

Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

For calendar year 2017 or tax year beginning , and ending A Employer identification number Name of foundation MCCOMB FAMILY FOUNDATION. ATT: DAVID MCCOMB 35-2001354 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 9077 STELLHORN CROSSING PARKWAY 260-247-2203 City or town state or province, country, and ZIP or foreign postal code If exemption application is pending, check here FORT WAYNE IN 46815 Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the Address change 85% test, check here and attach computation Name change Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at J Accounting method X Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) line 16) ▶ \$ 3,153,837 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (b) Net investment for charitable (c) Adjusted net xpenses per books amounts in columns (b), (c), and (d) may not necessarily equal ıncome income purposes the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 3,166 Check ► X if the foundation is **not** required to attach Sch B 2 3 Interest on savings and temporary cash investments 66,359 66,359 66,359 61,871 61,871 61,871 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Revenue STMT 1 Net gain or (loss) from sale of assets not on line 10 -6.1746a Gross sales price for all assets on line 6a 150,000 0 7 Capital gain net income (from Part IV, line 2) 0 Net short-term capital gain a Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) 125,222 128,230 128,230 12 Total. Add lines 1 through 11 13 0 Compensation of officers, directors, trustees, etc Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) SEE STMT 2 1,000 1,000 STMT 3 1,700 1,700 Accounting fees (attach schedule) 19,227 17,208 Other professional fees (attach schedule) STMT 4 RECEIVED Taxes (attach schedule) (see instructions) MAY 2818 19 Depreciation (attach schedule) and depletion Occupancy 21 Travel, conferences, and meetings Printing and publications 23 Other expenses (att sch) Total operating and administrative expenses. Add lines 13 through 23 21,927 17,208 0 2,700 160,046 160,046 Contributions, gifts, grants paid 0 Total expenses and disbursements. Add lines 24 and 25 181,973 17,208 162,746 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -56,751 111,022 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-) 128,230

For Paperwork Reduction Act Notice, see instructions.

	Part ¶	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	E	End o	f year
_	+ 441 % 71	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash – non-interest-bearing	-3	·	-2	
	2	Savings and temporary cash investments	853,162	44,	791	44,791
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
		instructions)				
	7	Other notes and loans receivable (att. schedule) ► SEE WRK 173,328				
	ļ	Less allowance for doubtful accounts ▶ 0	173,328	173,3	328	173,328
ফ	8	Inventories for sale or use		 -		
Assets	9	Prepaid expenses and deferred charges				
ĕ	10a	Investments – U S and state government obligations (attach schedule) STMT 5	1,155,169	1,575,3	389	1,531,415
	b	Investments – corporate stock (attach schedule)]	
	С	Investments – corporate bonds (attach schedule) SEE STMT 6	9,880	9,8	380	10,040
	11	Investments – land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.) ▶				
	12	Investments – mortgage loans			. <u></u> l	
	13	Investments – other (attach schedule) SEE STATEMENT 7	768,221	1,099,6	520	1,394,263
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.) ▶				
	15	Other assets (describe ▶)				
Ì	16	Total assets (to be completed by all filers – see the				
		instructions Also, see page 1, item I)	2,959,757	2,903,0	006	3,153,837
	17	Accounts payable and accrued expenses]	•
	18	Grants payable				
Liabilities	19	Deferred revenue SEE STATEMENT 8	88,831	88,8	331	
≣	20	Loans from officers, directors, trustees, and other disqualified persons				
iab	21	Mortgages and other notes payable (attach schedule)				
ᅦ	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	88,831	88,8	331	
		Foundations that follow SFAS 117, check here			-	
ces		and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	2,870,926	2,814,1	L75	
Net Assets or Fund Balar	25	Temporarily restricted				
	26	Permanently restricted				
Š		Foundations that do not follow SFAS 117, check here				
닌		and complete lines 27 through 31.				
S	27	Capital stock, trust principal, or current funds				
힞	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
B	29	Retained earnings, accumulated income, endowment, or other funds]	
늉	30	Total net assets or fund balances (see instructions)	2,870,926	2,814,1	L75	
Z	31	Total liabilities and net assets/fund balances (see			1	
┙		instructions)	2,959,757	2,903,0	06	
	Part II	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 (mus	st agree with			
	end-o	f-year figure reported on prior year's return)			1	2,870,926
2	Enter	amount from Part I, line 27a			2	-56,751
3	Other	increases not included in line 2 (itemize) ▶		L	3	
4	Add lı	nes 1, 2, and 3		Ĺ	4	2,814,175
		ases not included in line 2 (itemize) ▶			5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30		6	2,814,175

