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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491028002079

OMB No 1545-0052

2017

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.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 06-01-	2017 , a	nd ending 05-31-	2018		
		indation E FIKE FAMILY FOUNDATION		A Employer id	entification numbe	r	
	JNALD E	ETINE PAMILI POUNDATION	45-2548424	45-2548424			
		d street (or P O box number if mail is not delivered to street addres TH FARNHAM STREET	ss) Room/suite	B Telephone nu	ımber (see ınstructio	ns)	
		1770		(309) 343-1550)		
		n, state or province, country, and ZIP or foreign postal code 6, IL 61401		C If exemption	application is pendin	g, check here ▶ □	
G Cł	neck al	I that apply 🔲 Initial return 🔲 Initial return of	a former public charity	D 1. Foreign or	ganızatıons, check he	ere , \square	
		☐ Final return ☐ Amended retur	rn		ganizations meeting		
		\square Address change \square Name change			k here and attach co	· -	
H C	neck ty	pe of organization $lacksquare$ Section 501(c)(3) exempt privat	e foundation		undation status was t in 507(b)(1)(A), chec		
	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxa	ble private foundation				
of	year <i>(f</i>	xet value of all assets at end from Part II, col (c),	Cash Accru		ation is in a 60-mont n 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Bayanya and			(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investment income	(c) Adjusted net	for charitable purposes	
		equal the amounts in column (a) (see instructions))	books			(cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)	155,432				
	2	Check ▶ ☐ If the foundation is not required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	62,429	62,429			
	5a	Gross rents					
e	b 6a	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	42,337				
Ξ			· · · · · · · · · · · · · · · · · · ·				
Revenue	b 7	Gross sales price for all assets on line 6a 42,3 Capital gain net income (from Part IV, line 2)		42,337			
ц	8	Net short-term capital gain		,			
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	260,198	104,766			
	13	Compensation of officers, directors, trustees, etc	С	0		0	
	14	Other employee salaries and wages					
;es	15	Pension plans, employee benefits					
en en	16a	Legal fees (attach schedule)	05.1 2.400	4.535		525	
and Administrative Expenses	b	Accounting fees (attach schedule)	2,100	1,575		525	
٧e	°	Other professional fees (attach schedule)					
rati	17 18	Interest	999	999		0	
ĭSt	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	3999	333		-	
Ī	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
pu	22	Printing and publications					
ğ	23	Other expenses (attach schedule)	9 25	0		25	
Operating	24	Total operating and administrative expenses.					
Dec		Add lines 13 through 23	3,124	2,574		550	
Ō	25	Contributions, gifts, grants paid	134,750			134,750	
	26	Total expenses and disbursements. Add lines 24 and 25	137,874	2,574		135,300	
	27	Subtract line 26 from line 12		_,,,,,			
	a	Excess of revenue over expenses and	122,324				
	Ь	disbursements Net investment income (if negative, enter -0-)		102,192			
	c	Adjusted net income(if negative, enter -0-)					
For		work Reduction Act Notice, see instructions.		Cat No 11289)	I Foi	<u>l</u> rm 990-PF (2017)	

	+	cash non-merest bearing 1 1 1 1 1 1 1 1 1 1 1 1 1		100,557		203,303		203,303
	2	Savings and temporary cash investments		700,046		976		976
	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 (attach schedule)						
		Less allowance for doubtful accounts ▶						
S	8	Inventories for sale or use						
Assets	9	Prepaid expenses and deferred charges						
As	10a	Investments—U S and state government obligations (attach schedule)						
	ь	Investments—corporate stock (attach schedule)		1,720,360	% J	2,843,822		2,843,822
	С	Investments—corporate bonds (attach schedule)		560,000	% ∫	280,000		280,000
	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 ▶						
		Less accumulated depreciation (attach schedule) ▶						
	15	Other assets (describe	% J	7,180	% ∫	3,500	₹ J	3,500
	16	Total assets (to be completed by all filers—see the						
		instructions Also, see page 1, item I)		3,094,583		3,411,663		3,411,663
	17	Accounts payable and accrued expenses				462		
	18	Grants payable						
es	19	Deferred revenue						
bilities	20	Loans from officers, directors, trustees, and other disqualified persons						
≘	۱							

