disaster assistan	ce, check here	▶ [	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon			N/A Yes	]No
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5–5(d)		
				No
b Did the foundation, during the year, pay prem	iums, directly or indirec	ctly, on a personal bene	efit contract?	6 b X
If 'Yes' to 6b, file Form 8870  7 a At any time during the tax year, was the found	dation a party to a prob	ubited tax shelter trans	action? Yes X	No
<b>b</b> If 'Yes,' did the foundation receive any process				N/A 7b
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Mana		
and Contractors		<del></del>		· · · · · · · · · · · · · · · · · · ·
1 List all officers, directors, trustees, and found			T	<del></del>
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10				
		0.	0.	0.
			}	
				ļ
			ļ	
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none, enter 'NONE	. <u>'                                      </u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE			compensation	
			1	1
				<del> </del>
Total number of other employees paid over \$50,000	l )	<u> </u>	<u> </u>	
BAA	TEEA0306L 08	8/24/17	<u> </u>	Form <b>990-PF</b> (2017)

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Form 990-PF (2017) FLORA RICHARDSON FOUNDATION, INC.

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	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	IE	
		<del></del>
Total	number of others receiving over \$50,000 for professional services	0
Par	t IX-A Summary of Direct Charitable Activities	·
List th	ne foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	AID IN THE PRESERVATION OF INDIGENOUS FLORA AND FAUNA; PROMOTE STUDY OF NATURAL HISTORY, ETC.	
2		
3		
4		
	t IX-B   Summary of Program-Related Investments (see instructions)	
Desc	tribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	<u>N/A</u>	

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see instructions.)	reign io	oundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes  a Average monthly fair market value of securities	1 a	
<b>b</b> Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations, check here	ting fou	
1 Minimum investment return from Part X, line 6 N/A	1	
2 a Tax on investment income for 2017 from Part VI, line 5 . 2a	**************************************	
b Income tax for 2017 (This does not include the tax from Part VI)  2b		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	·
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	***
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	· 12/4	
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	99,910.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required).	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	99,910.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b See instructions	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	99,910.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ndation	
300		Form <b>990-PF</b> (2017)

Part XIII Undistributed Income (see instr	uctions)	N/A		
	(a) Corpus	(b) Years prior to 2016	<b>(c)</b> 2016	<b>(d)</b> 2017
1 Distributable amount for 2017 from Part XI, line 7	11.			
2 Undistributed income, if any, as of the end of 2017:	Part of the same o			
a Enter amount for 2016 only				
<b>b</b> Total for prior years: 20 , 20 , 20	8 ( 8 )			, ,
3 Excess distributions carryover, if any, to 2017.	1 2	,, , , , , , , , , , , , , , , , , , , ,		
<b>a</b> From 2012		, ,	· -	, , , , , , , , , , , , , , , , , , , ,
<b>b</b> From 2013	19 177 1			
<b>c</b> From 2014		, , , , , , , , , , , , , , , , , , , ,		
<b>d</b> From 2015 .			1	
<b>e</b> From 2016	, (1) , (1) , (1) , (1) , (1)	1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,
f Total of lines 3a through e				
4 Qualifying distributions for 2017 from Part	35 5	10, 20, 21, 21, 21, 21, 21, 21, 21, 21, 21, 21		
XII, line 4: ► \$				
a Applied to 2016, but not more than line 2a .	17/7 3			73. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12
b Applied to undistributed income of prior years (Election required — see instructions).				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2017 distributable amount	12,			
e Remaining amount distributed out of corpus		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	できょうります	or a first of the state
5 Excess distributions carryover applied to 2017 .			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
(If an amount appears in column (d), the same amount must be shown in column (a).)				4-13-6-13-6-14
same amount must be shown in column (a).)				
6 Enter the net total of each column as			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
indicated below:	4			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</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 — see instructions.				
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).		, , , , , , , , , , , , , , , , , , , ,	,	1 - 4
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				· · · · ·
a Excess from 2013		1 .	3.2	, _ ,
<b>b</b> Excess from 2014	]		, , ,	
c Excess from 2015		. `		1 1
d Excess from 2016	1.00 m	S. 12 4 2	,	
e Excess from 2017	1 ,		1	1 .

