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. Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2017 or tax year beginning

Open to Public Inspection

		da. year 2017 or dax year beginning		2017	, and			, 20
		undation S KYLE SIMS FOUNDATION			-	A Emplo	oyer identification numl 37-1406729	
	-	d street (or P O box number if mail is not delivered to street address)				<u> </u>		
		DUNTY ROAD 2100 E		Room	/suite	B Teleph	ione number (see instruc 21 1 549 539	•
Çıt	y or towr	n, state or province, country, and ZIP or foreign postal code				C Kayan		
		TON IL 61920				C if exen	nption application is pen	ding, check here ▶ [_]
G	Check	all that apply: Initial return Initial return	of a former p	ublic	charity	D 1 Fore	eign organizations, checl	here
		☐ Final return ☐ Amended				., 0.0	agn organizations, check	(ileie ▶ 📙
		Address change Name char					eign organizations meetii	
H	Chaol	type of organization: Section 501(c)(3) exempt p				F If priva	ck here and attach comp te foundation status was	outation • • □
		_ ,,,,			PU		507(b)(1)(A), check her	
		n 4947(a)(1) nonexempt charitable trust						_
		narket value of all assets at J Accounting method	: 🗹 Cash L	」 Ac	crual	F If the fe	oundation is in a 60-mor	nth termination
		f year (from Part II, col. (c),				under	section 507(b)(1)(B), che	ck here ▶ 🔲
	line 16		on cash basis.)				
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue a	nd	~			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses pe			investment icome	(c) Adjusted net	for chantable purposes
		the amounts in column (a) (see instructions).)	books	- 1	•		11001110	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	1	335			· · · · · · · · · · · · · · · · · · ·	
	2	Check ► ☐ if the foundation is not required to attach Sch. B				· · · · · · · · · · · · · · · · · · ·		†
	3	Interest on savings and temporary cash investments		687		68	7	d
	4	Dividends and interest from securities		269		26	9 ()
	5a	Gross rents						
	b	Net rental income or (loss)		\neg				
d)	6a	Net gain or (loss) from sale of assets not on line 10						
Revenue		Gross sales price for all assets on line 6a		-1			-	
ē	b	· · · · · · · · · · · · · · · · · · ·					-	<u> </u>
é	7	Capital gain net income (from Part IV, line 2)	_··					
ш	8	Net short-term capital gain						
	9	Income modifications					ļ	
	10a	Gross sales less returns and allowances			_			
	b	Less: Cost of goods sold		_				
	C	Gross profit or (loss) (attach schedule)		_				
	11	Other income (attach schedule)		201		05		
	12	Total. Add lines 1 through 11	2	291		95	6 0	
Ş	13	Compensation of officers, directors, trustees, etc.					<u> </u>	
JS(14	Other employee salaries and wages					 	
je C	15	Pension plans, employee benefits		\longrightarrow				
Expenses	16a	Legal fees (attach schedule)	-				RECEIVED	
	b	Accounting fees (attach schedule)				 		<u> </u>
莫	_ c	Other professional fees (attach schedule)		\dashv		141	4 0 6040	18
Operating and Administrative	17	Interest		20		8	MAY 1 8 2018	
nis	18	Taxes (attach schedule) (see instructions)		20				T E
Ē	19	Depreciation (attach schedule) and depletion					OCDEN, UT	
B	20	Occupancy						
ַקַ	21	Travel, conferences, and meetings						<u> </u>
a	22	Printing and publications		99				
gu	23	Other expenses (attach schedule)		10			 	
aţį.	24	Total operating and administrative expenses.	ı					
ē		Add lines 13 through 23		129				
Q Q	25	Contributions, gifts, grants paid		500			<u> </u>	<u> </u>
_	26	Total expenses and disbursements. Add lines 24 and 25	1	629			<u> </u>	L
	27	Subtract line 26 from line 12:						
	а	Excess of revenue over expenses and disbursements		662				
	b	Net investment income (if negative, enter -0-) .				95		
	С	Adjusted net income (if negative, enter -0-)		1			0	<u></u>
For	Paper	work Reduction Act Notice, see instructions.	C	at. No.	. 11289X		F	om 990-PF (2017)