462

3,411,201

3,411,201

3,411,663

3,094,583

122,324

194,294

3,411,201

3,411,201

Form **990-PF** (2017)

1

2

3

4

5

6

3,094,583

3,094,583

3,094,583

				í
	15	Other assets (describe ►)	7,180	*
	16	Total assets (to be completed by all filers—see the		
		ınstructions Also, see page 1, item I)	3,094,583	
	17	Accounts payable and accrued expenses		
	18	Grants payable		Г
)	19	Deferred revenue		
	20	Loans from officers, directors, trustees, and other disqualified persons		
	21	Mortgages and other notes payable (attach schedule)		

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

22

23

24

25

26

27

28

29 30

31 Part III

2

3

5

Net Assets or Fund Balances

Other liabilities (describe -

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Page **3**

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a CAPITAL GAINS DIVIDE	NDS		Р		
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis sense of sale	Gain c	h) r (loss)) minus (g)
a	42,337				42,337
b					
С					
d					
е					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		1)
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) s of col (ı) l (ʒ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a					42,337
b					
С					
d					
е					
If gain, also enter in Pa in Part I, line 8	gain or (loss) as defined in sections art I, line 8, column (c) (see instructi	ons) If (loss), enter -0	}	3	
	Under Section 4940(e) for Reprivate foundations subject to the sec				
If section 4940(d)(2) applies, I	•	ccion 4340(a) cax on in	et mvestment meon		
If "Yes," the foundation does n	ne section 4942 tax on the distributa ot qualify under section 4940(e) Do	not complete this part	· :		es 🔽 No
	nount in each column for each year,	see instructions before	e making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rat (col (b) divided by c	
2016	118,021		2,714,128		0 043484
2015	95,859		2,392,920		0 040059
2014	70,287		1,944,890		0 036139
2013	48,389		1,471,520		0 032884
2012	125		948,307	T	0 000132
2 Total of line 1, column (d)		2		0 152698
number of years the fou	ndation has been in existence if less oncharitable-use assets for 2017 fron	than 5 years			0 030540 3,282,222
5 Multiply line 4 by line 3			5		100,239
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		1,022
7 Add lines 5 and 6			7		101,261
. , ,	cions from Part XII, line 4 , . . eater than line 7, check the box in Pa		8 nplete that part usi	ng a 1% tax rate Se	135,300 e the Part VI

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

	,	
Dowt WITT	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,	
Part VIII	information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors	

1 List all officers, directors, trustee	es, fo	oundation managers an	d their compensation ((see instructions).	
(a) Name and address	(Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	
DONALD E FIKE		SIDENT/DIRECTOR	0		0 0
285 SOUTH FARNHAM	1 00				
GALESBURG, IL 61401			_		
SUZANNE FIKE MEEKER	1 00	RETARY/DIRECTOR	0	•	0
285 SOUTH FARNHAM GALESBURG, IL 61401					
ANTHONY AJ FIKE	DIRE	CTOR	0		0 0
285 SOUTH FARNHAM	1 00				
GALESBURG, IL 61401					
MISTY L FIKE	DIRE 1 00	ECTOR	0	1	0
285 SOUTH FARNHAM GALESBURG, IL 61401					
2 Compensation of five highest-pai	d er	nployees (other than th	ose included on line 1	-see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	ıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
		1			
		1			
		1			
		1			
		1			
Total number of other employees paid over	er \$5	50.000			0
3 Five highest-paid independent co					
(a) Name and address of each person		•	•	e of service	(c) Compensation
NONE			(-7.7)		
Total number of others receiving over \$50	000) for professional services.			0
Part IX-A Summary of Direct C					
List the foundation's four largest direct charitable			de relevant statistical inform	ation such as the number of	
organizations and other beneficiaries served, con					Expenses
1 THE DONALD E FIKE FAMILY FOUNDA					
STATE OF ILLINOIS THE FOUNDATION EDUCATIONAL, AND SCIENTIFIC PURF					
ORGANIZATIONS THAT QUALIFY AS E					
REVENUE CODE OF 1986 AS AMENDED			. , , ,		135,300
2					
3					
4	_				
Part IX-B Summary of Program	n-R	elated Investments (see instructions)	- L	
Describe the two largest program-related inve			·	and 2	Amount
1		·	<u> </u>		
2					
All other program-related investments	See	ınstructions			
3	-				
Total. Add lines 1 through 3 .					0
-					5 000 DE (2017)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts set aside for specific charitable projects that satisfy the

