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

► Go to www.irs.gov/Form990PFfor instructions and the latest information. Open to Public Inspection

Department of the Treasury Internal Revenue Service

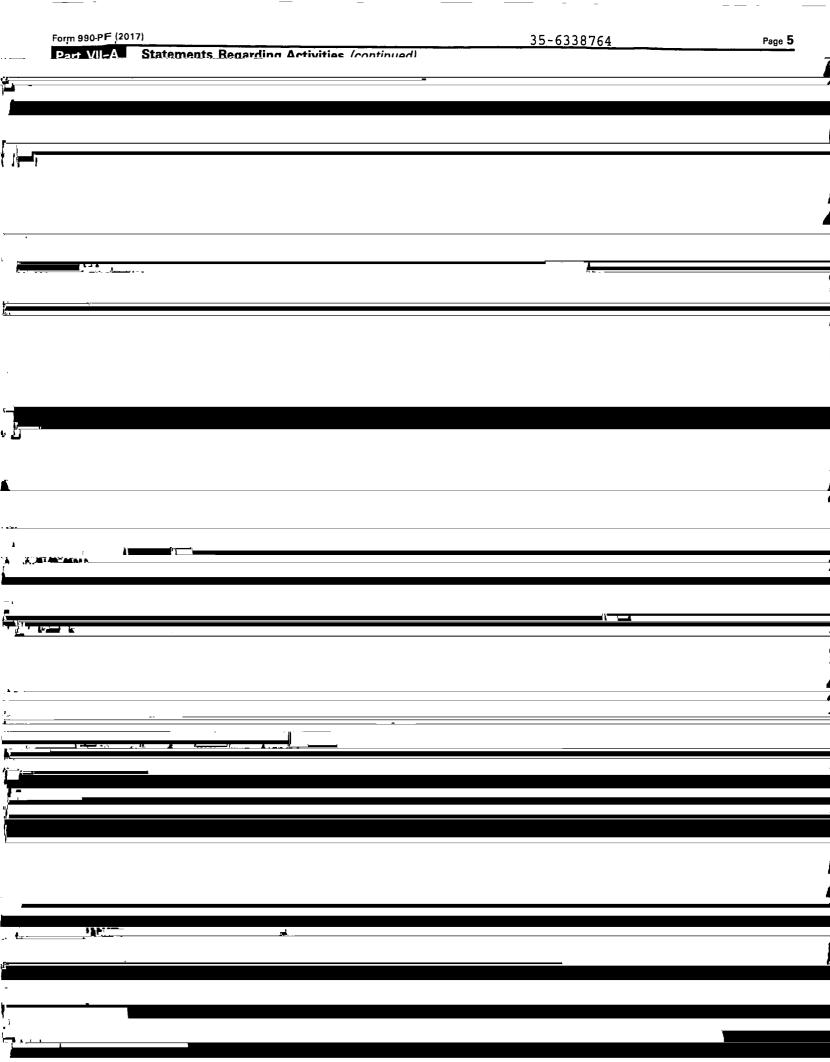
▶ Do not enter social security numbers on this form as it may be made public.