Da	rt Il	Ralance Sheets Attached schedules and amounts in the description column	beginning of year	End o	ryear
Га		Balance Sheets Attached schedules and amounts in the description column 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			
-	2	Savings and temporary cash investments	54438	40363	40363
	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			
ŀ		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
-	•	Less: allowance for doubtful accounts ▶		· · · · · · · · · · · · · · · · · · ·	
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			 · · · · · · · · · · · · · · · · · ·
ŝ	10a	Investments—U.S. and state government obligations (attach schedule)			
`	b	Investments—corporate stock (attach schedule)	0	14737	16435
	_	Investments—corporate bonds (attach schedule)			
Ì	C				
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶	 -		J
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►) Total assets (to be completed by all filers—see the			
	16	Total assets (to be completed by all filers—see the	54400	55400	50700
		ınstructions. Also, see page 1, item l)	54438	55100	56798
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
tie	19	Deferred revenue			1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>e</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶)			
	23	Other liabilities (describe >) Total liabilities (add lines 17 through 22)			
es		Foundations that follow SFAS 117, check here Daniel			
alances	24	Unrestricted	1		Í
를	25	Temporarily restricted	1		
ä	26	Permanently restricted			ĺ
Fund B		Foundations that do not follow SFAS 117, check here ▶ □			
3		and complete lines 27 through 31.	1		
þ	27	Capital stock, trust principal, or current funds			
Š	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	54438	55100	
Ąŝ	30	Total net assets or fund balances (see instructions)	<u> </u>		
et /	31	Total liabilities and net assets/fund balances (see			
ž	ו"	instructions)	54438	55100	
Ď.	P. 111	Analysis of Changes in Net Assets or Fund Balances	1		<u> </u>
	rt III	al net assets or fund balances at beginning of year—Part II, colu	ımn (a) line 30 /mus	agree with	
'		of-year figure reported on prior year's return)			54438
_		• •			662
2		er amount from Part I, line 27a			002
3		er increases not included in line 2 (itemize)			55100
4		l lines 1, 2, and 3			33100
5	Dec	reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—	Port II polyma /b\ lie	5	55100
_ (1012	arrier assers or rund balances at end of year (line 4 minus line 5)—	rait II, Column (D), III	ne 30 6	

Part	V 'Capital Gains and	d Losses for Tax on Investn	nent Income				
		and(s) of property sold (for example, real e use; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date ad (mo., day	*	(d) Date sold (mo., day, yr)
1a	a NA						
<u>b</u> _							
<u> </u>			 	 	-		
<u>d</u> _	<u></u>			 			
<u>e</u>		(f) Depreciation allowed	(a) Cost o	r other basis		(h) Gain (
	(e) Gross sales price	(or allowable)		ense of sale		((e) plus (f)	
<u>a</u>	· · · · · · · · · · · · · · · · · · ·						
<u>b</u>							
<u>_</u>							
<u>d</u>							
е	Complete only for assets she	owing gain in column (h) and owned	by the foundation	on 12/31/69.		(Oal (<u> </u>
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col. (i)			h) gain minus ess than -0-) or m col (h))
a							
<u>-</u> _							
c							
d							
е							
2	Capital gain net income of		also enter in Pa , enter -0- in Pa		2		
3		in or (loss) as defined in sections					
	Part I, line 8	t I, line 8, column (c). See instru	ctions. If (loss)), enter -U- in {			
Part		der Section 4940(e) for Redu	iced Tay on N	Not Investment	3		
_		rivate foundations subject to the				mo)	
יייי) וייין	puonai use by domestic pi	ivate foundations subject to the	36011011 4540(a)	tax on het investi	Hent inco	iiie.)	
If sect	tion 4940(d)(2) applies, leav	ve this part blank.					
Was t	he foundation liable for the	e section 4942 tax on the distribu	table amount o	f anv vear in the b	ase perio	d?	☐ Yes 🐼 No
	s," the foundation doesn't	qualify under section 4940(e). Do	not complete t	this part.	•		
_1		ount in each column for each ye	ar; see the instr	uctions before ma	king any	entries.	
	(a) Base penod years	(b)	a Naturalisa	(c)		Distri	(d) oution ratio
Cale	endar year (or tax year beginning ii	<u>· </u>		of noncharitable-use as		(col. (b) div	nded by col. (c))
	2016		1626 1677		3984 3848		0533 0311
	2015		2226		2459		0424
	2014 2013		2222		2303		0640
	2012		2404		3409		0618
	2012					Γ	
2	Total of line 1, column (d)			. 2]	.2526
3		for the 5-year base period—div	ide the total or	n line 2 by 5.0, or			
	the number of years the f	foundation has been in existence	if less than 5 ye	ears	. 3		.0505
4	Enter the net value of nor	ncharitable-use assets for 2017 f	rom Part X, line	5	. 4		53234
5	Multiply line 4 by line 3				. 5		2688
-					· -		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		. 6_		10
7	Add lines 5 and 6				. 7		2698
8	Enter qualifying distributi	ons from Part XII, line 4			. 8		1629
-		eater than line 7, check the box in				sing a 1%	

