2949114609520

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.

▶Go to www.irs.gov/Form990PF for instructions and the latest information. Department of the Treasury Internal Revenue Service

Open to Public Inspection

For c	alenda	ar year 2017 or tax year beginning ,	and ending				
		idation •	RD.		A Emplo	yer identification number	
		YERGENS & VIRGINIA Y ROGERS	FD		25	1755004	
		NATIONAL WEALTH MANAGEMENT	1 00	om/suite		-1755904 one number (see instructions)	
		street (or P O box number if mail is not delivered to street address) BOX 207	1 10	OTPSUILE		0-427-7131	
		state or province, country, and ZIP or foreign postal code	L				,
		SVILLE IN 47702			C If exen	nption application is pending, o	heck here
G C	heck a	Il that apply Initial return Initial retu	m of a former public cha	anty	D 1. Fo	reign organizations, check her	• □
		Final return Amended	return		2. Fo	reign organizations meeting th	• _
		Address change Name cha	nge		85	% test, check here and attach	computation
H C	heck ty	/pe of organization: X Section 501(c)(3) exempt private	foundation	al	E If priva	te foundation status was term	inated under
	ection	4947(a)(1) nonexempt chantable trust Other taxab	le private foundation	- 7	section	1 507(b)(1)(A), check here	▶ ∐
I Fa	ır mark	ket value of all assets at J Accounting method	X Cash Acc	rual	F If the f	oundation is in a 60-month ter	mination
∽ en	d of ye	ar (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check he	ere 🕨 🔛
<i>y</i>	e 16) 🕨		be on cash basis)				40.5
Pa	rt I		(a) Revenue and expenses per	(b) Net in	estment/	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	books	inco	me	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)			77.77		
	2	Check ► X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	76,490		76,490		
	5a	Gross rents					
Φ	b	Net rental income or (loss)					
בַּ	6a	Net gain or (loss) from sale of assets not on line 10	65, <u>5</u> 79				
Revenue	b	Gross sales price for all assets on line 6a 858, 958					
ď	7	Capital gain net income (from Part IV, line 2)			65,579		
	8	Net short-term capital gain				0	
	9	Income modifications					
260	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
20	C	Gross profit or (loss) (attach schedule)					
3.	11	Other income (attach schedule)	142,069	1	42,069	0	
2- 101	12	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc	15,000	 	7,500		
J &	13 14	Other employee salaries and wages	13,000		7,500		
benses	15	Pension plans, employee benefits			-	REC	EIVED
. 6	16a	Legal fees (attach schedule)					70
, X	b	Accounting fees (attach schedule) STMT 1	1,975		988	MAY SAZ	2 4 2018
*	C	Other professional fees (attach schedule) STMT 2	28,281	7	28,281	m mai	N 2 2010
ati	17	Interest					프
<u>is</u> ti	18	Taxes (attach schedule) (see instructions) STMT 3	1,426	5	442	UGL	EN, UT
Ë	19	Depreciation (attach schedule) and depletion					
퉏	20	Occupancy	<u></u>				
₹	21	Travel, conferences, and meetings					ļ
ä	22	Printing and publications					
ğ	23	Other expenses (att sch)		 			
Ĕ	24	Total operating and administrative expenses.		1			
Operating and Administrative		Add lines 13 through 23	46,682		37 , 211		
o	25	Contributions, gifts, grants paid	560,000				560,000
	26	Total expenses and disbursements. Add lines 24 and 25	606,682		37,211		560,000
	27	Subtract line 26 from line 12	ACA (15				
	a	Excess of revenue over expenses and disbursements	-464,613		L04,858		
	b	Net investment income (if negative, enter -0-)					
	C	Adjusted net income (if negative, enter -0-)		A STREET WAS DOING		4	

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Form 990-PF (2017) PAUL YERGENS & VIRGINIA Y ROGERS FD 35-1755904