Form 990-PF (20	017) FLORA RICHARDSON	FOUNDATION,	INC.		35-1076722	Page_ <b>10</b>
	rivate Operating Foundat					
is effective	ation has received a ruling or dete for 2017, enter the date of the	ruling			^[	2/13/86
	to indicate whether the foundat		rating foundation de		4942(J)(3) or	X 4942(j)(5)
	esser of the adjusted net m Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment	t return from Part X for	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	N/A
each year <b>b</b> 85% of line					/	N/A
	distributions from Part XII,				/	N/A
line 4 for e	each year listed	99,910.	94,406.	76,093.	73,598.	344,007.
for active con	uded in line 2c not used directly duct of exempt activities					0.
for active of	distributions made directly conduct of exempt activities. ne 2d from line 2c	99,910.	94,406.	л6,093.	73,598.	344,007.
	3a, b, or c for the test relied upon:					
	ternative test — enter.		/		į į	/-
` '	of all assets					N/A
(2) Value of section	of assets qualifying under n 4942(j)(3)(B)(i)					N/A
	alternative test — enter 2/3 of estment return shown in Part X, h year listed					
<b>c</b> 'Support' a	alternative test – enter.	-				· · ·
investr divider on sec	support other than gross ment income (interest, nds, rents, payments curities loans (section		,			
512(a)	(5)), or royalties)					N/A
more exe	from general public and 5 or empt organizations as provided in 4942(j)(3)(B)(III)					
(3) Larges	it amount of support from empt organization					N/A
	investment income					N/A
1 Informatio	pplementary Information sets at any time during the n Regarding Foundation Managers of the foundation who have by tax year (but only if they have	e year — see ins gers: e contributed more th	an 2% of the total co	intributions received		<del> </del>
<b>b</b> List any ma a partnersh NONE	anagers of the foundation who own hip or other entity) of which the	10% or more of the foundation has a 10	stock of a corporation 1% or greater intere	n (or an equally large est.	e portion of the owners	ship of
Check here requests fo 2a, b, c, ar	n Regarding Contribution, Grant, $G$	kes contributions to p s gifts, grants, etc	oreselected charitable to individuals or org	ganızatıons under o	ther conditions, com	cited plete items
a The name,	address, and telephone number or	email address of the	e person to whom ap	plications should be	addressed:	
<b>b</b> The form II	n which applications should be s	submitted and inform	mation and materia	Is they should inclu	de:	
c Any submi	ssion deadlines.	<u> </u>				
d Any santa	ctions or limitations on awards, s	such as by goograph	nical areas charital	ale fields kinds of i	nstitutions or other	factors:
u Any restric	LIGHS OF HITHRAUGHS OF AWAIUS, S	adii ad by geograpi	nour arous, charitat	5.5 Holde, Milds 01 1		

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Form **990-PF** (2017)

Form 990-PF (2017) FLORA RICHARDSON FOUNDATION, INC.

Part XV. Supplementary Information (continued)

Name and address (home or business)  a Paid during the year  a Paid during the year  a Paid during the year  satisfated contribution  NONE  NONE	Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Total  To		any foundation manager	status of	Purpose of grant or contribution	Amount
MONE NA EDUCATIONAL 1,500 USEIM OO M. PORTER AVE. HESTERTON IN 46304 IN DUNES ENVIRONMENTAL LEARNING NONE NA ELEMENTARY EDUCATION PROGRAMS  NA ELEMENTARY EDUCATION 31,000 PROGRAMS  NA ELEMENTARY EDUCATION 31,000 PROGRAMS  NA ELEMENTARY EDUCATION 20,000  NA ELEMENTARY EDUCATION 20,000  NA ELEMENTARY EDUCATION 20,000  PROGRAMS  NA ELEMENTARY EDUCATION 20,000  PROGRAMS  NA EDUCATIONAL 20,000  NA ELEMENTARY EDUCATION 20,000  PROGRAMS  NA ELEMENTARY EDUCATION 20,000  PROGRAMS  NA ELEMENTARY EDUCATION 20,000  PROGRAMS  STATEMENT 20,000  NA ELEMENTARY EDUCATION 20,000  PROGRAMS  STATEMENT 20,000  NA EDUCATIONAL 20,000  NA EDUCATIONAL 20,000  NA EDUCATIONAL 20,000  NA ELEMENTARY EDUCATION 20,000  PROGRAMS  STATEMENT 20,000  NA ELEMENTARY EDUCATION 20,000  NA ELEMENTARY EDUCATION 20,000  STATEMENT 20,0		or substantial contributor	Tecipient		
Total  To	WESTCHESTER TWP HISTORICAL MUSEUM 700 W. PORTER AVE. CHESTERTON IN 46304	NONE	N/A	EDUCATIONAL	1,500
Total ▶ 3a 52,500  b Approved for future payment	IN DUNES ENVIRONMENTAL LEARNING CENTER 700 HOWE ROAD CHESTERTON IN 46304	NONE			31,000
is Approved for future payment	INDIANA UNIVERSITY-GLISTEN P.O. BOX 66057 INDIANAPOLIS IN 46266	NONE	N/A		20,000
			<del>,</del>	► 3a	52,500
	E, pprotection raters position				
Total ► 3 b		<u> </u>		▶ 3b	