Form **990-PF** (2017)

Form 95	D-FF (2017)			age 4
Part		nstru	ction	าร)
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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b		19	
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-)		o	
3	Add lines 1 and 2		19	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	_
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		19	
6	Credits/Payments:			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) . 6c 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		19	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11		0	
	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		•
	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.			
С	Did the foundation file Form 1120-POL for this year?	1c		1
d	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? If "Yes," attach a detailed description of the activities.	2		1
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		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		~
ча b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1
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?			
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 XV	7	7	
, 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		
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 tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV	9		_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		•

Part	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	4.4		,
40		11		_
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		•
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	
	Website address ▶			
14		7 549	5398	
	Located at ▶ 5221 N County Road 2100 E, Charleston IL ZIP+4 ▶	6192	0	
15	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041—check here		 -	
13	and enter the amount of tax-exempt interest received or accrued during the year	• •	•	
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		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			-
	the foreign country ▶	ĺ		1
Part	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? Yes . No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	l i		
	disqualified person?	ļ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes	·]
	(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)?			
	(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			ł
	termination of government service, if terminating within 90 days.)			l
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	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			İ
	were not corrected before the first day of the tax year beginning in 2017?	1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	-		<u> </u>
	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?			
	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	L		
	all years listed, answer "No" and attach statement—see instructions.)	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			i
	at any time during the year?			
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			l
	foundation had excess business holdings in 2017.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		4

Par	Statements negarding Activities	IOI VI	mich Form	4/20	may be H	equire	a (contil	nuea)			
5a	During the year, did the foundation pay or incur a	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt to						☐ Yes	✓ No			
	(2) Influence the outcome of any specific public		on (see secti	on 495	5); or to ca	arry on,					
	directly or indirectly, any voter registration dr	ve?					☐ Yes	✓ No			
	(3) Provide a grant to an individual for travel, stu-	dy, or d	other similar j	ourpos	es?		☐ Yes	✓ No			
	(4) Provide a grant to an organization other than										
	section 4945(d)(4)(A)? See instructions						☐ Yes	₩ No			
	(5) Provide for any purpose other than religious,										
	purposes, or for the prevention of cruelty to o	hildren	or animals?				☐Yes	₩ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transa	ctions fail to	qualify	under the	exception	ons descr	ribed in			
	Regulations section 53.4945 or in a current notice	regardi	ng disaster as	sistanc	e? See inst	ructions			5b		
	Organizations relying on a current notice regarding	ng disa	ster assistan	ce, che	ck here .						1
С	If the answer is "Yes" to question 5a(4), does to										
	because it maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No			
	If "Yes," attach the statement required by Regula	ations s	ection 53.49	45–5(d)).				1		
6a	Did the foundation, during the year, receive any	funds,	directly or inc	directly	, to pay pre	emiums			1 .		
	on a personal benefit contract?						☐ Yes	✓ No			
b	Did the foundation, during the year, pay premium	ns, dire	ctly or indired	tly, on	a personal	benefit	contract	? .	6b		
	If "Yes" to 6b, file Form 8870.										
	At any time during the tax year, was the foundation a						☐ Yes	✓ No			
	If "Yes," did the foundation receive any proceeds								7b		
Par	t VIII Information About Officers, Direc	tors, 1	rustees, F	ounda	tion Mana	agers,	Highly F	Paid Er	nploy	ees,	
	and Contractors	1.									
1	List all officers, directors, trustees, and found				-				•		
	(a) Name and address	hou	e, and average rs per week	``(If r	mpensation not paid,	emplo	Contribution yee benefit	plans	(e) Exper	nse aco	
		devot	ed to position	en	ter -0-)	and defe	rred compe	ensation	Outer	allowall	
ATTA	CHMENT										
	VIIIIEIVI										
					·						
								İ			
				_							
								i			
2	Compensation of five highest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1—s	ee instr	uctions	t) If no	nne (enter
_	"NONE."	(02.			udou o		occ mou	404011	,,	J. 10, \	cittei
			A) Tile and a			- · I	(d) Contribu	rtions to			
	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v	reek	(c) Compe	l.	employee plans and o	benefit	(e) Exper		
			devoted to pe	osition			compens	sation	Outer	illowari	Ces
-											
NON			j					ŀ			
									-		
							-				
Total	number of other employees paid over \$50,000 .		<u></u>			<u> </u>	<u> </u>	. ▶			
	,							F	om 99	0-PF	(2017)