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End of year Beginning of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Part II (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 204,414 154,639 204,414 2 Savings and temporary cash investments Accounts receivable ▶ 3 Less: allowance for doubtful accounts ▶ 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 (att. schedule) 0 Less: allowance for doubtful accounts ▶ R Inventories for sale or use 9 Prepaid expenses and deferred charges 852.786 853,781 Investments - U S. and state government obligations (attach schedule) STMT 953,452 10a 1,752,085 SEE STMT 5 1,990,475 107,479 b Investments - corporate stock (attach schedule) SEE STMT 6 373,128 372,342 375,487 Investments - corporate bonds (attach schedule) C 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation (attach sch.) 12 Investments - mortgage loans 394,397 390,739 SEE STATEMENT 7 568,943 13 Investments – other (attach schedule) 14 Land, buildings, and equipment, basis Less accumulated depreciation (attach sch.) 15 Other assets (describe ▶) 16 Total assets (to be completed by all filers - see the 3,576,024 4,040,637 3,931, instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule) 21 22 Other liabilities (describe) 0 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ▼ X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 4,040,637 3,576,024 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 4,040,637 3,576,024 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see 4,040,637 3,576,024 instructions) Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 4,040,637 end-of-year figure reported on prior year's return) 2 -464,6132 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 3,576,024 Add lines 1, 2, and 3 4 5 5 Decreases not included in line 2 (itemize) ▶ 3,576,024 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2017) PAUL YERGE Part IV Capital Gains and Lo	NS & VIRGINIA Y ROGE passes for Tax on Investment Inc		35-1755904		Page 3
	(s) of property sold (for example, real estate, , or common stock, 200 shs MLC Co)		(b) How acquired P – Purchase D – Donation	(c) Date acc (mo , day,	
1a PUBLICLY TRADED SE	CURITIES		Р	VARIO	US VARIOUS
b CAPITAL GAIN DIST					
c CAPITAL GAIN DIST					
d		-			
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus exper	other basis		(h) Gain or (loss) ((e) plus (f) minus (g))
a 835,735			793,379		42,356
<u>b</u> 22					22
<u>c</u> 23,201					23,201
d					
<u>e</u>					
Complete only for assets showing gain in	n column (h) and owned by the foundation (j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	col (Gains (Col (h) gain minus (k), but not less than -0-) or Losses (from col (h))
a					42,356
b					22
c					23,201
d					201201
e				·	
	If gain, also enter in Part I, I	line 7			
2 Capital gain net income or (net capital lo	If (loss), enter -0- in Part I, I	•		2	65,579
3 Net short-term capital gain or (loss) as o		_			
	n (c). See instructions. If (loss), enter -0- ir	n 🕨			
Part V Qualification Under	Section 4940(e) for Reduced Ta			3	42,356
If section 4940(d)(2) applies, leave this part Was the foundation liable for the section 494 If "Yes," the foundation does not qualify under	2 tax on the distributable amount of any y		e period?		Yes X No
1 Enter the appropriate amount in each co	lumn for each year, see the instructions b	efore making a	any entnes	"	
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) e of nonchantable-use assets		(d) Distribution ratio (col (b) divided by col (c))
2016	533,61		4,658,6	599	0.114542
2015	633,25		5,348,6		0.118395
2014	522,75		5,390,	94	0.096983
2013	358,50		5,154,		0.069558
2012	353,12		4,925,		0.071698
2 Total of line 1, column (d)				2	0.471176
3 Average distribution ratio for the 5-year	hase negod – divide the total on line 2 by	5.0 or by the			0.471170
number of years the foundation has bee	-	o.o, or by the		3	0.094235
4 Enter the net value of noncharitable-use	assets for 2017 from Part X, line 5			4	4,463,271
5 Multiply line 4 by line 3				5	420,596
6 Enter 1% of net investment income (1%	of Part I, line 27b)			6	1,049
7 Add lines 5 and 6				7	421,645
8 Enter qualifying distributions from Part X	II, line 4			8	560,000
If line 8 is equal to or greater than line 7,	shock the box is Port \// line 1b, and som	anlata that nad		O 11	