Enter gros	ss amounts unless otherwise indicated.					
·		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)
	gram service revenue			code		, , , , , , , , , , , , , , , , , , ,
a		<del> </del>				-
ь <u>—</u>		<del> </del>				<del></del>
g	<del></del>	<del> </del>				
e		<del></del>				<u> </u>
- <del>-</del>		<del></del>				<del></del>
a Fees	s and contracts from government agencies	<del>                                     </del>				
_	nbership dues and assessments					
	est on savings and temporary cash investments					
	dends and interest from securities					30,493.
5 Net	rental income or (loss) from real estate	25 7 7 7 1 1 1 1		´, `	17 AL 12 TO 15	
	t-financed property					
<b>b</b> Not	debt-financed property .	721000	-12,494.			-
6 Net re	ental income or (loss) from personal property					
<b>7</b> Othe	er investment income		<del></del>			
8 Gain	or (loss) from sales of assets other than inventory		-			36,114.
<b>9</b> Net	income or (loss) from special events					
<b>10</b> Gros	ss profit or (loss) from sales of inventory					
11 Othe	er revenue	E 64 - 45 - 55 - 5 - 5		, -	المرابع المرابع المرابع	11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
a						
ь	· · · · · · · · · · · · · · · · · · ·					
c						
d		<u> </u>				
e						
e	total Add columns (b), (d), and (e)	. इ.स. नेहाँ - इ.स. नेहाँ	-12,494.	· \ · · ·	12	66,607.
e Subt	i. Add line 12, columns (b), (d), and (e)		-12,494.	, , ,	13	66,607. 54,113.
e Subt	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate	ions )		<u> </u>	· •	
e 12 Subt 13 Tota (See work Part XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculated.  [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.
e 12 Subt 13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate [-B   Relationship of Activities to the	e Accomplish	ment of Exempt	Purpe	oses	54,113.

Use Only

BAA

Firm's address

926-8836

Form 990-PF (2017)

(219)

Phone no.

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of 1 a (1) (2) Other assets .... 1 a (2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1 b (1) (2) Purchases of assets from a noncharitable exempt organization ... 1 b (2) (3) Rental of facilities, equipment, or other assets ..... 1 b (3) (4) Reimbursement arrangements 1 b (4) (5) Loans or loan guarantees 1 b (5) (6) Performance of services or membership or fundraising solicitations . . . 1 b (6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (b) Amount involved N/A 2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? XNo b If 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepares (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown below? See instructions Here Title Signature of officer or trustee Date X Yes Print/Type preparer's name Preparer's signature Date Check Paid KRIS HARTRUNFT self-employed P00347451 Firm's EIN - 46-1612770 KITTREDGE & ZEHNER P.C Preparer Firm's name

SUITE 1

IN 46304-2475

209 S. CALUMET ROAD

CHESTERTON,

## Schedule B

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of the organization		
FLORA RICHARDSON FOUNDATIO	N, INC.	35-1076722
Organization type (check one).		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not tr	eated as a private foundation
	527 political organization	
Form 990-PF	$\overline{\mathrm{X}}$ 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate	ed as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10)	organization can check boxes for both the General Ri	ule and a Special Rule. See instructions
General Rule		
X For an organization filing Form 990, 99 property) from any one contributor Co	0-EZ, or 990-PF that received, during the year, contri mplete Parts I and II See instructions for determining	butions totaling \$5,000 or more (in money or a contributor's total contributions.
Special Rules		
For an organization described in section under sections 509(a)(1) and 170(b)(1)(A) received from any one contributor, during Form 990, Part VIII, line 1h, or (ii) Form	on 501(c)(3) filing Form 990 or 990-EZ that met the 33 b(vi), that checked Schedule A (Form 990 or 990-EZ), Parting the year, total contributions of the greater of (1) \$5 m 990-EZ, line 1. Complete Parts I and II.	-1/3% support test of the regulations II, line 13, 16a, or 16b, and that 5,000 or (2) 2% of the amount on (i)
For an organization described in section during the year, total contributions of numerical purposes, or for the prevention of crue	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that nore than \$1,000 <i>exclusively</i> for religious, charitable, s lty to children or animals Complete Parts I, II, and III	it received from any one contributor, scientific, literary, or educational .
during the year, contributions exclusive \$1,000. If this box is checked, enter he charitable, etc., purpose. Don't comple	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ely for religious, charitable, etc., purposes, but no such the total contributions that were received during the teany of the parts unless the <b>General Rule</b> applies to aritable, etc., contributions totaling \$5,000 or more during the second seco	h contributions totaled more than e year for an <i>exclusively</i> religious, o this organization because
<b>Caution.</b> An organization that isn't covered 990-PF), but it <b>must</b> answer 'No' on Part I' Part I line 2 to certify that it doesn't meet	I by the General Rule and/or the Special Rules doesn' V, line 2, of its Form 990, or check the box on line H o t the filing requirements of Schedule B (Form 990, 990	t file Schedule B (Form 990, 990-EZ, or of its Form 990-EZ or on its Form 990-PF, D-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B	(Form 990,	990-EZ,	or 990-PF)	(2017)