Par	and Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	<u>.</u> "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		:
 -		
Tota	I number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	Educational Scholarship to Ball State University of Muncie IN	
	for: Ryan Sims	750
2	Educational Scholarship to Lake Land College of Mattoon IL	
	for: Kressa Sweeney	750
_		
3		
4		
4		
Par	t IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	NONE	
2		
	•	
		, <u></u>
	I other program-related investments. See instructions.	•
3	NONE	
Toto	II. Add lines 1 through 3	
TUR	ii. Add lines 1 through 3	

Form **990-PF** (2017)

Part	see instructions.)	gn round	jations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	54045
C	Fair market value of all other assets (see instructions)	1c	0
ď	Total (add lines 1a, b, and c)	1d	54045
е	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	54045
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	ınstructions)	4	811
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	53234
6	Minimum investment return. Enter 5% of line 5	6	2662
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► and do not complete this part.)	oundatio	ns
1	Minimum investment return from Part X, line 6	1	2662
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.) 2b		
С	Add lines 2a and 2b	2c	19
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2643
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	2643
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	2643
Dart	XII Qualifying Distributions (see instructions)		
r ar t			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		4000
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	1629
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		•
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		•
а	Suitability test (prior IRS approval required)	3a	0
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	1629
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	1629
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whethe	r the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		000 85
		Fo	orm 990-PF (2017)

Part	XIII Undistributed Income (see instruction	ons)	, _		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				2643
2	Undistributed income, if any, as of the end of 2017:				
а	Enter amount for 2016 only			0	
b	Total for pnor years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				
С	From 2014				
ď	From 2015				
е	From 2016				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$ 1629				
а	Applied to 2016, but not more than line 2a .			0	
b	Applied to undistributed income of prior years			_	
	(Election required – see instructions)		0		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	0			
d	Applied to 2017 distributable amount				2643
е	Remaining amount distributed out of corpus	1629			
5	Excess distributions carryover applied to 2017	1014			1014
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	615			
þ	Prior years' undistributed income. Subtract		_		
	line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		_		
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions		0		
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions			0	
f	Undistributed income for 2017. Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2018	-			0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
•	required—see instructions)	0			
8	Excess distributions carryover from 2012 not				
_	applied on line 5 or line 7 (see instructions) .	0			
9	Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	645			
		615			
10	Analysis of line 9:				
a	Excess from 2013				
b	Excess from 2014				
C	Excess from 2015				
d	Excess from 2016 615				
6	Excess from 2017 615			l l	Ī

Page	10

Part 2	VIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)			
1a	If the foundation has received a ruling foundation, and the ruling is effective for				N/	A /		
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se	ection 4942(j)(3) or 4942(j)(5)		
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years				
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total		
	each year listed					 		
b	85% of line 2a				ľ			
	Qualifying distributions from Part XII,							
	line 4 for each year listed							
d	Amounts included in line 2c not used directly for active conduct of exempt activities							
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the alternative test relied upon:							
а	"Assets" alternative test-enter:			[
	(1) Value of all assets							
	(2) Value of assets qualifying under							
	section 4942(j)(3)(B)(i)							
þ	of minimum investment return shown in	ı						
	Part X, line 6 for each year listed		/					
С	"Support" alternative test-enter:			1				
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)							
	(2) Support from general public							
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)							
	(3) Largest amount of support from an exempt organization							
	(4) Gross investment income							
Part	XV Supplementary Information any time during the year-			he foundation h	ad \$5,000 or mo	ore in assets at		
1	Information Regarding Foundation							
а	List any managers of the foundation of before the close of any tax year (but of					by the foundation		
NONE				· · · · · · · · · · · · · · · · · · ·	,			
b	List any managers of the foundation ownership of a partnership or other el					ge portion of the		
NONE	, ,	, 5. 17111011 1110	. Julioudon nas a		J. 501.			
2	Information Regarding Contribution	Grant Gift Loa	n Scholarshin e	to Programs:		·		
	Check here ▶ ☐ if the foundation	•	•	-	organizations and	does not accent		
	unsolicited requests for funds. If the f							
	complete items 2a, b, c, and d. See ir				J	,		
a The S	a The name, address, and telephone number or email address of the person to whom applications should be addressed: The Silas Kyle Sims Foundation c/o Judy Michael, 5221 N County Road 2100 E, Charleston IL 61920 217-549-5398							
b								
Prepr	inted Scholarship Application Form (a co	py is attached)						
Deadl	Any submission deadlines: ine for submission of completed Applica							
d	Any restrictions or limitations on av factors:	vards, such as b	y geographical ai	reas, charitable fi	elds, kinds of inst	itutions, or other		
High !	School graduating senior or having gradu	uated within 2 years	U.S. Citizen					