	990-PF (2017) PAUL IERGENS & VIRGINIA I RUGERS FD 33-1/33904				Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				0.40
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			,049
	here ► X 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-)	_2_			0
3	Add lines 1 and 2	3_		1	,049
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	and the filter restore	1	,049
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1,600				
b	Exempt foreign organizations – tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d	7_	<u> </u>	1	<u>,600</u>
8	Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			551
1	Enter the amount of line 10 to be. Credited to 2018 estimated tax ▶ 551 Refunded ▶	11	L		
	rt VII A Statements Regarding Activities			research and the second	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Ye	
	participate or intervene in any political campaign?			1a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				١.,
	Instructions for the definition			1b	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
_	published or distributed by the foundation in connection with the activities.				V
C	Did the foundation file Form 1120-POL for this year?			1c	X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
_	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	X
_	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		,	5	X
•	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
-	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?			6 X	Z minimum
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part X\	/		7 X	_
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	IN				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		i		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV If "Yes,"				
	complete Part XIV			9	X
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses			10	<u> </u>
			F	om 990-	

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Pa	irt VII-A Statements Regarding Activities (continued)				_
				Yes No	<u>, </u>
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		l i		
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		11	X	_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			1	
	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	<u> </u>	_
	Website address ► N/A				
14	The books are in care of ► SHARON PETERS, OLD NATIONAL BANK Telephone no	▶ 260-4	127-	7131	
	116 E BERRY STREET		_		
	Located at ► FORT WAYNE IN ZIP+4	▶ 46802	2	1	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here			▶ [╛
	and enter the amount of tax-exempt interest received or accrued during the year	15			_
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority			Yes No	<u>,</u>
	over a bank, securities, or other financial account in a foreign country?		16	X	<u>ज्</u> या
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of				
88 se	the foreign country				
<u></u> ₽Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Control (publication)		_
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes No)
1a	During the year, did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	i X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?				
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	i X No			H
	(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)?	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				
	foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days)	X No			
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations				=
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	▶ ∐			
С	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?	N/A	1c		噩
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))				
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	₩.			
	6e, Part XIII) for tax year(s) beginning before 2017?	X No			
	If "Yes," list the years > 20 , 20 , 20 , 20				III
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	NT /7\			荁
_	all years listed, answer "No" and attach statement – see instructions)	N/A	2b		3
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
2-	▶ 20 , 20 , 20 , 20 Did the foundation held more than a 2% direct countries to the second contribution of the second contributio				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	☑			E
h	at any time during the year? If "Yes " did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	X No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or				
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	at / 74			ij
4-	foundation had excess business holdings in 2017.)	N/A	3b	177	_
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	X	画
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				噩
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		1 4b 1	X	

Form 990-PF (2017)