i	For	cale	endar year 2017 or tax year beginning			, 2017,	and end	ing		, 20
•			of forundation JACOB, LILLIAN & NA	THAN FRANK	SCH	OLARSHIP		A	Employer identific	cation number
	FΙ	INI	310125018						35-	6338764
•	Nur	nbe	r and street (or PO box number if mail is not delivered	to street address)			Room/suit	e B	Telephone numbe	
						RECEI	1	 -		
	PC	<u> </u>	30X 207			112021	120		81	2-464-1584
			NSVILLE, IN 47702 ck all that apply: Initial return		20	MAY 1 8	2010	၁၂၀	If exemption applicat pending, check here,	
	_E/	<u>IAN</u>	NSVILLE, IN 47702		`			ال		
35	G C	hec	ck all that apply: Initial return	Initial re	turn	of a former-p	ublic-cha	r <u>itý</u> c	1. Foreign organizati	ons, check here 🕨 🔙
			· · · · · · · · · · · · · · · · ·			<u>MGDEN</u>	, UT		2 Foreign organizati 85% test, check he	
			Address change	Name ch			4.4		computation .	
MAY AY	H C	_	ck type of organization: X Section 501((E	If private foundation	status was terminated
~	⊥_		ecti on 4947(a)(1) nonexempt charitable trust			vate foundat		1 1	under section 507(b)	(1)(A), check here
(A)			· · · · · · · · · · · · · · · · · · ·	unting method:	X C	ash Acc	ruai	F		a 60-month termination
			· · · · · · · · · · · · · · · · · · ·	ther (specify)					under section 507(b)	(1)(B), check here .
2019			100/3251	column (d) must be	on ca	sn basis.)	1			(d) Disbursements
30	Pa	T.U	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	d	(b) Net inve incom		(c)	Adjusted net income	for charitable purposes (cash basis only)
\mathbb{A}^{2}	$\neg \top$	1	Corntributions, gifts, grants, etc., received (attach schedule)							
W.	? .	2	Check ► X if the foundation is not required to attach Sch B							
64	r		Interest on savings and temporary cash investments.							
•		4	Dividends and interest from securities	8,2	90.		<u>8,346.</u>			
	ŀ	5a	Gross rents							
_		b	Net rental income or (loss)							-
0107 # <i>9</i>	Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 234,786	53,4	06.					· · · · · · · · · · · · · · · · · · ·
†	Ne.	7	assets on line 6a	,		5	3,406.			
8	æ	8	Net short-term capital gain							-
_		9	Income modifications							
֡֝֜֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֓֓֡֓֓֡	1		Gross sales less returns and allowances							
いことがあれている			Less: Cost of goods sold							
		1	Other income (attach schedule)		55.					
	- 1	2	Total, Add lines 1 through 11	61,9		6	1,752.			
2	-	3	Compensation of officers, directors, trustees, etc.	5,6			1,080.			4,525.
20			Other employee salaries and wages				NONE		NONE	
	SU 1	5	Pension plans, employee benefits				NONE		NONE	
	3 1		Legal fees (attach schedule)							
	Ū,		Accounting fees (attach schedule) STMT 1	9	36.		NONE		NONE	936.
	į		Other professional fees (attach schedule)							
	Administrative Expenses	7	Interest							
	<u>iş</u>] 1	8	Taxes (attach schedule) (see instructions). 2.		70.		70.			·,
	힐	9	Depreciation (attach schedule) and depletion.							
		0	Occupancy							
		1	Travel, conferences, and meetings				NONE		NONE	
	and 2	2	Printing and publications				NONE		NONE	
	[2	23	Other expenses (attach schedule)							
	ia z	.4	Total operating and administrative expenses.							5 463
	Derating		Add lines 13 through 23		12.		1,150.		NONE	<u>5,461</u> .
	1	<u>-</u>	Captributions aifte arante naid .	15. 0	101.	l				15,001.



Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) 1 Cash - non-interest-bearing	Page 2			
	s description column should be for end-of-year	Beginning of year	End	
	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
				
2 Savings and tempora 3 Accounts receivable	ry cash investments			
Less: allowance for de	▶oubtful accounts ▶			
4 Pledges receivable ▶	•			
Less: allowance for de	oubtful accounts			
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A CONTRACTOR OF THE PARTY OF TH				
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A				
16 At any time during o	calendar year 2017, did the foundation	have an interest in	a cianatura an athan	authority Yes No
over a bank, securities, o	or other financial account in a foreign country	nave an interest in or	a Signature or other	
See the instructions	for exceptions and filing requirements	for FinCEN Form 114.	If "Yes," enter the	name of
the foreign country				
Part VII-B Statemen	ts Regarding Activities for Which F	orm 4720 May Be F	Required	