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	, and
a Paid during the year Ball State University, Muncie Indiana	N/A	Public	Academic Scholarship	750
Lake Land College, Mattoon Illinois	N/A	Public	Academic Scholarship	750
	N/A	Public		
b Approved for future payment			▶ 3a	1,500
Total				T

		VI-A Analysis of Income-Producing Ac		·-		· · · · · · · · · · · · · · · · · · ·	
Ente	r gro	oss amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	on 512, 513, or 514	(e)
1		ogram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
	a b	IVA					
	C						
	d						
	e					·	
	f						
	g	Fees and contracts from government agencies					
2	Me	mbership dues and assessments					
3		erest on savings and temporary cash investments					
4		ridends and interest from securities					· -
5		t rental income or (loss) from real estate:	ļ		_		
		Debt-financed property					
_		Not debt-financed property					
6		t rental income or (loss) from personal property					
7 8		in or (loss) from sales of assets other than inventory			· · · · · · · · · · · · · · · · · · ·		
9		t income or (loss) from special events					
10		oss profit or (loss) from sales of inventory	ļ				
11		her revenue: a					
	b						
	C						
	d						
	е						
		btotal. Add columns (b), (d), and (e)				L	<u> </u>
		tal. Add line 12, columns (b), (d), and (e)				. 13	
<u> </u>		rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A		ent of Evemr	t Dumoses		
	ne No					I-A contributed i	moortantly to the
	▼	Explain below how each activity for which accomplishment of the foundation's exempt put	rposes (other tha	in by providing fu	nds for such purp	oses). (See instru	ctions.)
	-						
		N/A					
						 	
			····				
		-					
_							
_							
			·				

Paid Preparer

Use Only

Firm's name

Firm's address ▶

orm 99	0-PF (2	2017)							Pa	ige 1 3
Part		Organization						table		
1	in s		lirectly or indirectly en ther than section t						Yes	No
а	Tran	sfers from the rep	porting foundation to	a noncharitable exe	mpt organization	of:				i
	(1) (Cash						1a(1)		1
	(2)	Other assets .						1a(2)		1
b	Othe	er transactions:								
	(1) 5	Sales of assets to	a noncharitable exer	npt organization .				1b(1)		1
	(2) F	Purchases of asse	ets from a noncharital	ble exempt organiza	tion			1b(2)		1
	(3) F	Rental of facilities,	, equipment, or other	assets				1b(3)		~
	(4) F	Reimbursement ai	rrangements					1b(4)		4
		_	rantees					1b(5)		~
	• •		ervices or membershi	-				1b(6)		1
C		-	quipment, mailıng lıst					1c		_
d	valu	e of the goods, o	of the above is "Yes ther assets, or service	es given by the repo	orting foundation.	If the foundation	received less	than	fair m	arke
			on or sharing arrange							
(a) Line	no.	(b) Amount involved	(c) Name of noncha	antable exempt organization	on (d) Descr	ption of transfers, tran	sactions, and shar	ing am	angeme	ents
	ļ					·				
	- ∤		<u> </u>							
										
										
	}		ļ		}	-				
					_					
						_ 				
										
			ļ							
	}		ļ							
										
2a b	des	cribed in section (l ectly or indirectly affi 501(c) (other than sec e following schedule.	•	•	re tax-exempt org	ganizations	Yes		No
		(a) Name of organ		(b) Type of org	anization	(c) Des	scription of relation	ship		
								<u>-</u>		
										
										
										
Sign			declare that I have examined laration of preparer (other that							
Here) h	Jul. 7	nahad	1 5 /14/18	Treasurer	May the li			hown b	elow?
Heit		nature of officer or tru	stee	Date	Title		See instruct	ilons.	∐Yes[□No
		Pfint/Type preparer		Preparer's signature	·····	Date	о Гр	ΠN		
Paid Pron	Paid Prenarer					<u> </u>	Check if self-employed			

Form **990-PF** (2017)

Firm's EIN ▶

Phone no.