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

3

4

5

2

3a 3h

4

5

135.300

1.022

134,278

Form **990-PF** (2017)

753

162,336

Form **990-PF** (2017)

Page 9

XIIII (•	
	XIII	Į

b Total for prior years

a From 2012. **b** From 2013. . . . c From 2014. . . d From 2015. e From 2016.

Part

)-PF (20	017)	
KIII	Undistributed Income	(see instructions)

-PF	(2	01	7)	
	Į				Ī

1 Distributable amount for 2017 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2017

a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ a Applied to 2016, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must

6 Enter the net total of each column as

be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

(a)

Corpus

0

0

(b)

Years prior to 2016

(c)

2016

134,547

134,547

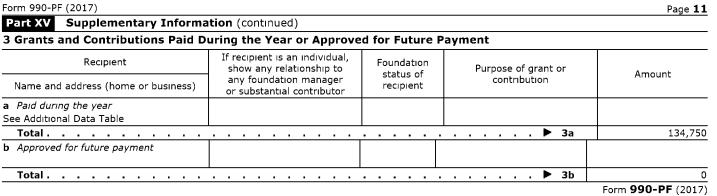
2017 163,089

- (309) 343-1550 b The form in which applications should be submitted and information and materials they should include
- THE SELECTION PROCESS OF CONTRIBUTIONS WILL BE CONDUCTED BY THE BOARD OF DIRECTORS A MAJORITY VOTE BY THE DIRECTORS WILL QUALIFY AN ORGANIZATION AND/OR SPECIFIC PROGRAMS OF AN ORGANIZATION FOR FUNDING
- Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

RECIPIENTS MUST PROVE THEIR STATUS AS 501(C)(3) ORGANIZATIONS OR OTHERWISE VERIFY THAT GRANT MONIES WILL BE USED EXCLUSIVELY FOR CHARITABLE PURPOSES AS DESCRIBED IN IRC SECTION 170(C)(1) OR 170(C)(2)(B) THE FOUNDATION WILL PERFORM AN ANNUAL REVIEW TO INSURE THAT ALL RECIPIENT ORGANIZATIONS MAINTAINED THEIR 501(C)(3) STATUS AND/OR USED GRANT MONIES EXCLUSIVELY FOR THE INTENDED CHARITABLE PURPOSE DESCRIBED IN IRC SECTION 170(C)(1) OR 170(C)(2)(B)



Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
		14	62,429	
ty				
´				
·		14	42,337	
	0		<u> </u>	
lculations)		1	<u> </u>	104,766
	hment of Exem	pt Purposes		
	(a) Business code tty lculations) the Accomplisi ch income is report	Business code Amount Tty O Iculations) The Accomplishment of Exemich income is reported in column (e) of	ty 14 14 14 14 14 14 14 14 16 18 18 18 18 18 18 18 18 18	(a) (b) (c) (d) Amount Exclusion code Amount 14 62,429 14 42,337 14 42,337

