

990

Form Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2017
Open to Public
Inspection

► Do not enter social security numbers on this form as it may be made public. 1806

► Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning JUL 1, 2017 and ending JUN 30, 2018

B Check if applicable	C Name of organization IVY TECH FOUNDATION, INC.		D Employer identification number 23-7073977
Doing business as Number and street (or P.O. box if mail is not delivered to street address) 50 W. FALL CREEK PKWY NORTH DRIVE		Room/suite	E Telephone number 317-921-4749
City or town, state or province, country, and ZIP or foreign postal code INDIANAPOLIS, IN 46208-5752			G Gross receipts \$ 26,946,754.
F Name and address of principal officer KEVIN HONIGFORD SAME AS C ABOVE			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
J Website: ► WWW.IVYTECH.EDU/GIVING		H(c) Group exemption number ►	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		L Year of formation: 1969 M State of legal domicile: IN	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO RECEIVE, HOLD, INVEST AND ADMINISTER PROPERTY AND TO SOLICIT AND RECEIVE CONTRIBUTIONS AND TO		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3 57	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 55	
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5 0	
	6 Total number of volunteers (estimate if necessary)	6 400	
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.	
b Net unrelated business taxable income from Form 990-T, line 34 RECEIVED		7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 10,174,515.	Current Year 14,124,483.
	9 Program service revenue (Part VIII, line 2g)	9 0.	10 0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10 2,721,655.	11 2,946,630.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11 185,667.	12 327,375.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12 13,081,837.	13 17,398,488.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13 12,357,271.	14 3,913,772.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	14 0.	15 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15 0.	16 0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	16a 0.	17 265,221.
	b Total fundraising expenses (Part IX, column (D), line 25) ► 407,029.	17 12,114,506.	18 11,977,075.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	18 24,471,777.	19 16,156,068.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	19 <11,389,940.	20 1,242,420.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 121,990,168.	End of Year 120,973,547.
	21 Total liabilities (Part X, line 26)	21 20,853,755.	22 17,565,831.
	22 Net assets or fund balances Subtract line 21 from line 20	22 101,136,413.	23 103,407,716.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	► Signature of officer <i>John M Murphy</i>	Date <i>5/13/19</i>
	► JOHN MURPHY, PRESIDENT Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name SCOTT A. SCHUSTER	Preparer's signature SCOTT A. SCHUSTER	Date 05/13/19	Check <input type="checkbox"/> if self-employed	PTIN P00019243
	Firm's name ► KSM BUSINESS SERVICES, INC.		Firm's EIN ►	35-2123203	
	Firm's address ► P.O. BOX 40857 INDIANAPOLIS, IN 46240-0857		Phone no.	(317) 580-2000	

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission**TO RECEIVE, HOLD, INVEST AND ADMINISTER PROPERTY AND TO SOLICIT AND RECEIVE CONTRIBUTIONS AND TO MAKE EXPENDITURES TO OR FOR THE BENEFIT OF IVY TECH COMMUNITY COLLEGE.**2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ **3,888,522.** including grants of \$ **3,888,522.**) (Revenue \$)
SOLICITING, RECEIVING, ADMINISTERING AND DISTRIBUTING DONATIONS FOR FINANCIAL AID FOR STUDENTS ATTENDING IVY TECH COMMUNITY COLLEGE.

4b (Code) (Expenses \$ **6,518,924.** including grants of \$) (Revenue \$)
HELPING IVY TECH COMMUNITY COLLEGE OF INDIANA WITH ITS NEEDS FOR LAND, FACILITIES, AND EQUIPMENT.

4c (Code) (Expenses \$ **1,682,169.** including grants of \$) (Revenue \$)
PROVIDING SUPPORT FOR SPECIAL, INNOVATIVE PROGRAMS OF IVY TECH COMMUNITY COLLEGE OF INDIANA.