	and Losses for Tax on Inves			33-2001334	<u> </u>		Page 、
(a) List and descr 2-story brick	(b) How acquired P - Purchase D - Donation	(c) Date ad (mo , day		(d) Date sold (mo , day, yr)			
1a N/A							
b							
C							
d							
e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or plus exper			(h) Gain (((e) plus (f)	
a							
b							
С							
d							
e							
Complete only for assets show	ving gain in column (h) and owned by	the foundation o	n 12/31/6	9	(f)	Gains (Col. (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess				ess than -0-) or
a							
b							
C							
d							
e							
2 Capital gain net income or (ne	t capital loss) If gain, also ent	er in Part I, line 0- in Part I, line	•		2		
• •	(loss) as defined in sections 1222(5) as 8, column (c) See instructions If (los	• •	٦			-	
Part I, line 8	, ,				3		
Part V Qualification	Under Section 4940(e) for Re	duced Tax o	n Net i	nvestment inco	me		
	ate foundations subject to the section	4940(a) tax on r	iet investr	ment income)	_		
If section 4940(d)(2) applies, leave				10			
	ection 4942 tax on the distributable an ualify under section 4940(e). Do not co			ase period?			Yes X No
1 Enter the appropriate amount	in each column for each year, see the	instructions before	ore makin	ig any entries			
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distrib	utions	Net value	(c) of noncharitable-use asset	ts		(d) bution ratio vided by col (c))
2016	1	20,064		2,249,256			0.053379
2015		12,166	·	2,250,			0.049833
2014		24,588		2,253,			0.055278
2013		22,934		1,858,			0.066162
2012		19,228		2,467,			0.048314
2 Total of line 1, column (d)					2		0.272966
	ne 5-year base period – divide the tota	on line 2 by 5 C	or by the	e			
•	n has been in existence if less than 5	*	, ,		3		0.054593
4 Enter the net value of nonchar	itable-use assets for 2017 from Part X	, line 5			4		2,961,418
5 Multiply line 4 by line 3					5		161,673
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)				_6		1,110
7 Add lines 5 and 6					7		162,783
8 Enter qualifying distributions fr	om Part XII, line 4				8		162,746
If line 8 is equal to or greater the	han line 7, check the box in Part VI, lin	e 1b, and comp	lete that p	oart using a 1% tax r	ate See the	•	

Part VI instructions

	990-PF (2017) MCCOMB FAMILY FOUNDATION, INC	<u>35-2001354</u>					Page 4
<u>P</u>	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruct	ons)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N/A" on line 1	71				
	Date of ruling or determination letter (attach copy of letter if neces	ssary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		▶	1		2	,220
	here ▶ ☐ and enter 1% of Part I, line 27b		1 [
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter	4% of		1			
	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	J. J	F	3		2	,220
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only,	others enter -0-)	ŀ	4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	others, enter -o-)	<u> </u>	5			, 220
			r				, 220
6	Credits/Payments	c-	- 1				
а		6a					
b	Fggg	6b					
С		6c					
d	Backup withholding erroneously withheld	6d					
7	Total credits and payments Add lines 6a through 6d			7			
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is att	ached	<u> </u>	8			<u>23</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ ↓	9		2_	243
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	t	> [10			
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶	Refunded	▶	11			
Pa	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local leg	gislation or did it				Yes	No.
	participate or intervene in any political campaign?				18		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	oses? See the					
	Instructions for the definition Instructions for the definition						
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	s of any materials					
	published or distributed by the foundation in connection with the activities	or any materials					
_					10		Х
C	Did the foundation file Form 1120-POL for this year?				'		
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the						
	(1) On the foundation > \$ (2) On foundation managers			-			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expen	diture tax imposed			- 1		
	on foundation managers > \$						
2	Has the foundation engaged in any activities that have not previously been reported to the	e 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	g instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of	of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ear?			48		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/	'A 41	,	T
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 mandat	on directions that					
		ory directions that			6	X	
7	conflict with the state law remain in the governing instrument?	malete Dert II. eel. (e). en	d Dod	V\/	7	-	+
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co		u Pait	^v	<u> </u>	1^	-
8a	Enter the states to which the foundation reports or with which it is registered. See instruct	ions P			ŀ		
	IN	A					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the					1	
	(or designate) of each state as required by General Instruction G? If "No," attach explanate				81	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of s	• • •					
	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	\bot	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a so	chedule listing their				1	
	names and addresses	-			10	1	X
							F (2017)
							- ()/