orm 9	90-PF (2								Pa	ge 13
Part	XVII	Information Re Exempt Organi		ansfers To a	ind Transact	ions and R	elationships With Non	charitable		
		anization directly or in Code (other than sectio					anization described in sectio olitical organizations?	n 501	Yes	No
a Tra	nsfers f	rom the reporting foun	dation to a no	ncharitable exe	empt organizatio	on of				
									Yes	
• •	er trans							. 1a(2)	<u>'</u>	No
			ıtable exempt	organization.				. 1b(1))	No
									_	No
		l of facilities, equipmer oursement arrangemen						. 1b(3)	_	No No
• •		or loan guarantees.						1b(4)		No
(6)	Perforr	nance of services or m	embership or f	fundraısıng solı	icitations			1b(6)		No
	-		-	· ·						No
of t	the good any tran	ls, other assets, or ser	vices given by ingement, show	the reporting f	foundation If th	ne foundation he goods, oth	ould always show the fair m received less than fair mark er assets, or services receive ption of transfers, transactions,	et value ed	angemen	nts
1a(1)		2,500	TONICA VOLU	INTEER FIRE D	EPARTMENT		TO SUPPORT THE CHARITA) EXEMPT ORGANIZATION	BLE, PUBLIC	PURPOS	SE OF
1a(1)		10,000	TONICA CEME	ETERY ASSOCIA	ATION	CASH GRANT	TO SUPPORT THE IRC SECT PURPOSE OF THE 501(C)(1:		5)	
						ORGANIZATI	JN			
2n In t	ho foun	dation directly or indire	actly affiliated	with or rolator	d to one or mo	ro tay ayamat	organizations			
des	cribed i	•	Code (other t	•	•			. 🗆 Yes	✓	No
		(a) Name of organization		(Ь) Type of organiza	ation	(c) Description (of relationship		
Sign	of my which	knowledge and belief n preparer has any kno	, it is true, cor		olete Declaratio		mpanying schedules and sta (other than taxpayer) is bas		rmation	n of
Here	 -	***** ignature of officer or to			2019-01-28 Date)	***** 	return with the prepa below	_	
		I					·-	(see instr)?	⊻ Yes	⊔ No
Paid		Print/Type preparer's DELINDA HAWKIN:		Preparer's Sign	ature	Date	Check if self- employed ▶ □	ΓΙΝ P0048	5614	
Prep	arer Only	Firm's name ► RSM	US LLP				F	rm's EIN ▶42	2-07143	325
		Firm's address ▶ 11	.7 E MAIN ST S	STE 210						
		l G	ALESBURG TI	61401			P	none no (309	9) 342-8	8026

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, Foundation Purpose of grant or show any relationship to status of contribution		Amount						
Name and address (home or business)	any foundation manager or substantial contributor	recipient							
a Paid during the year									
ACHIEVEMENT UNLIMITED INC 285 SOUTH FARNHAM STREET GALESBURG, IL 61401	N/A	PC	TO PROVIDE & OPERATE LONG- TERM CARE FACILITIES FOR THE DEVELOPMENTALLY DISABLED	20,000					
ILLINOIS VALLEY ANIMAL RESCUE INC PO BOX 284 PERU, IL 61354	N/A	PC	TO RESCUE, PROVIDE CARE AND COMFORT FOR ABUSED, NEGLECTED AND HOMELESS ANIMALS	5,000					

ILLINOIS VALLEY ANIMAL RESCUE INC PO BOX 284 PERU, IL 61354	N/A	PC	TO RESCUE, PROVIDE CARE AND COMFORT FOR ABUSED, NEGLECTED AND HOMELESS ANIMALS	5,000
ILLINOIS VALLEY YMCA 300 WALNUT DRIVE	N/A	PC	TO BUILD HEALTHY SPIRIT, MIND, AND BODY FOR ALL	5,000

I PEOPLE

PERU, IL 61354

134,750

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
KCCDD INC2015 WINDISH DR GALESBURG, IL 61401	N/A	PC	TO CREATE OPPORTUNITIES FOR INDIVIDUALS TO MAXIMIZE INDEPENDENCE & POTENTIAL	10,000
MAYO CLINIC200 FIRST STREET SW	N/A	PC	TO PROVIDE EDUCATION,	30,000