4d Other program services (Describe in Schedule O)(Expenses \$ **2,556,062.** including grants of \$ **25,250.**) (Revenue \$)4e Total program service expenses ► **14,645,677.**

ROM KABDGIJ

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II
- 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
 - b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
 - c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
 - d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
 - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
 - b Was the organization included in consolidated, independent audited financial statements for the tax year?
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV
- 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I
- 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		
31	Did the organization liquidate, terminate, or dissolve and cease operations?		
	If "Yes," complete Schedule N, Part I		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
	Note. All Form 990 filers are required to complete Schedule O		

Form 990 (2017)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V

	Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	62
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).	7a	X
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	X
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
d If "Yes," indicate the number of Forms 8282 filed during the year	7e	X
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	9a	
9 Sponsoring organizations maintaining donor advised funds.	9b	
10 Section 501(c)(7) organizations. Enter	10a	
a Initiation fees and capital contributions included on Part VIII, line 12	10b	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	11a	
11 Section 501(c)(12) organizations. Enter	11b	
a Gross income from members or shareholders	12a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	12b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	13a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	13b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	13c	
a Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the instructions for additional information the organization must report on Schedule O</i>	14a	X
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	14b	
c Enter the amount of reserves on hand		
14a Did the organization receive any payments for indoor tanning services during the tax year?		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **57**

1b Enter the number of voting members included in line 1a, above, who are independent **55**

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? **2**

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? **3**

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? **4**

5 Did the organization become aware during the year of a significant diversion of the organization's assets? **5**

6 Did the organization have members or stockholders? **6**

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? **7a**

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? **7b**

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body? **8a**

b Each committee with authority to act on behalf of the governing body? **8b**

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O **9**

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates? **10a**

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? **10b**

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? **11a**

b Describe in Schedule O the process, if any, used by the organization to review this Form 990 **12a**

12a Did the organization have a written conflict of interest policy? If "No," go to line 13 **12b**

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? **12c**

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done **13**

13 Did the organization have a written whistleblower policy? **13**

14 Did the organization have a written document retention and destruction policy? **14**

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

a The organization's CEO, Executive Director, or top management official **15a**

b Other officers or key employees of the organization **15b**

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) **16a**

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? **16b**

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? **16b**

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **IN**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website Upon request Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records ► **KEVIN HONIGFORD - 317-921-4749**

50 WEST FALL CREEK PARKWAY NORTH DRIVE, INDIANAPOLIS, IN 46208-5752

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
 Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee".
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee				
(1) TERRY ANKER CHAIRPERSON	2.00	X		X				0.	0.	0.
(2) SUE ELLSPERMANN PRESIDENT, COLLEGE (BOARD)	2.00	X						0.	369,587.	86,871.
(3) JOHN M. MURPHY PRESIDENT, FOUNDATION (BOA)	24.00							0.	274,398.	68,711.
(4) MICHAEL M. HARMLESS VICE CHAIRPERSON	16.00	X		X				0.	0.	0.
(5) PATRICK R. RALSTON TREASURER	2.00			X				0.	0.	0.
(6) TERRY BOWEN SECRETARY	2.00			X				0.	0.	0.
(7) KEVIN AHAUS BOARD MEMBER	2.00			X				0.	0.	0.
(8) JAMES AULT BOARD MEMBER	2.00			X				0.	0.	0.
(9) KENNETH BAKER BOARD MEMBER	2.00			X				0.	0.	0.
(10) PHILLIP BANE BOARD MEMBER	2.00			X				0.	0.	0.
(11) JESSE BRAND BOARD MEMBER	2.00			X				0.	0.	0.
(12) CATHRYN H. BRODERICK BOARD MEMBER	2.00			X				0.	0.	0.
(13) CONSTANCE BROWN BOARD MEMBER	2.00			X				0.	0.	0.
(14) W. QUINN BUCKNER BOARD MEMBER	2.00			X				0.	0.	0.
(15) LORENE M. BURKHART BOARD MEMBER	2.00			X				0.	0.	0.
(16) GEORGE A BUSKIRK, JR. BOARD MEMBER	2.00			X				0.	0.	0.
(17) LEX CURRY BOARD MEMBER	2.00			X				0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(18) STEPHEN DAILY BOARD MEMBER	2.00		X				0.	0.	0.
(19) SALLY DEVOE BOARD MEMBER	2.00		X				0.	0.	0.
(20) RONALD K. FAUQUHER BOARD MEMBER	2.00		X				0.	0.	0.
(21) CONNIE FERGUSON BOARD MEMBER	2.00		X				0.	0.	0.
(22) DAVID FINDLAY BOARD MEMBER	2.00		X				0.	0.	0.
(23) CHARLES J. GARCIA BOARD MEMBER	2.00		X				0.	0.	0.
(24) WILLIAM R. GOINS BOARD MEMBER	2.00		X				0.	0.	0.
(25) DAVID R. GOODMAN, JR. BOARD MEMBER	2.00		X				0.	0.	0.
(26) JAMES GOTTHARD BOARD MEMBER	2.00		X				0.	0.	0.
1b Sub-total							0.	643,985.	155,582.
c Total from continuation sheets to Part VII, Section A							0.	462,767.	125,456.
d Total (add lines 1b and 1c)							0.	1,106,752.	281,038.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 0