	MONTHLY AVG BAL.	54,534	54,359	54,976	55,234	55,460	55,875	55,639	54,443	54,463	54,541	54,691	54,045
	Checking Average	393	294 294	294	274	274	1,467	2,036	717	536	536	536	638
	Passbook Average	1,169	1,243 9,486	17,098	17,376	17,601	9,454	1,281	1,404	1,605	1,683	1,833	2,620
	Passbk End <u>Balance</u>	1,229	17,021	17,175	17,576	17,626	1,281	1,281	1,527	1,683	1,683	1,983	
	Passbk Beg Balance	1,073	1,0/5	17,021	17,175	17,576	17,626	1,281	1,281	1,527	1,683	1,683	
#	CD Average Balance	15,388	15,566				7,369	14,737	14,737	14,737	14,737	14,737	13,203
	CD Average Balance	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000
	CD Ending Balance	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	
	CD Beg Balance	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	
17)	CD Avg	17,584	17,584	17,584	17,585	17,585	17,585	17,585	17,585	17,585	17,585	17,585	17,585
m 990-PF (20:	CD End <u>Balance</u>	17,584	17,584	17,585	17,585	17,585	17,585	17,585	17,585	17,585	17,585	17,585	
Worksheet for Part X for Form 990-PF (2017)	CD Beg Balance	17,584	17,584	17,584	17,585	17,585	17,585	17,585	17,585	17,585	17,585	17,585	
Worksheet fo	Month	Jan, 2017	Feb, 2017 Mar, 2017	Apr, 2017	May, 2017	Jun, 2017	Jul, 2017	Aug, 2017	Sep, 2017	Oct, 2017	Nov, 2017	Dec, 2017	

Attachment for Form 990-PF (2017 Return of Private Foundation) Part VIII Information About Officers, Directors, Trustees, Foundation Managers

(a) Name and Address Jack T. Sweeney Ashmore IL 61912	(b) Title Dir & Pres	© Compensation 0	(d) Contr to Benefit Pgms 0	(e) Expense Acct 0
Kyle D. Wilson Westfield IL 62474	Dir & V-Pres	0	0	0
Michael R. Sweeney Charleston IL 61920	Dir & Sec	0	0	0
Gladys R Myers Mattoon IL 61938	Dir & Asst Sec	0	0	0
Judy K. Michael Charleston IL 61920	Dir & Treas	0	0	0
Chris Sims Charleston IL 61920	Dir & As Trea	0	0	0
Kevin Hickman Charleston IL 61920	Dir	0	0	0
Kevin Myers Mattoon IL 61938	Dir	0	0	0
Lisa J. Sims Springfield IL 62704	Trustee & Chairman	0	0	0
Joy E. Castle Charleston IL 61920	Trustee & Vice Chair	0	0	0
Terri Rees Matthews Ava MO 65608	Trustee	0	0	0
John H. Sims Decatur IL 62526	Trustee	0	0	0
Jacqie Sims Westfield IL 62474	Trustee	0	0	0
David Rohr Janesville Wl	Trustee	0	0	0
Jessie Hasken Seattle WA	Trustee	0	0	0
Kayla Rohr Janesville Wl	Trustee	0	0	0

37-1406729

Page 6a (con't)

Attachment for Form 990-PF (2017 Return of Private Foundation)
Part VIII Information About Officers, Directors, Trustees, Foundation Managers