	• ,					
Form	990-PF (2017) PAUL YERG	ENS & VIRGINIA Y ROC	GERS FD 35-1	755904		Page 6
		arding Activities for Which Fo			nued)	
5a						
		rise attempt to influence legislation (section	on 4945(e))?	Пү	es 🗓 No	
		pecific public election (see section 4955),	,			
	directly or indirectly, any voter re	•		Пу	es X No	
	• • • •	for travel, study, or other similar purpose	s?	⊢	es X No	
	•	on other than a charitable, etc , organizat			25	
	section 4945(d)(4)(A)? See inst	· · · · · · · · · · · · · · · · · · ·		П у	es X No	
	, , , , , ,	nan religious, chantable, scientific, literary	or educational	ш.		
		of cruelty to children or animals?	y, or cododitorial		es X No	
ь	· · ·	did any of the transactions fail to qualify i	inder the exceptions does		C3 [A] 110	
U		current notice regarding disaster assista	· · · · · · · · · · · · · · · · · · ·	ince in	N/A	5b
	•	otice regarding disaster assistance, chec			NA.	
С	• •	office regarding disaster assistance, check (4), does the foundation claim exemption				
C	·	•	i irom the tax	n/A ∏ Y	/aa	
	because it maintained expenditure r	•		И/А 🔲 Т	es 📙 No	
٥.	·	ed by Regulations section 53.4945–5(d)				
6a	, , ,	receive any funds, directly or indirectly, to	pay premiums	п.	, [] ,,	
	on a personal benefit contract?			·	es X No	
b	· · · · · · · · · · · · · · · · · · ·	pay premiums, directly or indirectly, on a	personal benefit contract	7		6b X
_	If "Yes" to 6b, file Form 8870.				. তি	
7a	-	the foundation a party to a prohibited tax		_	es X No	
b		any proceeds or have any net income attr			N/A	7b
EP		it Officers, Directors, Trustees	, Foundation Mana	gers, Highly P	aid Employe	es,
	and Contractors				<u> </u>	
1 1	<u>ist all officers, directors, trustees</u>	, and foundation managers and their c	compensation. See instr	ructions.		
			(b) Title, and average	(c) Compensation	(d) Contributions to	
					employee henetit	(e) Expense account
	(a) Narr	ne and address	hours per week	(If not paid,	employee benefit plans and deferred	(e) Expense account, other allowances
	(a) Nam	ne and address				
BE	(a) Nam	FORT WAYNE	hours per week	(If not paid,	plans and deferred	
			hours per week devoted to position	(If not paid,	plans and deferred compensation	
PC	NJAMIN WILLIAMS	FORT WAYNE	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred compensation	other allowances
PC	NJAMIN WILLIAMS D BOX 11648	FORT WAYNE IN 46859	hours per week devoted to position SECRETARY 1.00	(If not paid, enter -0-)	plans and deferred compensation	other allowances
PC 	CNJAMIN WILLIAMS D BOX 11648 CAN TIPTON	FORT WAYNE IN 46859 NAPLES	hours per week devoted to position SECRETARY 1.00 PRESIDENT	(If not paid, enter -0-)	plans and deferred compensation	other allowances
JE 16	NJAMIN WILLIAMS D BOX 11648 CAN TIPTON S823 CABREO DRIVE	FORT WAYNE IN 46859 NAPLES FL 34110	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00	(If not paid, enter -0-)	plans and deferred compensation	other allowances
JE 16	CNJAMIN WILLIAMS DESCRIPTION SE23 CABREO DRIVE HARON PETERS	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER	(If not paid, enter -0-) 7,500	plans and deferred compensation	other allowances
JE 16	CNJAMIN WILLIAMS DESCRIPTION SE23 CABREO DRIVE HARON PETERS	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER	(If not paid, enter -0-) 7,500	plans and deferred compensation	other allowances
JE 16	CNJAMIN WILLIAMS D BOX 11648 CAN TIPTON E823 CABREO DRIVE EARON PETERS E6 E BERRY STREET Compensation of five highest-pa	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00	(If not paid, enter -0-) 7,500 7,500	plans and deferred compensation	other allowances
	ENJAMIN WILLIAMS D BOX 11648 EAN TIPTON E823 CABREO DRIVE EARON PETERS E6 E BERRY STREET	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00	(If not paid, enter -0-) 7,500 7,500	plans and deferred compensation	other allowances
	CNJAMIN WILLIAMS D BOX 11648 CAN TIPTON E823 CABREO DRIVE EARON PETERS E6 E BERRY STREET Compensation of five highest-pa	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00	(If not paid, enter -0-) 7,500 7,500	plans and deferred compensation	other allowances
	CNJAMIN WILLIAMS D BOX 11648 CAN TIPTON E823 CABREO DRIVE EARON PETERS E6 E BERRY STREET Compensation of five highest-pa	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500	enter (d) Contributions to employee benefit	other allowances 0 0 0 0 0 0 0 0 0
	CNJAMIN WILLIAMS D BOX 11648 CAN TIPTON S823 CABREO DRIVE HARON PETERS 6 E BERRY STREET Compensation of five highest-pair	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 led on line 1 – see instru	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	plans and deferred compensation	other allowances
76 JE 16 SH 11	CNJAMIN WILLIAMS D BOX 11648 CAN TIPTON S823 CABREO DRIVE HARON PETERS 6 E BERRY STREET Compensation of five highest-pair	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
76 JE 16 SH 11	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included)	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0
PC JE SH 111 2 2 NO	COMPENSATION OF FIVE HIGHEST-PAIR CONJAMIN WILLIAMS DO BOX 11648 CAN TIPTON DO BOX 11648 CAN TIPTON DO BOX 11648 DO BOX 1	FORT WAYNE IN 46859 NAPLES FL 34110 FORT WAYNE IN 46802 id employees (other than those included loyee paid more than \$50,000	hours per week devoted to position SECRETARY 1.00 PRESIDENT 1.00 BOARD MEMBER 1.00 (b) Title, and average hours per week	(If not paid, enter -0-) 7,500 7,500 0 uctions). If none,	enter (d) Contributions to employee benefit plans and deferred	other allowances 0 0 0 0 0 0 0 0 0