Pa	art VII-A Statements Regarding Activities (continued)					
					Yes	No
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		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	Х	
	Website address ► N/A					
14	The books are in care of ▶ DAVID MCCOMB Telephone r	no 🕨	260-2	47-	220	6
	9077 STELLHORN CROSSING PARKWAY					
	Located at ▶ FORT WAYNE IN ZIP	+4 ▶	46815	,		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here				1	▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	▶ <u>1</u>	5	_		
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
	the foreign country					<u>.</u>
Pa	art 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.				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?	es es	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?	es es	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	es es	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es es	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)?	'es	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)	es :	X No			
b	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		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				- 1	
	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?	'es	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
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		,		j	
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		===			
	· · · · · · · · · · · · · · · · · · ·	'es	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		- /-		}	
	foundation had excess business holdings in 2017)		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				ŀ	37
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?			4b	<u> </u>	<u>X</u> _
			F/	orm 99	ひととと	(2017)

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P	irt VII-B Statements Regarding Activities for Which Forn	n 4720 May Be F	Required (cont	tinued)		
5a	During the year did the foundation pay or incur any amount to					
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?		res X No		
	(2) Influence the outcome of any specific public election (see section 4955),	or to carry on,	_			
	directly or indirectly, any voter registration drive?		\	∕es X No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes	?		res 🗓 No		
	(4) Provide a grant to an organization other than a charitable, etc., organization	on described in	_			
	section 4945(d)(4)(A)? See instructions			res X No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational	_			
	purposes, or for the prevention of cruelty to children or animals?			/es X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the exceptions of	lescribed in			
	Regulations section 53 4945 or in a current notice regarding disaster assistan	ce? See instructions		N/A	5b	
	Organizations relying on a current notice regarding disaster assistance, check			▶ 🗍		
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption					
	because it maintained expenditure responsibility for the grant?		N/A 🗌 ነ	res No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)					
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums				
	on a personal benefit contract?			res X No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit cont	ract?		6b	X
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		res X No		
	If "Yes," did the foundation receive any proceeds or have any net income attri		ction?	_N/A	7b	
	irt VIII Information About Officers, Directors, Trustees, F			Paid Employ	ees,	
	and Contractors				•	
1 1	ist all officers, directors, trustees, and foundation managers and their co	mpensation. See in:	structions.			
		(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name and address	hours per week	(If not paid,	employee benefit plans and deferred		ense account, allowances
_		devoted to position	enter -0-)	compensation		
N/	A					
_						
			l :			
2	Compensation of five highest-paid employees (other than those included	d on line 1 – see ins	tructions). If non	e, enter		
	"NONE."					
		(b) Title, and average		(d) Contributions to		
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		ense account, allowances
		devoted to position	[compensation	Ounce	anowances
NC	NE					
			[
						
				•		
			<u> </u>			
			(1	
					 	
				· · · · · · · · · · · · · · · · · · ·	†	
Tota	number of other employees hald over \$50,000		<u> </u>	<u> </u>		

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Part VIII Information	on About Officers, Directors, Trustees, Found		
	ractors (continued)	rationa If name outer (INONE "	
	pendent contractors for professional services. See instru Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	taine and address of each person paid more than \$50,000	(b) Type of Service	(c) Compensation
		į	
·			
Total number of others receiving	g over \$50,000 for professional services		
Part IX-A Summar	y of Direct Charitable Activities		
	charitable activities during the tax year. Include relevant statistical information st erved, conferences convened, research papers produced, etc.	uch as the number of	Expenses
1 N/A			
2			
3			
4			
			Ì
Part IX-B Summar	y of Program-Related Investments (see instru	ctions)	<u>-</u>
	ed investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
			
All other program-related investments	See instructions		
y			1

Total. Add lines 1 through 3

Part XII Qualifying Distributions (see instructions)

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

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,

Deduction from distributable amount (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes]	
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	162,746
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		
а	Suitability test (prior IRS approval required)	3a	
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	162,746
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_	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	162,746
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foun	dation	

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145,851

145,851

5

6

5

6

7

line 1

Add lines 3 and 4

Excess from 2015 Excess from 2016 Excess from 2017

SEE STATEMENT 11

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Purpose of grant or status of Amount contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 12 160,046 Total **▶** 3a 160,046 **b** Approved for future payment N/A ▶ 3b Total

1	Part XVI-A	Analysis of Income-Producing Act	ivities		_		
		ounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program ser	rvice revenue					(See instructions)
	a						
					ļ		
	c		 				 _
					 		
	e		<u> </u>				
	T	d			 		·
_		d contracts from government agencies					
		dues and assessments savings and temporary cash investments			14	66,359	
		nd interest from securities	<u> </u>		14	61,871	
		come or (loss) from real estate			1 1	31,0,1	
•		anced property					
		t-financed property	ļ		1		
6		come or (loss) from personal property	<u> </u>				
		ment income			<u> </u>		
8	Gain or (loss	s) from sales of assets other than inventory					-6,174
		or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory					
11	Other reven	ue a					
				·	<u> </u>		
	d				ļ		
	e				<u> </u>		
		d columns (b), (d), and (e)	L	c)	128,230	
		ne 12, columns (b), (d), and (e)				13	122,056
		in line 13 instructions to verify calculations)					
	art XVI-B	Relationship of Activities to the Ac					
	Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo					one)
	N/A	accomplishment of the foundation's exempt purpo	ses (other than	by providing rands to	Judit pe	arpeaca) (eee manuem	5113 /
_	11/11					 	
							