	Form 990	0-PF (20	017) 35-633	8764		Page 4
	Part \	۷I	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	10(e), or 4	1948 - se	e instructions)
			operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		′	
			uling or determination letter (attach copy of letter if necessary - see instruc			
	b Do	omesti	ic foundations that meet the section 4940(e) requirements in Part V, check	>	1	1,212.
	he	ere 🕨	and enter 1% of Part I, line 27b	[]		
			er domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 45	% of 丿 │		
	Pa	art I, lin	ne 12, col. (b).			
	2 Ta	ax und	der section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, ϵ	enter -0-)	2	NONE
			es 1 and 2		3	1,212.
			A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, e	enter -0-)	4	NONE
· .			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_	1	รี กาก
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STATEMENT 5

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3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE.	11
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE		NONE
ONE		NONE
		·····
otal	number of others receiving over \$50,000 for professional services	NONE
art	IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of nizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N</u> C	NE	
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3		
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4_		
Part	IX-B Summary of Program-Related Investments (see instructions)	
Des	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>N</u> C	NE NE	
2_		
_		
All	other program-related investments. See instructions.	· · · · · · · · · · · · · · · · · · ·
3 <u>N</u> (ONE	
	Add lines 1 through 3	

Part X Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	eign found	lations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
purposes:	1 1	
a Average monthly fair market value of securities	1a	451,910.
b Average of monthly cash balances	1b	NONE
c Fair market value of all other assets (see instructions)	1c	NONE
d Total (add lines 1a, b, and c)	1d	451,910.
e Reduction claimed for blockage or other factors reported on lines 1a and		332/323
1c (attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	1 2	NONE
	3	
3 Subtract line 2 from line 1d	-	451,910.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	1 .	
instructions)	4	<u>6,779.</u>
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	445,131.
6 Minimum investment return. Enter 5% of line 5 · · · · · · · · · · · · · · · · · ·	6	22,257.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating fou and certain foreign organizations, check here > and do not complete this part.)	ndations	
1 Minimum investment return from Part X, line 6	1	22,257.
2a Tax on investment income for 2017 from Part VI, line 5 2a 1,212		
b because Assistant 2047 (This does not include the Assistant Dawn)(1)	7	

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26 E

Distributable amount for 20 line 7	of the end of 2017 0,20, if any, to 2017: NONE NONE NONE 2,496. 4,822.	7,318.	Years prior to 2016 NONE	NONE	2017
Undistributed income, if any, as Enter amount for 2016 only. Total for prior years: 20, 2 Excess distributions carryover From 2012 From 2013 From 2014 From 2016 Total of lines 3a through e Qualifying distributions for 20	of the end of 2017 0,20, r, if any, to 2017: NONE NONE NONE 2,496. 4,822.	7.318.	NONE	NONE	21,04
Enter amount for 2016 only. Total for prioryears: 20,2 Excess distributions carryover From 2012 From 2013 From 2014 From 2016 Total of lines 3a through e Qualifying distributions for 20	0,20	7.318.	NONE	NONE	
Total for prior years: 20,2 Excess distributions carryover From 2012 From 2013 From 2014 From 2015 Total of lines 3a through e Qualifying distributions for 20	0,20 r, if any, to 2017: NONE NONE NONE 2,496. 4,822.	7.318.	NONE	NONE	
Excess distributions carryover From 2012 From 2013 From 2014 From 2015 Total of lines 3a through e Qualifying distributions for 20	n, if any, to 2017: NONE NONE NONE 2,496. 4,822.	7.318.	NONE		
From 2012	NONE NONE NONE 2,496. 4,822.	7.318.			
From 2013	NONE NONE 2,496. 4,822.	7.318.			
From 2014 From 2015	NONE 2,496. 4,822	7.318.			
From 2015	2,496. 4,822. 	7,318;			
From 2016	4 , 822 . 	7.318.			
Total of lines 3a through e Qualifying distributions for 20	017 from Part XII,	7,318			
Qualifying distributions for 20	017 from Part XII,	7.318.			
		7.3.			
line 4: ▶ \$2	^ 4 <i>^</i> ^	i			
Applied to 2016, but not more	than line 2a			NONE	
Applied to undistributed inco			NONE		
					