Form 990-PF (2017) PAUL YERGENS & VIRGINIA Y ROGERS FD	35-1755904	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundati		
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See instruction		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE]	
		<u> </u>
		-
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc.	the number of	Expenses
1 N/A		
2		
3		
4		·
•		
Part IX-B Summary of Program-Related Investments (see instruction	ons)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		·— ·—
		
2		
) -
All the consequent of the consequence of the conseq		
All other program-related investments. See instructions 3		
•		
Total. Add lines 1 through 3		

Form 990-PF (2017)

Form	1990-PF (2017) PAUL YERGENS & VIRGINIA Y ROGERS FD 35-1755904		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes·	diam'r rost	
а	Average monthly fair market value of securities	1a	4,531,240
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
đ	Total (add lines 1a, b, and c)	1d	4,531,240
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	0
3	Subtract line 2 from line 1d	3	4,531,240
4	Cash deemed held for chantable activities Enter 11/2% of line 3 (for greater amount, see	1	
	instructions)	4	<u>67,969</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,463,271
6	Minimum investment return. Enter 5% of line 5	6	223,164
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	ounda	tions
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	223,164
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c_	1,049 222,115
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	222,115
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	222,115
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	<u>222,115</u>
P	art XII Qualifying Distributions (see instructions)		
			
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes	1a	560,000
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	_	300,000
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
_	Suitability test (prior IRS approval required)	3a	
a b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	560,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
-	Enter 1% of Part I, line 27b. See instructions	5	1,049
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	558,951
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation		
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2017)

272,879

369,317

303,449

337,885

Form 990-PF (2017)

Excess from 2013

Excess from 2014

Excess from 2015

Excess from 2016 Excess from 2017

DAA

Page **11**

3 Grants and Contributions Paid During the		ture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year TURNSTONE CENTER FOR DISABI 3320 NORTH CLINTON STREET FORT WAYNE IN 46805	CHARITAE	PUBLIC LE - THERAPY	SERVICES	50,000
VISITING NURSE AND HOSPICE 5910 HOMESTEAD ROAD FORT WAYNE IN 46814		PUBLIC E - CAPITAL/C	PERATING	60,000
CANCER SERVICES OF NORTHEAS 6316 MUTUAL DRIVE FORT WAYNE IN 46825		PUBLIC E - OPERATING	SUPPORT	50,000
MATTHEW 25 HEALTH & DENTAL 413 E JEFFERSON BLVD FORT WAYNE IN 46802	CLINIC CHARITABI	PUBLIC E - OPERATING	SUPPORT	50,000
QUESTA FOUNDATION FOR EDUCA 3468 STELLHORN ROAD FORT WAYNE IN 46815		PUBLIC ITABLE - SCHO	LARSHIPS	100,000
COMMUNITY TRANSPORTATION NE 5601 INDUSTRIAL ROAD FORT WAYNE IN 46825		PUBLIC E - OPERATING	SUPPORT	50,000
FORT WAYNE CHILDREN ZOO 3411 SHERMAN BLVD. FORT WAYNE IN 46808	CHARITABI	PUBLIC E - OPERATING	SUPPORT	75,000
FORT WAYNE PHILHARMONIC 4901 FULLER DRIVE FORT WAYNE IN 46835	CHARITABI	PUBLIC E- MASTERWORK	S SERIES	100,000
FORT WAYNE COMMUNITY SCHOOI 1200 SOUTH CLINTON STREET FORT WAYNE IN 46802	S CHARITABLE	PUBLIC - INSTRUMENT	PROGRAM	25,000
Total b Approved for future payment			▶ 3a	560,000
N/A				
Total			▶ 3b	