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
VITRUVIAN 5420 CENTRAL AVE, INDIANAPOLIS, IN 46220	PLANNED GIFT SOLICITATION	114,447.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 1

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2017)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(27) WILLIAM GUTZWILLER BOARD MEMBER	2.00	X					0.	0.	0.
(28) MARK F. HAGEMAN BOARD MEMBER	2.00	X					0.	0.	0.
(29) CATHERINE POPP HOFFMAN BOARD MEMBER	2.00	X					0.	0.	0.
(30) PAULA HUGHES-SCHUH BOARD MEMBER	2.00	X					0.	0.	0.
(31) ALBERT G. HUNTINGTON BOARD MEMBER	2.00	X					0.	0.	0.
(32) J. MICHAEL JARVIS BOARD MEMBER	2.00	X					0.	0.	0.
(33) REBECCA KUBACKI BOARD MEMBER	2.00	X					0.	0.	0.
(34) MICHAEL LUNSFORD BOARD MEMBER	2.00	X					0.	0.	0.
(35) MARK T. MAASSEL BOARD MEMBER	2.00	X					0.	0.	0.
(36) LEE J. MARCHANT BOARD MEMBER	2.00	X					0.	0.	0.
(37) JAMES C. MARCUCCILLI BOARD MEMBER	2.00	X					0.	0.	0.
(38) ANTHONY J. MORAVEC BOARD MEMBER	2.00	X					0.	0.	0.
(39) DAVID MURRAY BOARD MEMBER	2.00	X					0.	0.	0.
(40) JAMES ORBIK BOARD MEMBER	2.00	X					0.	0.	0.
(41) IZABELA OZDEMIR BOARD MEMBER	2.00	X					0.	0.	0.
(42) PAUL PERKINS BOARD MEMBER	2.00	X					0.	0.	0.
(43) DONNA PFEIL BOARD MEMBER	2.00	X					0.	0.	0.
(44) LU B. PORTER BOARD MEMBER	2.00	X					0.	0.	0.
(45) MAMON POWERS III BOARD MEMBER	2.00	X					0.	0.	0.
(46) MELISSA PROFFITT BOARD MEMBER	2.00	X					0.	0.	0.
Total to Part VII, Section A, line 1c									

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

Total to Part VII, Section A, line 1c

462,767. 125,456.