Treated as distributions out of required - see instructions)		NONB			
Applied to 2017 distributable a			· · · · · · · · · · · · · · · · · · ·		20,463
Remaining amount distributed	1	NONE			20,10
Exces s distributions carryover	·	583.			58:
(If an amount appears in coluamount must be shown in colu	umn (d), the same imn (a).)				
Enter the net total of e indicated below:	each column as				
Corpurs. Add lines 3f, 4c, and	4e. Subtract line 5	6,735.			
Prior years' undistributed	income. Subtract				
line 4 b from line 2b			NONE		
Enter the amount of prior ye	ears' undistributed				

	990-PF				_		Page 11
Pai	t XV	Suppleme	ntary Information	(continued)			
_ 3	Grai	nts and Contr	ibutions Paid Durin ent (home or business)	ng the Year or Appr	oved for Fu	uture Payment	
		Recipi	ent	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
	Nam	e and address ((home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a	Paid	during the year	•				
	SEE	STATEMENT	9				15,001.
							13,001.
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JSA 7E1491 1,000

Form **990-PF** (2017)

ter gross amounts unless otherwise indicated.	Unrelated	ies business income	Excluded by se	ction 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
a					1000 11101 0010110.)
b					
c					
d					
e	<u> </u>	 			
f		····			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash investments Dividends and interest from securities			14	8,290.	
Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income	ļ. .		1.0		
8 Gain or (loss) from sales of assets other than inventory			18	53,406.	
9 Net income or (loss) from special events · · ·	<u> </u>				
O Gross profit or (loss) from sales of inventory					
1 Other revenue: a b OTHER REVENUE			1 1	255.	
6					
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Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

		organization direct								Yes	No
	in sect	tion 501(c) (other	than section	on 501(c)(:	3) organizatio	ns) or ir	n section 527,	relating to	political		
	organiz	ations?								l	
а	Transfe	ers from the reportin	g foundation	to a nonch	aritable exemp	t organiza	ation of:				
	(1) Cas	h							18	1(1)	X
		er assets							_	(2)	X
		ransactions:								3=9	1
	(1) Sal	es of assets to a nor	ncharitable e	vemnt organ	nization				11	o(1)	Х
		chases of assets fro								0(2)	<u> </u>
		ital of facilities, equi								0(3)	$\frac{x}{x}$
									I I	0(4)	$\frac{\lambda}{X}$
		mbursement arrang									$\frac{\hat{x}}{x}$
		ins or loan guarante								(5)	$\frac{\Lambda}{X}$
		formance of service g of facilities, equipr								o(6)	$\frac{1}{x}$
		answer to any of the									
a	value (of the goods, other	accete or co	res, comp	n by the renor	wing sone	dation If the for	ndation roc	ways snow t	ne tair	market
		n any transaction o									
		(b) Amount involved			le exempt organiza						
(a) LI	ne no.	(b) Amount involved	(c) Name	ornoncharitab	ie exempt organiza	tion	(d) Description of tra	nsters, transac	ions, and sharing	arrangen	nents
											
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	la tha	foundation directly	or indirectly	offiliated v	ith or rolated	to one					
40		ed in section 501(c								Yes	X No
h		<u>"complete the follo</u>			(c)(3)) or in se	ction 527	f		• • • • • -] 169 [<u> 21</u> 140
	11 1 63,	(a) Name of organization			(b) Type of organi			(c) Descripti	on of relationship		
		(a) Name of organization			(b) Type of organi			(c) Descripti	On or relationship		
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	Cornet	unanonal Wear	tor to recipitate	pan taxpayer) is b	ased on all information	of which pre	parer has any knowledge	id to the best t	i my knowiedge a	nu Dellei,	it is true,
Sign	ו און נ		th Manage	<i>, ,</i> .		.			May the IRS d	scuss the	return
Here	- 1 - 2 V	E). Tucha	el pu	10-	04/19/2018		TRUSTEE		with the prepar	er shown	
	Sign	nature of officer or trustee		_	Date	Tı	tle		See instructions	XYes	N₀
	OL	D NATIONAL WE		IAG							
Paid	i	Print/Type preparer's na			TO THE		Date	Che			
		KELLY KOWALO	CZYK		WIN	ny	04/19	/2018 self		<u> 13876</u>	
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Use	Only	Firm's address ▶ 15	55 N. WAC	KER DRI	√E						
		CI	HICAGO,	IL		6060	16	Phone no	312-879	<u>-200</u> 0	
							<u></u>		Form	990-PF	(2017)