MAYO CLINIC200 FIRST STREET SW ROCHESTER, MN 55905	N/A	PC	TO PROVIDE EDUCATION, RESEARCH, AND PATIENT CARE	
PET PROJECT INCPO BOX 163	N/A	PC	TO PROVIDE SHELTER AND	

3a

ROCHESTER, MN 55905			RESEARCH, AND PATIENT CARE	
PET PROJECT INCPO BOX 163 OTTAWA, IL 61350	N/A	PC	TO PROVIDE SHELTER AND ADOPTION SERVICES FOR CATS	5,000

Total				134,750
PET PROJECT INCPO BOX 163 OTTAWA, IL 61350	N/A	PC	TO PROVIDE SHELTER AND ADOPTION SERVICES FOR CATS AND DOGS	5,000

PET PROJECT INCPO BOX 163	N/A	PC	TO PROVIDE SHELTER AND	5
OTTAWA, IL 61350			ADOPTION SERVICES FOR CATS	
			AND DOGS	

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
RESIDENTIAL ALTERNATIVES OF ILLINOIS INC 285 SOUTH FARNHAM STREET GALESBURG, IL 61401	N/A	PC	TO PROVIDE & OPERATE NURSING & ASSISTED LIVING FACILITIES FOR THE ELDERLY	11,500
THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF KNOX COUNTY ILLINOIS 1324 W CARL SANDBURG DRIVE GALESBURG, IL 61401	N/A	PC	TO SUPPORT PROGRAMS THAT BUILD A HEALTHY SPIRIT, MIND, AND BODY FOR ALL PEOPLE	10,000
TONICA VOLUNTEER FIRE DEPARTMENT	N/A	NC	TO PROVIDE FIRE AND RESCUE	2,500

ASSOCIATION OF KNOX COUNTY ILLINOIS 1324 W CARL SANDBURG DRIVE GALESBURG, IL 61401	TN/A	FC	BUILD A HEALTHY SPIRIT, MIND, AND BODY FOR ALL PEOPLE	10,00
		l		

SERVICES TO SURROUNDING

507 N FIRST ST

TONICA, IL 61370 COMMUNITIES

134,750

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA, IL 61801	N/A	PC	TO SUPPORT THE UNIVERSITY'S TEACHING, RESEARCH, PUBLIC SERVICE AND ECONOMIC DEVELOPMENT MISSION	10,000	
TONICA UNITED METHODIST CHURCH 423 E WAUPONIS ST PO BOX 98 TONICA, IL 613700098	N/A	PC	TO MAKE DISCIPLES OF JESUS CHRIST FOR THE TRANSFORMATION OF THE WORLD	750	
CT TURE FORE THE KIRG	N/A	D.C.	TO ADVANCE CURES AND	F 000	

TONICA, IL 613700098			WORLD	
ST JUDE FORE THE KIDS 262 DANNY THOMAS PLACE MEMPHIS, TN 381053678	N/A	PC	TO ADVANCE CURES, AND MEANS OF PREVENTION, FOR PEDIATRIC CATASTROPHIC DISEASES THROUGH RESEARCH AND TREATMENT	5,000
Total				134,750

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)		recipient			
a Paid during the year					
GALESBURG MUSEUMS INC DBA DISCOVERY DEPOT 128 S CHAMBERS ST GALESBURG, IL 61401	N/A	PC	TO PROVIDE INTERACTIVE HANDS-ON EXPERIENCES FOR CHILDREN THAT TOUCH ON THE HISTORY, CULTURE, ARTS, INDUSTRY, EDUCATION AND TRADITIONS IN THE GALESBURG AREA	10,000	
TONICA CEMETERY ASSOCIATION PO BOX 275 TONICA IL 61370	N/A	NC	FUNDS ARE IRREVOCABLY DEDICATED TO THE CARE OF THE CEMETERY AS A WHOLE	10,000	

TONICA, IL 613/0 AND WILL SUPPORT THE TONICA CEMETERY ROAD PROJECT

134,750 Total . . За

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TY 2017 Accounting Fee	s Schedule					
Name: DONALD E FIKE FAMILY FOUNDATION						
	EIN: 45-254	18424				
Accounting Fees Schedule						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