1 of Part I

Name of organization FLORA RICHARDSON FOUNDATION, INC. Page 1 of Employer identification number

35-1076722

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	e is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FLORA S. RICHARDSON IRREV. TRUST  ONE FIRST NATIONAL PLAZA  CHICAGO, IL 60670	\$7 <u>0,000</u> .	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	INDIANA DEPT OF NATURAL RESOURCES  402 W WASHINGTON ST ROOM W160A  INDIANAPOLIS, IN 46204	\$250,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions )

Page

of Part II

Employer identification number

FLORA RICHARDSON FOUNDATION, INC.

35-1076722

INONCASH Property (see instructions) Use duplicate copies of Part II if additional s	pace is needed.	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
N/A		
	1	
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	1	
	\$ 	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	,	
<u> </u>	  \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<b></b>		
	\$	
(6)	(0)	(4)
Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
	\$ 	
(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
	(See instructions.)	
	\$	
Sche	l dule B (Form 990, 990-E2	z, or 990-PF) (2017)
	Description of noncash property given  N/A  Description of noncash property given  Description of noncash property given  Description of noncash property given  (b)  Description of noncash property given  (c)  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given    Description of noncash property given   FMV (or estimate) (See instructions.)

(e)
Transfer of gift
Transferee's name, address, and ZIP + 4
Relationship of transferor to transferee

BAA

2017	FEDERAL STATEMENTS	PAGE
	FLORA RICHARDSON FOUNDATION, INC.	35-107672
STATEMENT 1 FORM 990-PF, PART I, LII ACCOUNTING FEES	NE 16B	
ACCOUNTING FEES .	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  TOTAL \$ 1,025. \$ 0. \$	
STATEMENT 2 FORM 990-PF, PART I, LIN TAXES	NE 18	
	(A) (B) NET (C)  EXPENSES INVESTMENT ADJUSTER  PER BOOKS INCOME NET INCOM  TOTAL \$ 27. \$ 0. \$	
STATEMENT 3 FORM 990-PF, PART I, LIN ALLOCATED DEPRECIAT	IE 19 ION	
DATE COST ACQUIRED BASIS CABIN 3/01/17 86,10	DEPRMETHOD RATE LIFE YR DEPRIN	INVEST ADJUSTER COME NET INCOM 2,479
STATEMENT 4 FORM 990-PF, PART I, LIN OTHER EXPENSES	IE 23	
FOREIGN TAX PAID INSURANCE INVESTMENT EXPENSES MILEAGE REIMBURSEMENT	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTE PER BOOKS INCOME NET INCOM  \$ 572. 3,008. 14,079. 131.	

267. 230.

94.

8,137. 15,015. \$

4,825. 46,358. \$

TOTAL \$

15,015.

15,015. \$

230.

94.

8,137. 15,015.

4,825. 46,358.

MISCELLANEOUS
OFFICE EXPENSE
POSTAGE
PRESERVE RESTORATION AND DEVELOPMENT

RENTAL EXPENSES

WEBSITE

20	_
711	
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## **FEDERAL STATEMENTS**

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FLORA RICHARDSON FOUNDATION, INC.

35-1076722

STATEMENT 5	
FORM 990-PF, PART II, LINE	13
INVESTMENTS - OTHER	

OTHER INVESTMENTS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MERRILL LYNCH #629-02194 MERRILL LYNCH #629-02195	MKT VAL MKT VAL	\$ 798,130. 418,941.	
	TOTAL	\$ 1,217,071.	\$ 1,363,067.

#### STATEMENT 6 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		BASIS		ACCUM. DEPREC.		BOOK <u>VALUE</u>		FAIR MARKET VALUE	
BUILDINGS LAND		\$	86,100. 523,750.	\$	2,479.	\$	83,621. 523,750.	\$	86,100. 523,750.
	TOTAL	\$	609,850.	\$	2,479.	\$	607,371.	\$	609,850.