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Form	990-PF (20	17) MCCOMB F	'AMILY	FOUNDATIO	N, INC		2001354		_ Pa	ge 1
Pai	rt XVII	Information Reg		ansfers To an	d Transactio	ns and Relati	onships With N	loncharitable		
		Exempt Organiz							1	
		anization directly or in			_		described		Yes	No
		501(c) (other than sec	tion 501(c)(3)	organizations) or	r in section 527, re	elating to political				
	organizatio									
	(1) Cash	rom the reporting foun	idation to a no	oncharitable exem	ipt organization of			1a(1)		v
	(1) Casii (2) Other a	recate						1a(1)	\vdash	X
	Other trans							14(2)		
		of assets to a nonchar	itahle evemnt	organization				1b(1)		X
		ses of assets from a r	=	-	ion			1b(2)		X
		of facilities, equipmen						1b(3)		X
		ursement arrangemen						1b(4)		Х
		or loan guarantees						1b(5)		X
		nance of services or m	nembership o	r fundraising solic	itations			1b(6)		X
		facilities, equipment, n						1c		X
d	If the answ	er to any of the above	ıs "Yes," com	plete the following	g schedule Colun	nn (b) should alw	ays show the fair m	arket		-
		e goods, other assets,		-	-					
	value in an i) Line no	y transaction or sharin (b) Amount involved		nt, show in columi e of noncharitable exem				received tions, and sharing arrangeme	ents	
$\frac{\sqrt{A}}{N/A}$		(2,7 11102111111111111111111111111111111111	(0)		,pr organization	(4, 2				
	<u> </u>						·			
					 					
				-						
										
		 	 							
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		ļ	 							
										
										
		dation directly or indire				exempt organizat	.ions		es X	No
		n section 501(c) (othei mplete the following so		501(C)(S)) OF III S	ection 527?			' '	75 <u>A</u>] 140
		a) Name of organization	Ciledule	(b) Type of o	prognization		(c) Description of	f relationship		
N	/A							<u></u>		
	<i></i>									
			<u>.</u> .							
		naities of perjury, I declare to and complete. Declaration of						owledge and belief, it is true),	
		and complete Declaration of	preparer (other t	ilaii (axpayer) is basec	on all illionnation of the	mon preparer rias any	Kilowicage	May the IRS discuss this re		
Sign		ALI	1 .	a				with the preparer shown be See instructions		- No
Here		MALA	below	L)	15	10/10				
		A) V			<u> </u>	5/10_	DIRECT	OR		
	 -	ature of officer or trustee			Date		Title			
	Print/T	ype preparer's name			Preparer's signature			Date	Check	L of
Paid	NA 10 12	T ANDODED	CIDA		1 M/	1(M	1	04/26/10	self-em	ployed
Prepa	rer MARK	J. ANDORFER,	CPA	ANDODEED	r 00 7		 	04/26/18	7500	 -

LEONARD J. ANDORFER & CO.

FORT WAYNE, IN 46802-2311

110 W BERRY STREET, STE 2202

P00017582

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Federal Statements

431600 MCCOMB FAMILY FOUNDATION, INC 35-2001354 FYE: 12/31/2017 Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

000	Dogoription		How				
	וואלווי		ובכבוגבת				
Whom	Date	Date	Sale				Net
Sold	Acquired	Sold	Price	Cost	Expense	Depreciation	Gain / Loss
GRANT COUNTY WA 5.19%	(40K)		PURCHASE			ļ !	
	60/90/2	1/01/17 \$	40,000 \$	41,015 \$		₩	\$ -1,015
CONNECTICUT STATE 5.46% (45K)	5% (45K)		PURCHASE				
	6/07/11	3/01/17	2,000	2,000			
KY ASSET/LIAB 4.372% (35K)	(35K)		PURCHASE				
	3/02/11	4/01/17	35,000	35,538			-538
ATLANTA GA URB 5.658% (35K)	(35K)		PURCHASE				
	12/01/10	6/28/17	35,000	35,645			-645
PITTSBURGH PA W 6.36% (25K)	(25K)		PURCHASE				
	6/13/11	9/01/17	25,000	28,778			-3,778
VA ST RES AUTH IN 3.8% (45K)	% (45K)		PURCHASE				•
	6/03/11 11/01/17	11/01/17	2,000	2,000			
OKANOGAN CNTY PU 5.46% (15K)	% (15K)		PURCHASE				
	1/08/07 12/01/17	12/01/17	5,000	5,198			-198
TOTAL		₩.	150,000 \$	156,174 \$	0	\$	\$ -6,174