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts					
1 a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c	755,554.			
d Related organizations	1d	1,423,332.			
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f	11,945,597.			
g Noncash contributions included in lines 1a-1f \$		1,017,785.			
h Total. Add lines 1a-1f		14,124,483.			
Program Service Revenue	Business Code				
2 a					
b					
c					
d					
e					
f All other program service revenue					
g Total. Add lines 2a-2f					
3 Investment income (including dividends, interest, and other similar amounts)		1,751,369.			1,751,369.
4 Income from investment of tax-exempt bond proceeds					
5 Royalties		21,964.			21,964.
6 a Gross rents	(i) Real	2,193,180.			
b Less rental expenses	(ii) Personal	2,295,870.			
c Rental income or (loss)		<102,690. >			
d Net rental income or (loss)			<102,690. >	<60,138. >	<42,552. >
7 a Gross amount from sales of assets other than inventory	(i) Securities	7,054,067.	942,178.		
b Less cost or other basis and sales expenses	(ii) Other	6,173,389.	627,595.		
c Gain or (loss)		880,678.	314,583.		
d Net gain or (loss)				1,195,261.	1,195,261.
8 a Gross income from fundraising events (not including \$ 755,554. of contributions reported on line 1c) See Part IV, line 18		a 166,465.			
b Less: direct expenses	b	451,412.			
c Net income or (loss) from fundraising events			<284,947. >		<284,947. >
9 a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				
11 a VENDING INCOME	900099	643,444.			643,444.
b OTHER	900099	49,604.			49,604.
c					
d All other revenue					
e Total. Add lines 11a-11d		693,048.			
12 Total revenue. See instructions		17,398,488.	<60,138. >	0.	3,334,143.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	25,250.	25,250.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,888,522.	3,888,522.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	49,400.	49,400.		
d Lobbying				
e Professional fundraising services. See Part IV, line 17	265,221.			265,221.
f Investment management fees	137,193.		137,193.	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	59,628.		59,628.	
12 Advertising and promotion	17,054.			17,054.
13 Office expenses	74,863.	1,365.	5,967.	67,531.
14 Information technology	125,123.		125,123.	
15 Royalties				
16 Occupancy				
17 Travel	20,001.	19,058.	943.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	1,277.	1,277.		
19 Conferences, conventions, and meetings	28,723.	20,039.	8,684.	
20 Interest	906,411.	876,269.	19,041.	11,101.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BUILDING IMPROVEMENTS	4,683,211.	4,683,211.		
b SPECIAL PROGRAMS	1,682,169.	1,682,169.		
c OUTREACH PROGRAM EXPENS	1,120,449.	1,120,449.		
d IN-KIND EXPENSES	1,009,389.	1,009,389.		
e All other expenses SEE SCH O	2,062,184.	1,318,679.	697,383.	46,122.
25 Total functional expenses. Add lines 1 through 24e	16,156,068.	14,645,677.	1,103,362.	407,029.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	3,338.	1	3,188.
	2 Savings and temporary cash investments	6,506,908.	2	5,255,806.
	3 Pledges and grants receivable, net	9,404,543.	3	11,952,799.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	852,894.	9	265,030.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 34,155,011.		
	b Less accumulated depreciation	10b 10,263,840.	25,894,119.	10c 23,891,171.
	11 Investments - publicly traded securities	43,419,337.	11	44,683,869.
	12 Investments - other securities See Part IV, line 11	5,025,825.	12	5,879,579.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	30,883,204.	15	29,042,105.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	121,990,168.	16	120,973,547.
Liabilities	17 Accounts payable and accrued expenses	2,211,383.	17	1,138,528.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	10,004,139.	23	9,225,148.
	24 Unsecured notes and loans payable to unrelated third parties	2,712,407.	24	1,664,255.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	5,925,826.	25	5,537,900.
	26 Total liabilities. Add lines 17 through 25	20,853,755.	26	17,565,831.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	13,087,318.	27	15,710,097.
	28 Temporarily restricted net assets	56,535,465.	28	55,018,531.
	29 Permanently restricted net assets	31,513,630.	29	32,679,088.
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	101,136,413.	33	103,407,716.
	34 Total liabilities and net assets/fund balances	121,990,168.	34	120,973,547.

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI

1 Total revenue (must equal Part VIII, column (A), line 12)	1	17,398,488.
2 Total expenses (must equal Part IX, column (A), line 25)	2	16,156,068.
3 Revenue less expenses Subtract line 2 from line 1	3	1,242,420.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	101,136,413.
5 Net unrealized gains (losses) on investments	5	942,044.
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain in Schedule O)	9	86,839.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	103,407,716.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
2b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3a	X
	3b	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public
Inspection

Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number

23-7073977

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 06

2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))

3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:

5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university

10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 732021 10-06-17 Schedule A (Form 990 or 990-EZ) 2017