#### STATEMENT 7 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

TENANT SECURITY DEPOSIT

... \$ 500. TOTAL \$ 500.

#### STATEMENT 8 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS

TOTAL \$ 567.

#### STATEMENT 9 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

			(B) HOW	(C) DATE	(D) DATE
ITEM		(A) DESCRIPTION	ACQUIRED	ACQUIRED	SOLD
1	MERRILL LYNCH	#629-02194	PURCHASED	VARIOUS	VARIOUS
2	MERRILL LYNCH	#629-02194	PURCHASED	VARIOUS	VARIOUS
3	CAP GAIN DIST	MERRILL LYNCH #629-02194	PURCHASED	VARIOUS	VARIOUS
4	MERRILL LYNCH	#629-02195	PURCHASED	VARIOUS	VARIOUS
5	MERRILL LYNCH	#629-02195	PURCHASED	VARIOUS	VARIOUS
6	MERRILL LYNCH	#629-02195	PURCHASED	VARIOUS	VARIOUS
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### **FEDERAL STATEMENTS**

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FLORA RICHARDSON FOUNDATION, INC.

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STATEMENT 9 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

						HOW (C		(D) DATE
ITEM		(A) DE:	<u>SCRIPTION</u>		<u>ACOU</u>	<u> IRED AC</u>	<u>QUIRED                                    </u>	SOLD
7	CAP GAIN D	IST MERRIL	L LYNCH #62	9-02195	PURCE	IASED	VARIOUS	VARIOUS
	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	GROSS	DEPREC.	COST	GÀÍN	FMV	ADJ. BAS.	EXCESS	GÀÍN
ITEM	<u>SALES</u>	ALLOWED	BASIS	(LOSS)	12/31/69	12/31/69	(I) - (J)	(LOSS)
1	64,752.		63,796.	956.				\$ 956.
2	215,302.		191,471.	23,831.				23,831.
3	11,437.		0.	11,437.				11,437.
4	50,936.		51,073.	-137.				-137.
5	41,177.		41,158.	19.				19.
6	3,078.		3,074.	4.				4.
7	4.		0.	4.				4.
							TOTAL	\$ 36,114.

STATEMENT 10 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	BUTION TO	EXPENSE ACCOUNT/ OTHER
BARBARA PLAMPIN 18 EAST ROAD-DUNE ACRES CHESTERTON, IN 46304	DIRECTOR 1.00	\$ 0.	\$ 0.	\$ 0.
GAYLE S. TONKOVICH 1612 WARWICK AVENUE WHITING, IN 46394	VICE PRESIDENT 1.00	0.	0.	0.
BILL SCHAUDT P.O. BOX 486 BEVERLY SHORES, IN 46301	VICE PRESIDENT 1.00	0.	0.	0.
NADIA KOMP 1760 GRAHAM DRIVE CHESTERTON, IN 46304	DIRECTOR 1.00	0.	0.	0.
ROBERT F. HARTMANN 36 EAST ROAD, DUNE ACRES CHESTERTON, IN 46304	DIRECTOR EMERIT 1.00	0.	0.	0.
JEANNETTE BAPST 10 CREST DRIVE - DUNE ACRES CHESTERTON, IN 46304	TREASURER 3.00	0.	0.	0.
WENDY WEIS SMITH 291 ROBBIE LANE VALPARAISO, IN 46385	DIRECTOR 1.00	0.	0.	0.

2017

## **FEDERAL STATEMENTS**

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FLORA RICHARDSON FOUNDATION, INC.

35-1076722

STATEMENT 10 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTE		-	CONTRI- BUTION TO EBP & DC	
TINA BENGS 2910 COACHMAN TRAIL VALPARAISO, IN 46385	PRESIDENT 1.00	\$	0. \$	0.	\$ 0.
WENDY SMITH 291 ROBBIE LANE VALPARAISO, IN 46385	DIRECTOR 1.00		0.	0.	0.
JUDITH GREY 3 SOUTH 069 BUTTERNUT LN GLEN ELLYN, IL 60137	SECRETARY 1.00		0.	0.	0.
DONNA HOWELL 2852 HEARTHSTONE DRIVE VALPARAISO, IN 46383	DIRECTOR 1.00		0.	0.	0.
DOMINIC MARTEN 200 ROSKIN ROAD PORTER, IN 46304	DIRECTOR 1.00		0.	0.	0.
	TOTA	AL \$	0. \$	0.	\$ 0.