Charitable Purpose	\$ 1,000
Adjusted Net	w w
Net Investment	w w
Total	\$ 1,000
Description	LEGAL FEES TOTAL

Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees

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Federal Statements 431600 MCCOMB FAMILY FOUNDATION, INC

35-2001354 FYE: 12/31/2017

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	Charitable Purpose	\$ 1,700	\$ 1,700
nting Fees	Adjusted Net	₩.	\$
- Form 990-PF, Part I, Line 16b - Accounting Fees	Net Investment	w	w.
Statement 3 - Form 990-PF, Pa	Total	\$ 1,700	\$ 1,700
State	Description	TAX PREPARATION	TOTAL

	Charitable Purpose	w	\$
fessional Fees	Adjusted Net	w	\$
le 16c - Other Pro	Net Investment	17,208	17,208
Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees	Total	17,208 \$ 1,500 519	19,227
Statement 4 - Fo	Description	INVESTMENT FEES DESIGN SERVICES MISC EXPENSE	TOTAL

<u>str</u>	Fair Market Value	\$ 1,531,415 \$ 1,531,415
ment Investmen	Basis of Valuation	COST
US and State Govern	End of Year	\$ 1,575,389
990-PF, Part II, Line 10a - US and State Government Investment	Beginning of Year	\$ 1,155,169 \$ 1,155,169
Statement 5 - Form 990	Description	MUNICIPAL BONDS TOTAL

	Fair Market Value	\$ 10,040	\$ 10,040
Investments	Basis of Valuation	COST	
-PF, Part II, Line 10c - Corporate Bond Investmen	End of Year	9,880	9,880
)C - C		₩	φ
, Part II, Line	eginning of Year	9,880	9,880
990-PF	ag o	₩.	\$\trace{\pi}{2}
Statement 6 - Form	Description	10 M BEAR STREARNS CO	TOTAL

431600 MCCOMB FAMILY FOUNDATION, INC 35-2001354 FYE: 12/31/2017

Federal Statements

Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments

4/26/2018 8:51 AM

431600 MCCOMB FAMILY FOUNDATION, INC

35-2001354

Federal Statements

FYE: 12/31/2017

Statement 8 - Form 990-PF, Part II, Line 19 - Deferred Revenue

Description	B	End of Year					
FORETHOUGHT STOCK GAIN	\$	88,831	\$	88,831			
TOTAL	\$	88,831	\$	88,831			

Statement 9 - Form 990-PF, Part XV, Line 2a - Name, Address and Email for Applications

Description

DAVID MCCOMB 260-247-2203 9077 STELLHORN CROSSING PARKWAY FORT WAYNE IN 46815 DAVE@MCCOMBNET.COM

Statement 10 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

NAME AND ADDRESS OF ORGANIZATION AND A COPY OF THE MOST RECENT FINANCIAL STATEMENTS OR 990

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

SEPTEMBER 30 OF EACH YEAR

Statement 11 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

GRANTS ARE LIMITED TO \$ 10,000 PER ORGANIZATION UNLESS OTHER CIRCUMSTANCES MERIT FURTHER CONSIDERATION

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431600 MCCOMB FAMILY FOUNDATION, INC 35-2001354 FYE: 12/31/2017

Federal Statements

tement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year
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	Amount		1,500	21,500		2,500		45		16,350	100		15,000		1,000		1,000		5,000	•	2,800		246		2,750		500		1,500		500		1,200	
	Purpose																																	
		10	OPERATING	OPERATING		OPERATING		OPERATING	SK Oppragnation	OFERALLING	OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING	
Address	Status	PIKE, SUITE	PUBLIC	PUBLIC	ST	PUBLIC	WAYNE ST		WASHINGTON CENTER	FUBLIC BALME TRI	PUBLIC	FON ST	PUBLIC	STATE ST	PUBLIC	EAST DUPONT ROAD	PUBLIC	FAIRFIELD AVENUE	PUBLIC	L DRIVE	PUBLIC	ILL ROAD	PUBLIC	ST			PUBLIC	AVENUE OF AUTOS	PUBLIC	ELI LILY ROAD	PUBLIC	ATER ROAD	PUBLIC	
A	Relationship	E E 992 MANTUA	8315 W		300 E MAIN ST		1600 S WAY	I	1300 E.	NONE 2939 TA BA		915 S CLINTON ST	NONE	7400 E STA	NONE	4616 EAST	NONE	2609 FAIRF	NONE	IAN 6316 MUTUAL DRIVE	NONE	5200 OLD MILL ROAD	NONE	303 E MAIN ST	NONE	323 W BAKER	NONE	633	田	7005	۲٠٦	NA 4919 COLDWATER ROAD	NONE	
Name	Address	AMERICAN BOARD OF FUNERAL SERVICE E	WOODBURY HEIGHTS NJ 08097 NONE ANTHONY WAYNE AREA COINCIL		ARTLINK		AUBURN CORD DUESENBERG MUSEUM	9	BISHOP DWENGER HIGH SCHOOL				FORT WAYNE IN 46802	BLACKHAWK CHRISTIAN SCHOOLS	FORT WAYNE IN 46815	BOOMERANG BACKPACKS	FORT WAYNE IN 46825	BOYS AND GIRLS CLUB	FORT WAYNE IN 46807	OF NORTHEAST IN	IN 46825	CAV - THE TEMPLE	NE IN 46807		1 46802	COME2GO MINISTRIES	IN 46802	DISCIPLESHIP AND STEWARDSHIP NETWOR	FORT WAYNE IN 46804	DR. SUSAN LOVE RESEARCH FOUNDATION	•		FORT WAYNE IN 46825	