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	24,666,855.	19,675,207.	19,604,541.	10,174,515.	14,124,483.	88,245,601.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	24,666,855.	19,675,207.	19,604,541.	10,174,515.	14,124,483.	88,245,601.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,229,065.
6 Public support. Subtract line 5 from line 4						82,016,536.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	24,666,855.	19,675,207.	19,604,541.	10,174,515.	14,124,483.	88,245,601.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on	4,966,080.	4,649,787.	4,950,749.	4,222,081.	3,966,513.	22,755,210.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						111,000,811.
12 Gross receipts from related activities, etc (see instructions)				12	5,115,364.	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input checked="" type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	73.89	%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	72.75	%
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			
<input checked="" type="checkbox"/>			
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			
<input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			
<input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			
<input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			
<input type="checkbox"/>			

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

11 Has the organization accepted a gift or contribution from any of the following persons?

- A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- A family member of a person described in (a) above?
- A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year
- Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)

	Yes	No
1		

Section D. All Type III Supporting Organizations

- Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)
- By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).

- The organization satisfied the Activities Test. Complete line 2 below
- The organization is the parent of each of its supported organizations. Complete line 3 below
- The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)

2 Activities Test Answer (a) and (b) below.

- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities
- Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement

	Yes	No
2a		
2b		

3 Parent of Supported Organizations Answer (a) and (b) below.

- Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

	Yes	No
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information (See instructions.)

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017Open to Public
Inspection

Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number

23-7073977**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
	<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year		
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►		
4 Number of states where property subject to conservation easement is located ►		
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►		
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$		
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements		

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
(i) Revenue included on Form 990, Part VIII, line 1	► \$
(ii) Assets included in Form 990, Part X	► \$ 82,970.
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a Revenue included on Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2017

732051 10-09-17

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programse Other USE IN ART EDUCATION

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

 Yes No**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

 Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

 Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	34,478,825.	32,070,610.	33,258,201.	29,318,062.	26,075,792.
b Contributions	1,132,904.	277,091.	680,182.	4,694,790.	826,173.
c Net investment earnings, gains, and losses	2,073,102.	3,336,450.	<519,319. >	545,012.	3,608,105.
d Grants or scholarships	1,277,245.	1,185,210.	1,072,030.	1,143,560.	1,017,829.
e Other expenditures for facilities and programs		20,116.	276,424.	156,103.	174,179.
f Administrative expenses					
g End of year balance	36,407,586.	34,478,825.	32,070,610.	33,258,201.	29,318,062.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► 89.76 %

b Permanent endowment ► 89.76 %

c Temporarily restricted endowment ► 10.24 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
3a(i)	<input checked="" type="checkbox"/>	
3a(ii)		<input checked="" type="checkbox"/>

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		6,384,352.		6,384,352.
b Buildings		27,226,593.	9,830,234.	17,396,359.
c Leasehold improvements				
d Equipment		544,066.	433,606.	110,460.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)				► 23,891,171.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) LOAN RECEIVABLE	23,510,509.
(2) INVESTMENT IN CEI	415.
(3) NOTE RECEIVABLE FROM RELATED PARTY	5,531,181.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) ►	29,042,105.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	363,378.
(3) INTEREST RATE SWAP LIABILITY	161,356.
(4) CAPITALIZED LEASE OBLIGATIONS	5,013,166.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ►	5,537,900.

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1 Total revenue, gains, and other support per audited financial statements	1	24,036,505.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments	2a	942,044.
b Donated services and use of facilities	2b	3,485,087.
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII)	2d	2,395,782.
e Add lines 2a through 2d	2e	6,822,913.
3 Subtract line 2e from line 1	3	17,213,592.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	137,193.
b Other (Describe in Part XIII)	4b	47,703.
c Add lines 4a and 4b	4c	184,896.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	17,398,488.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1 Total expenses and losses per audited financial statements	1	23,443,962.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		
a Donated services and use of facilities	2a	3,485,087.
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII)	2d	3,987,703.
e Add lines 2a through 2d	2e	7,472,790.
3 Subtract line 2e from line 1	3	15,971,172.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	137,193.
b Other (Describe in Part XIII)	4b	47,703.
c Add lines 4a and 4b	4c	184,896.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	16,156,068.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

PART III, LINE 4:

COLLECTION CONSISTS OF 50 PIECES OF ARTWORK IN LAFAYETTE REGION, FOR ONE OR MORE OF THE FOLLOWING PURPOSES: 1) FURTHERANCE OF IVY TECH ART PROGRAM, 2) TEACHING ART TO THE ART STUDENTS 3) DISPLAY AS PART OF ITS ART COLLECTIONS.