	Amalysis of Income-Producing A					
	nounts unless otherwise indicated		isiness income	Excluded by	section 512, 513, or 514	
1 Program s	ervice revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
a				-		
		— 				
						· · · · · · · · · · · · · · · · · · ·
				 		
f			7		· · · · · · · · · · · · · · · · · · ·	
g Fees a	and contracts from government agencies		<u> </u>			
	ip dues and assessments					
3 Interest on	savings and temporary cash investments					-
4 Dividends	and interest from securities		-	14	76,490	
5 Net rental	income or (loss) from real estate:					
a Debt-fi	inanced property					
	bt-financed property					_
	income or (loss) from personal property	<u> </u>				
	stment income					
	ss) from sales of assets other than inventory			18	65,579	
	e or (loss) from special events					
	it or (loss) from sales of inventory					
	nue: a	- 	-	_		
		-				
		-				<u></u>
e	***	_				
	add columns (b), (d), and (e)		·	0	142,069	0
	line 12, columns (b), (d), and (e)			O sin the second	142,009	
	et in line 13 instructions to verify calculations)				13	142,000
Part XVI-E	= to pe	Accomplishment	of Exempt	Purnoses		
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur	ne is reported in column	(e) of Part XVI-	A contributed in)
N/A						
						
						· · · · · · · · · · · · · · · · ·
				<u></u>		
	-				· · · · · · · · · · · · · · · · · · ·	
			-			
						-
						
4-7						

Part)	(VII)	Information Reg		nsfers To and	d Transaction	ıs and	d Relationships Wit	n Nonchari	table		
1 Did	the ora	anization directly or indi		in any of the follow	wing with any other	er organ	nization described	_		Yes	No
		01(c) (other than section									
	anızatıo		(// /								
a Tra	nsfers f	rom the reporting found	ation to a non-	chantable exempt	organization of						
(1)	Cash								1a(1)		X
(2)	Other a	assets							1a(2)		X
b Oth	er trans	actions:									
		of assets to a nonchanta		_					1b(1)		X
		ses of assets from a no			ח				1b(2)	<u> </u>	X
		of facilities, equipment,		ts					1b(3)	┝	X
		ursement arrangements	i						1b(4)		X
		or loan guarantees nance of services or me	ambarehin ar f	fundraising collects	ttono				1b(5)		X
		facilities, equipment, ma							1b(6) 1c	\vdash	X
			_			(b) sho	ould always show the fair n	narket	_ 10		
							ation received less than fa				
			_				s, other assets, or services				
(a) Lin		(b) Amount involved		e of nonchantable exem			(d) Description of transfers, tr		anng arrangemei	nts	
<u>N/A</u>											
			<u> </u>			L					
						<u> </u>					
			 			<u> </u>					
		-	 	 		 					
			+			 					
-		<u> </u>	 			 					
		<u> </u>	+								
		-	+								
•		 									
				=							
			1								
		dation directly or indirect in section 501(c) (other t				empt o	organizations			-	1
		mplete the following sch		01(c)(3)) 01 III sec					U "	28 [7] 140
	.00, 00	(a) Name of organization	loddie	(b) Type of	organization		(c) Descri	ption of relationship			
N/2	Ā			, , , ,				· · · · · · · · · · · · · · · · · · ·			
		-									
		enalties of perjury, I declare the and complete Declaration of p					statements, and to the best of my arer has any knowledge	knowledge and be	elief, it is true,		
				. , ,			, ,		IRS discuss this n		
Sign								See instr	preparer shown be ructions	Yes	No
Here		Received	s. alla	,				/ <u> </u>			
	- Sum	//	v. uce	<u> </u>		4//8	<u>Direc</u>	17-64			
	T	nature of ofter or trustee			Date		▼ Trtle				
	Pnnt/T	ype preparer's name			Preparer's signature	3	•		Date	Check	ıf
Paid	TIME	A K WELLMAN, (~D7\		W. 12	12	(1200) man , (PA 1	4,27,18	self-em	ployed
Preparer		name ► BADEN		& SCHROE	DER. LLC	1		· ·	P00382) 68 L	
Use Only			POINTE		SS WAY #3			PTIN Firm's EIN ▶	35-193		
		FORT			04-7926	3.0		Phone no	260-42		