1,575

525

2,100

ACCOUNTING FEES

Name: DONALD E FIKE FAMILY FOUNDATION FIN: 45-2548424

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			ETI4.	45 2546424					
Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
TONICA CEMETERY ASSOCIATION	PO BOX 275 TONICA, IL 61370	2018-04-30		FUNDS ARE IRREVOCABLY DEDICATED TO THE CARE OF THE CEMETERY AS A WHOLE THE VOLUNTARY CONTRIBUTION WAS A DIRECT CHARITABLE ACT AND UNRELATED TO ANY PARTICULAR CEMETERY LOT OR CRYPT	10,000	NONE	4/30/2018		THE GRANT MONEY WAS PROPERLY USED TO FURTHER THE 501(C)(13) RECIPIENT ORGANIZATION'S EXEMPT PURPOSE AS A CHARITABLE ORGANIZATION UNDER IRC SECTION 170(C)(5)

DLN: 93491028002079

TY 2017 Investments Corporate Bonds Schedule	

DLN: 93491028002079

Name: DONALD E FIKE FAMILY FOUNDATION

EIN: 45-254842	1
Investments Corporate Bonds Schedule	

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PROMISSORY NOTE

Investments Corporate Bonds Schedule							
Name of Bond	End of Year Book Value	End of Year Fair Market Value					
HOMETOWN COMMUNITY BANCORP, INC. SUBORDINATED	280,000	280,000					

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TY 2017 Investments Corporate Stock Schedule

Name: DONALD E FIKE FAMILY FOUNDATION

EIN: 45-2548424

Name of Stock	End of Year Book Value	End of Year Fair Market Value	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - AMERISOURCEBERGEN CO.	657	657	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - ADIENT PLC F	7,613	7,613	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - AMERICAN CENTURY EQUITY GROWTH	744,807	744,807	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - AVIS BUDGET GROUP	38,990	38,990	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - CVS HEALTH CORP	1,268	1,268	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - EXPRESS SCRIPTS HLDG	14,707	14,707	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - HCA HEALTHCARE INC.	516	516	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - HUMANA INC.	4,365	4,365	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - JANUS GLOBAL RESEARCH FUND	1,243,183	1,243,183	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - MALLINCKRODT PUB F	3,151	3,151	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - NVENT ELECTRIC PLC F	9,722	9,722	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - OAKMARK INTL FD INV	337,447	337,447	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - PENTAIR PLC F	15,667	15,667	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - SCHWAB SMALL CAP INDEX FUND	373,477	373,477	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - YUM BRANDS INC.	32,532	32,532	
INVESTMENT IN AVAILABLE FOR SALE SECURITIES - YUM CHINA HOLDINGS	15,720	15,720	

DLN: 93491028002079

Name: DONALD E FIKE FAMILY FOUNDATION

EIN: 45-2548424

Other Assets Schedule							
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value				
INCOME TAX RECEIVABLE	180	0	0				
INTEREST RECEIVABLE	7,000	3,500	3,500				

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TY 2017 Other Expenses Schedule								
Name:	DONALD E FIKE	FAMILY FOUNDA	ATION					
EIN:	EIN: 45-2548424							
Other Expenses Schedule								
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
LICENSES FEES	25	0		25				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491028002079				
TY 2017 Other Increases Schedule							
Name:	DONALD E FIR	(E FAMILY FOUNDATION					
EIN:	45-2548424						
De	escription		Amount				
UNREALIZED GAIN ON INVESTMENTS			194,294				

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TY 2017 Taxes Schedule									
Name	: DONALD E F	TKE FAMILY FOUN	DATION						
EIN	: 45-2548424								
Category	Amount	Net Investment	Adjusted Net	Disbursements					
Category	Amount	Income	Income	for Charitable					
				Purposes					
FEDERAL TAXES	999	999		0					