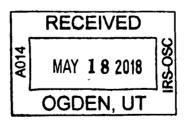
(a) Name and Address	(b) Title	© Compensation (d)	Contr to Benefit Pgms	(e) Expense Acct
Rob Kemp Charleston IL	Trustee	0	0	0
Michael D. Sims Galena IL	Trustee	0	0	0
Sarah McKinney Louisville IL	Trustee	0	0	0
Barbara G. Sims Polo IL	Trustee	0	0	0
Myra Sue Beachy Arcola IL 61920	Trustee	0	0	0
Lorelei Sims Charleston IL	Trustee	0	0	0
Albert Frank Sims Mobile AL	Trustee	0	0	0
Carol Rohr Janesville Wl	Trustee	0	0	0
Karen Blade Greenup IL 62428	Trustee	0	0	0
Michael Ryder Greenup IL	Trustee	0	0	0
Delbert Rexrode, Jr. Doe Hill VA	Trustee	0	0	0
Kent Botkin Staunton VA	Trustee	0	0	0
Kenneth Sims Charleston IL	Trustee	0	0	0
Willian Harrison Charleston IL	Trustee	0	0	0
Jerry Sims Wildersville TN	Trustee	0	0	0
Kirk Breckenoff Springfield IL	Trustee	0	0	0

SILAS KYLE SIMS FOUNDATION 37-1406729 Page 1

Attachment for Form 990-PF (2017) Return of Private Foundation
Part 1, Operating and Administrative

SILAS KYLE SIMS FOUNDATION Profit and Loss Statement January 1, 2017 through December 31, 2017

INCOME		\$ 2,291.56
Giving	\$ 1,335.41	
Dividends	\$ 269.34	
Interest Received	\$ 686.81	
Total Income	\$ 2,291.56	
EXPENDITURES		\$ 1,629.40
Scholarship Awards	\$ 1,500.00	
Newsletter	\$ 99.40	
PF990 Tax	\$ 20.00	
Sec of State-NFP Filing Fee	\$ 10.00	
Total Expenditures	\$ 1,629.40	
Income Over Expenditures		\$ 662.16
Carry Over From CY2016		\$ 54,438.30
		\$ 55,100.46



Attachment for Form 990-PF (2017) Part XV Applying for Academic Year 2017-2018

Applicant must be a high school graduating senior or have graduated in last two years

Page 2

Personal Statement and Requirements

It is required that you attach a personal statement describing

- career goals
- personal and family financial background, including names of parents
- relationship if a descendant of Silas Kyle and Virginia Sims
- school, community activities and awards
- other relevant personal activities and experience

Include clubs and school organizations and the roles you played or offices you held. Comment on your interests and how they correlate with your desired career field. Handwritten comments will not be accepted.

Required Attachments:

- COMPLETE and OFFICIAL transcript of high school classes and grades (it's absence will result in disqualification for consideration)

 An Official Transcript MUST contain a "stamp" or an "imprint" that is the official SEAL of the issuing institution. A stamp (SEAL) is impressed ON the transcript like the seal of a Notary Public; whereas an imprint is a watermark (SEAL) impressed WITHIN the transcript. A copy of the OFFICIAL transcript is acceptable.
- SAT scores
- A signed letter of recommendation from a teacher, coach or employer
- if a college freshman or sophomore, also attach a copy of your college transcript

37-1406729 pg 10 Silas Kyle Sims Scholarship Application
Attachment for Form 990-PF (2017) Part XV Applying for Academic Year 2017-2018
Applicant must be a high school graduating senior or have graduated in last two years

Applications must be received by April 1, or the following business day if April 1 falls on a weekend, to be considered for the upcoming academic year.

This 2-page application must be completed and returned to The Silas Kyle Sims Foundation by April 1. This application is completely separate from any college admission application or Federal Student Aid Forms.

Name			
SSN (optional)	Phone		
Email Address			
Address			
Street	City	State	Zip Code
High School Attended	High	School Graduation	Year
High school class ranking(Requ	ired)	Number or class size	
In what college or university have you been a and why have you chosen this school or colleg			
College classification as of next semester	Freshman	Sophomore _	Junior
Have you received another scholarship other If so, please describe	than Federal Studer	nt Financial Aid? _	
I hereby authorize the administration of Financial Aid Office of the college I am attend to release information about my permanent s individuals responsible for the screening or so information is held in confidence.	dingtudent records and t	the financial records	s to the
Please send entire application to:			
The Silas Kyle Sims Foundation 5221 N. County Road 2100 E.	Studen	t's Signature	
Charleston, IL 61920	Date		
For Office Use Only: Please rate on a scale of "1" low to "5" high, to based on the description of:	the worthiness of the	applicant to receiv	e a scholarship
•	Scholarship Comp	nittee	
Academic Achievement			
Career Goals			
School and Community Activities			
Personal and Family Financial Background			
Miscellaneous TOTAL		AVERAGE	