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Federal Statements

431600 MCCOMB FAMILY FOUNDATION, INC 35-2001354 FYE: 12/31/2017

	Amount	6.500		2,500		100	1,500		001	2,500		100		250		500		500		1,000	•	000'9	000	007,0	200		1,000	•	1,000	1,200	
	Purpose																														
ļ		OPERATING		OPERATING	NG	OPERATING	OPERATING	ODFRATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING		OPERATING	OPERATING		OPERATING		OPERATING		OFEKALING BO	OPERATING	
Address	Status	CA PARK DRIVE PUBLIC	ERMAN BLVD	PUBLI(14	PUBLIC ST	PUBLIC	TSTON DR	CLINTON ST	PUBLIC	LLINOIS ST	PUBLIC	TEAD ROAD	PUBLIC	21	PUBLIC	T MARYLAND ST	PUBLIC	STREET	PUBLIC	LINCOLN HIGHWAY	PUBLIC	TABLIL ROAD	R		EFFERSON BLVD	PUBLIC	AVE	FUBLIC NW SUITE 170	PUBLIC	
	Relationship	5670 YM	3411 SH		16335 LIMA	NONE 2135 HANNA	压	NONE DIRECTOR DE	1200 S		525 N ILL)	NONE	4310 HOMESTEAD ROAD	NONE	P.O. BOX	NONE	147 EAST N	NONE	100 DAME S	NONE	FOUNDA 207 W LING	NONE	פ	13527 LEO		413 E J	NONE	3327 LAKE	NOME 2100 M ST	ľ	
Name	Address	ERIN'S HOUSE FOR GRIEVING CHILDREN FORT WAYNE IN 46835 NON	CHILDREN'S ZOO	FORT WAYNE IN 46808	STARS SPORTS ACADEMY	FORT WAYNE IN 46748 FORT WAYNE URBAN LEAGUE	FORT WAYNE IN 46803	FRIEND MOBILE MANNOG WAYNE IN 46845		302	GRAND LODGE OF INDIANA		HOMESTEAD HS RUBE GOLDBERG CLUB	46814		HUNTERTOWN IN 46748		IAPOLIS IN 46204	INLAND SEAS	49682	APMAN	NEW HAVEN IN 46774	LEO IN 46765	ST CHURCH	10	į,	FORT WAYNE IN 46802	NAMIL FORT WAYNE IN ACODE	X FOUNDATION	DC 20037	

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Federal Statements 431600 MCCOMB FAMILY FOUNDATION, INC