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491028002079		
Schedule B		Schedi	ule of Contributo	ors		OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	0-PF PF) and its instructi	2017					
Name of the organizati DONALD E FIKE FAMILY F					Employer id	lentification number		
Organization type (che	ck one)				45-2548424			
2	,							
Filers of:	Section:							
Form 990 or 990-EZ	☐ 501(c)() (enter number) o	organization					
	☐ 4947(a)(1) nonexempt cha	ritable trust not treated a	as a private founda	ition			
	☐ 527 politi	ical organization						
Form 990-PF	✓ 501(c)(3)) exempt private fo	oundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	☐ 501(c)(3)	501(c)(3) taxable private foundation						
			PF that received, during Complete Parts I and II S					
Special Rules								
under sections 5 received from an	09(a)(1) and 170(b)	(1)(A)(vi), that che luring the year, tot	g Form 990 or 990-EZ th scked Schedule A (Form al contributions of the gro plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that		
during the year,	total contributions o	f more than \$1,000	, or (10) filing Form 990 0 <i>exclusively</i> for religious animals Complete Part	s, charitable, scien				
during the year, If this box is che purpose Don't c	contributions <i>exclus</i> cked, enter here the omplete any of the I	cively for religious, total contributions parts unless the G	, or (10) filing Form 990 charitable, etc., purpose s that were received duri eneral Rule applies to the or more during the year	es, but no such con ng the year for an nis organization be	ntributions tota exclusively re ecause it recei	aled more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>		
990-EZ, or 990-PF), but	ıt must answer "No	o" on Part IV, line 2	ile and/or the Special Ru 2, of its Form 990, or che at it doesn't meet the filin	ck the box on line	H of its			
For Paperwork Reduction A for Form 990, 990-EZ, or 99		tructions	Cat No 30613X	Schedu	ule B (Form 990	, 990-EZ, or 990-PF) (2017)		

Name of organization DONALD E FIKE FAMILY FOUNDATION		Employer identification 45-2548424	Employer identification number 45-2548424	
Part I	Contributors (See instructions) Use duplicate copies of Part I if ac	dditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	DONALD E FIKE 285 SOUTH FARNHAM STREET GALESBURG, IL61401	\$ 155,432	(Complete Part II for noncash	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions) (d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		s	Person Payroll Noncash (Complete Part II for noncash	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions) (d) Type of contribution	
			Person	

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 3 Name of organization **Employer identification** DONALD E FIKE FAMILY FOUNDATION number 45-2548424 Part II Noncash Property (See Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) See Additional Data Table \$ (a) (c) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions)

		_ \$	·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_\$	

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

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

Additional Data

Software ID:

Software Version:

EIN: 45-2548424

Name: DONALD E FIKE FAMILY FOUNDATION

Form 990 Schedule B. Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

Form 990 Schedule B, Part II - Noncash Property (see instructions) ose duplicate copies of Part II if additional space is needed						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
1	8 SHS AMERISOURCE BERGEN CO (ABC)	<u> </u>	2017-12-28			
1	143 SHS ADIENT PLC F (ADNT)	<u> </u>	2017-12-28			
1	1000 SHS AVIS BUDGET GROUP (CAR)	<u>\$ 44,479</u>	2017-12-28			
1	20 SHS CVS CAREMARK (CVS)	<u> </u>	2017-12-28			
1	194 SHS EXPRESS SCRIPTS (ESRX)	<u> </u>	2017-12-28			
1	5 SHS HCA HOLDINGS INC (HCA)	\$ 441	2017-12-28			
1	15 SHS HUMANA (HUM)	<u> </u>	2017-12-28			
<u>1</u>	187 SHS MALLINCKRODT (MNK)	<u> </u>	2017-12-28			
1	359 SHS PENTAIR LTD (PNR)	\$ 25,130	2017-12-28			
1	400 SHS YUM BRANDS (YUM)	\$ 33,056	2017-12-28			

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (d) FMV (or estimate) No. from Part I Description of noncash property given Date received (See instructions) 400 SHS YUM BRANDS CHINA HOLDINGS (YUMC) \$ 16,238 2017-12-28