47851001 PAUL YERGENS & VIRGINIA Y ROGERS FD 35-1755904 FYE: 12/31/2017

Stat	ement 1 - Form 990-PF, Part I	, Line 16b - Acco	unting Fees	
escription	Total	Net Investment	Adjusted Net	O.T.

Charitable Purpose	S.	8		Charitable Purpose	v.	\$
Adjusted Net	S	\$	fessional Fees	Adjusted Net	\$	\$
Net Investment	886	886	e 16c - Other Pro	Net Investment	28,281	28,281
Total	\$ 1,975	\$ 1,975	Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees	Total	\$ 28,281	\$ 28,281
Description	ACCOUNTING FEES	TOTAL	Statement	Description	INVESTMENT MANAGEMENT FEES	TOTAL

	Charitable Purpose	€.	\$
axes	Adjusted Net	<i>v</i> ٠	\$
ent 3 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment	442	442
PF, Part	In	ᡐ	v.
3 - Form 99(Total	984 442	1,426
Statement		w	v.
	Description	FEDERAL TAX FOREIGN TAXES PAID	TOTAL

ments	-	\$ 853,781	\$ 853,781
ment Invest	Basis of Valuation	COST	
State Govern	End of Year	852,786	852,786
JS and		တ	ω. I
PF, Part II, Line 10a - US and State Government Investmen	Beginning of Year	953, 452	953,452
PF, Pal	_	ጭ	ۍ ا
Statement 4 - Form 990-	Description	US GOVERNMENT	TOTAL

47851001 PAUL YERGENS & VIRGINIA Y ROGERS FD Federal Statements

1755904	E: 12/31/
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	Fair Market Value \$ 2,107,479 \$ 2,107,479	Fair Market Value \$ 375,487
Investments	Basis of Valuation	Basis of Valuation COST
b - Corporate Stock	End of Year \$ 1,752,085 \$ 1,752,085	End of Year \$ 372,342
n 990-PF, Part II, Line 10b - Corporate Stock Investments	Beginning of Year \$ 1,990,475 \$	Beginning of Year End of Year Basis of Valuation Year \$ 373,128 \$ 372,342 Cost \$ 372,342 \$ Cost
Statement 5 - Form	Description INVESTMENTS - CORPORATE STOCKS TOTAL	Statement 6 - Form Description INVESTMENTS - CORPORATE BONDS TOTAL

B o	əginning of Year		End of Year	Basis of Valuation	u_	Fair Market Value
\$	280,838	پ	258,112	COST	က က	254,362
	13,105		11,285	COST		11,285
	275,000		125,000	COST		125,092
φ.	568,943	\$	394,397		\$	390,739
v v		Beginning of Year 280,838 13,105 275,000	Beginning of Year 280,838 13,105 275,000 568,943 \$	Beginning of Year Year Year 280, 838 \$ 258,112 11,285 275,000 125,000 \$ 568,943 \$ \$ 394,397	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	End of Basis of F Year \$ 258,112