FYE: 12/31/2017 35-2001354

Statement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

VESS Relationship Status Purpose Amount NAP 2.13 SOUTH GOILVILE STREET PUBLIC OPERATING 2, HOOD ASSCITATION PO BX 53.94 PUBLIC OPERATING 2, HOOD ASSCITATION 10622 PARKVIEW PLAZA DR OPERATING 2, HOOD ASSCITATION 11910 SHEARMYER RUN OPERATING 2, CHURCH NONE PUBLIC OPERATING 5, CHURCH NONE PUBLIC OPERATING 5, LENT ASSCITATION 110 WEST BERRY ST SUITE OPERATING 5, LENT ASSCITATION 110 WEST BERRY ST SUITE OPERATING 1, 146802 NONE 1212 OLLADALE BRAYD OPERATING 5, AGUE NONE PUBLIC OPERATING 9 146808 NONE PUBLIC OPERATING 1, 146808 NONE PUBLIC OPERATING 1, 146808 NONE PUBLIC OPERATING 1, 146808 NONE PUB	Name	Addres			
2113 SOUTH OGILVIE STREET	Address	Relationship Status		urpose	Amount
PO BOX 5394	46802	2113 SOUTH OGILVIE STREET PUBLIC	RATING		800
10622 PARKVIEW PLAZA DR PUBLIC PU	IGHBORHOOD ASSOCIATI	PO BOX 5394 E	RATING		2,500
E		10622 PARKVIEW PLAZA DR			
## PUBLIC OPERATING ### PUBLIC		PUBLIC 11910 SHEARWATER RUN	RATING		130
E	NE IN 46845	PUBLIC 878 SOUTH 300 EAST	RATING		250
## STORY TO THE CONTRIBUTION OF THE CONTRIBUTI	N IN 46017 BENEVOLENT ASSOCIATI	E PUBLIC 110 WEST RERRY ST STITTE	RATING		2,000
NONE	FORT WAYNE IN 46802	E PUBLIC COLL	RATING		200
NONE	703	450 LANE 100 LAKE JAMES PITELIC	RATING		2000
NONE	田	2121 OLLADALE DRIVE			
NONE 410 EXECUTIVE BLVD NONE 4310 HOMESTEAD ROAD NONE PUBLIC OPERATING FOUNDATIO 4800 W GATES PASS RD NONE PUBLIC OPERATING FOUNDATIO 4800 W GATES PASS RD NONE PUBLIC OPERATING 1950 W. MAIN ST NONE PUBLIC OPERATING 3901 ABBOTT ST NONE PUBLIC OPERATING 38124 GOSHAWK LANE NONE PUBLIC OPERATING B 724 GOSHAWK LANE NONE PUBLIC OPERATING B MARTIN LUTHER DRIVE NONE PUBLIC OPERATING	E IN 46808	PUBLIC 46189 E STATE RIVID SHITE	RATING		1,000
MONE WONE PUBLIC A310 HOMESTEAD ROAD NONE PUBLIC BOUNDATIO 4800 W GATES PASS RD NONE FOUNDATIO 4800 W GATES PASS RD NONE NONE 1950 W. MAIN ST NONE 1950 N CLINTON ST NONE 3901 ABBOTT ST NONE NONE H 8724 GOSHAWK LANE NONE NONE ROBERATING HOBLIC OPERATING S MARTIN LUTHER DRIVE NONE ROBERATING S MARTIN LUTHER DRIVE NONE NONE ROBERATING S MARTIN LUTHER DRIVE NONE	1 46815	PUBLIC	RATING		250
NONE PUBLIC OPERATING 4310 HOMESTEAD ROAD NONE PUBLIC PUBLIC PUBLIC OPERATING FOUNDATIO 4800 W GATES PASS RD NONE FOUNDATIO 4800 W GATES PASS RD NONE 1950 W. MAIN ST NONE 1950 N CLINTON ST NONE 3901 ABBOTT ST NONE RAPATING 3801 ABBOTT ST NONE RAPATING 8724 GOSHAWK LANE NONE ROBERATING 8 MARTIN LUTHER DRIVE NONE ROBERATING 9 PUBLIC OPERATING 8 PUBLIC OPERATING 2,		4410 EXECUTIVE BLVD			
NONE PUBLIC OPERATING FOUNDATIO 4800 W GATES PASS RD NONE PUBLIC OPERATING 500 W. MAIN ST NONE PUBLIC OPERATING 1950 N CLINTON ST NONE PUBLIC OPERATING 3901 ABBOTT ST NONE PUBLIC OPERATING H 8724 GOSHAWK LANE NONE PUBLIC OPERATING 8 MARTIN LUTHER DRIVE NONE PUBLIC OPERATING 2,	46808	PUBLIC 1919	RATING		125
FOUNDATIO 4800 W GATES PASS RD NONE 500 W. MAIN ST NONE 1950 N CLINTON ST NONE PUBLIC OPERATING 3901 ABBOTT ST NONE NONE R 724 GOSHAWK LANE NONE NONE R MARTIN LUTHER DRIVE NONE NONE PUBLIC OPERATING 2, 2,		4310 HOMESTEAD ROAD PUBLIC	RATING		250
# 85745 NONE PUBLIC OPERATING 2, 200 W. MAIN ST 1950 W. CLINTON ST 1950 N CLINTON ST 3901 ABBOTT ST 200 PERATING B724 GOSHAWK LANE PUBLIC OPERATING B724 GOSHAWK LANE PUBLIC OPERATING B724 GOSHAWK LANE PUBLIC OPERATING B724 GOSHAWK LANE B724 GOSHA	FOUND	4800 W GATES PASS RD			
IN 46802 NONE 1950 N CLINTON ST 1950 N CLINTON ST 3901 ABBOTT ST 2301 ABBOTT ST PUBLIC OPERATING ERAN CHRUCH 8724 GOSHAWK LANE PUBLIC OPERATING 8724 GOSHAWK LANE PUBLIC OPERATING 8 MARTIN LUTHER DRIVE 8 MARTIN LUTHER DRIVE 2, 2, 2, 2, 2, 3, 3, 46825 NONE PUBLIC OPERATING 2, 2, 2, 3, 46825 NONE PUBLIC OPERATING 2,	85745	PUBLIC SOO W MATN ST	RATING		2,500
IN 46805 NONE PUBLIC 3901 ABBOTT ST SIN 46806 NONE R724 GOSHAWK LANE SIN 46825 NONE RARTIN LUTHER DRIVE 2, 2, 2, 2, 3, 3, 2, 3, 2, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,	IN 46802	PUBLIC	RATING		1,200
IE IN 46805 NONE PUBLIC OPERATING 3901 ABBOTT ST	RAL	z			•
IE IN 46806 NONE PUBLIC OPERATING HERAN CHRUCH 8724 GOSHAWK LANE IE IN 46825 NONE PUBLIC OPERATING 8 MARTIN LUTHER DRIVE IE IN 46825 NONE PUBLIC OPERATING	IE IN 46805	PUBLIC	RATING		200
CHRUCH 8724 GOSHAWK LANE 46825 NONE PUBLIC OPERATING 8 MARTIN LUTHER DRIVE 46825 NONE PUBLIC OPERATING	IE IN 46806	PUBLIC	RATING		100
46825 NONE PUBLIC OPERATING 8 MARTIN LUTHER DRIVE 46825 NONE PUBLIC OPERATING	CHRUCH	8724 GOSHAWK LANE			
8 MARTIN LUTHER DRIVE IN 46825 NONE PUBLIC OPERATING	46825	PUBLIC	RATING		150
	46825	8 MARTIN LUTHER DRIVE PUBLIC	RATING		2,500