FORM 990PF, PART I - TAXES

FORM	990PF,	PART	III	- OTHE	R DECREASES	IN NET	WORTH O	R FUND	BALANCES
=====	======	=====	====	======	========	======	======	======	=======

DESCRIPTION AMOUNT _ - - - - -ROUNDING 2. CORRECTION OF LEGAL FEES 2,093. ROC ADJUSTMENT 35. TOTAL 2,130. ========== RECIPIENT NAME:

OLD NATIONAL WEALTH MANAGEMENT

ADDRESS:

PO BOX 207

EVANSVILLE, IN 47702

RECIPIENT'S PHONE NUMBER: 812-464-1584

FORM, INFORMATION AND MATERIALS:

LETTER SUBMITTED TO TRUSTEE BY APPLICANT SHOWING FINANCIAL NEED.

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

TO HIGH SCHOOL AND COLLEGE STUDENT OF VANDERBURGH COUNTY, INDIANA, FOR EDUCATION.

JAGOB, LILLIAN FORM 9 9 0PF, PA	ART XV, LINE 3	3a - CONTRIBU	TIONS, GIF		rs paid	338764
			·			
DECEMBER NAME	3 _					
RECIPIENT NAME BOSSE HIGH S						
ADDRESS:	CHOOL					
1300 WASHING	TON AVE					
EVANSVILLE,						
RELATIONSHIP:						
NONE						
PURPOSE OF GRA						
SCHOLARSHIPS		T TIL 700				
FOUNDATION STA	ATUS OF RECIPI	LENT:				
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AMOUNT OF GRAD	NI FAID	• • • • • • • • • • • •	• • • • • • • • • •	• • • • • • •	• • • • • • •	090
RECIPIENT NAME	G :					
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5400 N 1ST A						
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RECIPIENT NAME: HARRISON HIGH SCHOOL ADDRESS: 211 FIELDING RD EVANSVILLE, IN 47715 RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,071. RECIPIENT NAME: MATER DEI HIGH SCHOOL ADDRESS: 1300 HARMONY WAY EVANSVILLE, IN 47720 RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 493. RECIPIENT NAME: NORTH HIGH SCHOOL ADDRESS: 15331 US-41 EVANSVILLE, IN 47725 RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,470. JACOB, LILLIAN & NATHAN FRANK SCHOLARSHIP

55-6338764
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME: REITZ MEMORIAL HIGH SCHOOL ADDRESS: 1500 LINCOLN AVE EVANSVILLE, IN 47714 RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 627. RECIPIENT NAME: SIGNATURE SCHOOL ADDRESS: 610 MAIN ST EVANSVILLE, IN 47708 RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 345. RECIPIENT NAME: IVY TECH COMMUNITY COLLEGE ADDRESS: 3501 N 1ST AVE EVANSVILLE, IN 47710 RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 658.

	JACOB, LILLIAN & NATHAN FRANK SCHOLARSHIP FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ===================================
	RECIPIENT NAME: UNIVERSITY OF EVANSVILLE ADDRESS: 1800 LINCOLN AVE EVANSVILLE, IN 47714
	RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT:
	PC AMOUNT OF GRANT PAID
	RECIPIENT NAME:
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JACOB, LILLIAN & NATHAN FRANK SCHOLARSHIP 35-6338764 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NEW TECH INSTITUTE ADDRESS: 1901 LYNCH RD EVANSVILLE, IN 47711 RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 285.

TOTAL GRANTS PAID:

15,001.