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Federal Statements

431600 MCCOMB FAMILY FOUNDATION, INC 35-2001354 FYE: 12/31/2017

Statement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Ado	Address	ı		
Address	Relationship	Status		Purpose	Amount
STEUBEN COUNTY CANCER ASSOCIATION P.O. BOX	110N P.O. BOX 28				
ANGOLA IN 46703	NONE	PUBLIC	OPERATING		200
THE CHAPEL	2505 W HAMILTON ROAD	TON ROAD S			
FORT WAYNE IN 46814	NONE	PUBLIC	OPERATING		5,000
VERA BRADLEY FOUNDATION	12420 STONEBRIDGE RD	RIDGE RD			
ROANOKE IN 46783	NONE	PUBLIC	OPERATING		1,100
VINCENT VILLAGE	2827 HOLTON AVE	AVE			
FORT WAYNE IN 46806	NONE	PUBLIC	OPERATING		1,000
WBCL	1115 W RUDISILL BLVD	ILL BLVD			,
FORT WAYNE IN 46807	NONE	PUBLIC	OPERATING		2,500
WOUNDED WARRIOR FOUNDATION	1120 G ST NW	-			
WASHINGTON DC 20005	NONE	PUBLIC	OPERATING		25,000
WREATHS ACROSS AMERICA	8935 GREENLEAF DRIVE	AF DRIVE			
FORT WAYNE IN 46819	NONE	PUBLIC	OPERATING	'	250
TOTAL				II	160,046

<u>(10)</u>

Totals

31600 04/2	26/2018 8 51 AM					
L	990-PF	Ot	her Notes and	Loans Receiv	/able	2017
rom,	, 330-1 1	For calendar year 2017,	or tax vear beginning		, and ending	2017
Name						Employer Identification Number
		Y FOUNDATION,	INC			25-2001254
All	: DAVID MO	CCOMB				35-2001354
FOR	M 990-PF,	PART II, LINE	7 - ADDITI	ONAL INFORM	MATION	
						(5.)
(1) F	ORETHOUGH	Name of borrower CONTRACT REC		+	Relationship to disqu	Jailfied person
(2)						
(3)						
<u>(4)</u>			·	- 		
(5) (6)		-	 			······································
(7)						
(8)						
(9)						
(10)	······································	······································	······································		······································	
<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Original amount	Date of loan	Maturity date		Repayment terms	Interest rate
(1)						
(2)				ļ		
(3)				 		
(4) (5)			 	 		_
(6)			 			
(7)			<u> </u>			
(8)						
(9)			 	 		-
(10)			1			
					_	
	Sec	curity provided by borrower			Purpose of	loan
(1)						
(2) (3)				 		
(4)			 	 		
(5)						
(6)				<u> </u>		
(7)						
(8) (9)						
(10)						
	Considera	ation furnished by lender		Balance due at beginning of year	Balance due at end of year	
(1) (2)				173,328	173,3	28 173,328
(3)				·····	 	
(4)						
(5)						
(6)					ļ	
(7) (8)						
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