PART V, LINE 4:

THE ENDOWMENT FUNDS ARE UTILIZED TO ASSIST THE MISSION OF IVY TECH COMMUNITY COLLEGE. MOST FUNDS PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING THE COLLEGE. THE REMAINDER OF THE FUNDS PROVIDE PROGRAMS, FACILITIES, SUPPLIES AND EQUIPMENT TO THE COLLEGE. THE FOUNDATION'S POLICY IS TO ANNUALLY DISTRIBUTE 4% OF THE ENDOWMENT'S ASSET VALUE.

Part XIII Supplemental Information (continued)**PART X, LINE 2:**

IVY TECH FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC). CEP IS A SINGLE MEMBER, MEMBER MANAGED LIMITED LIABILITY COMPANY THAT IS TREATED AS A DISREGARDED ENTITY FOR FEDERAL AND STATE INCOME TAX PURPOSES, AND THUS IS ALSO EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE IRC. IN ADDITION, IVY TECH FOUNDATION HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE NOT TO BE A PRIVATE FOUNDATION WITHIN THE MEANING OF SECTION 509(A) OF THE IRC. THERE WAS NO UNRELATED BUSINESS INCOME FOR THE YEARS ENDED JUNE 30, 2018 AND 2017. THEREFORE, NO PROVISION OR LIABILITY FOR INCOME OR EXCISE TAXES HAS BEEN INCLUDED IN THE CONSOLIDATED FINANCIAL STATEMENTS. THE FOUNDATION FILES U.S. FEDERAL AND STATE OF INDIANA TAX AND INFORMATIONAL RETURNS. THE FOUNDATION IS NO LONGER SUBJECT TO U.S. FEDERAL AND STATE INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE THE YEAR ENDED JUNE 30, 2015.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES	2,295,870.
GAIN ON RATE SWAP	86,839.
CHANGE IN BENEFICIAL INTEREST	13,023.
INCOME OF SUBSIDIARY	50.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	2,395,782.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

UNCOLLECTED PLEDGES	47,206.
SPECIAL EVENT EXPENSES	497.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	47,703.

Part XIII Supplemental Information (continued)**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

RENTAL EXPENSES	2,295,870.
EXPENSES OF SUBSIDIARIES	1,678,810.
CHANGE IN BENEFICIAL INTEREST	13,023.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	3,987,703.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

UNCOLLECTED PLEDGES	47,206.
SPECIAL EVENT EXPENSES	497.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	47,703.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ

► Go to www.irs.gov/Form990 for the latest instructions.

Name of the organization

Employer identification number

23-7073977

IVY TECH FOUNDATION, INC.

23-7073977

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations e Solicitation of non-government grants
b Internet and email solicitations f Solicitation of government grants
c Phone solicitations g Special fundraising events
d In-person solicitations

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

IN

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1 CULINARY ARTS DINNER (event type)	(b) Event #2 CULINARY BANQUET - FT (event type)	(c) Other events 32 (total number)	(d) Total events (add col (a) through col (c))
1 Gross receipts	149,815.	107,187.	665,017.	922,019.
2 Less: Contributions	122,107.	70,294.	563,153.	755,554.
3 Gross income (line 1 minus line 2)	27,708.	36,893.	101,864.	166,465.
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages				
8 Entertainment				
9 Other direct expenses	128,976.	23,114.	299,322.	451,412.
10 Direct expense summary. Add lines 4 through 9 in column (d)				► 451,412.
11 Net income summary. Subtract line 10 from line 3, column (d)				► <284,947.►

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
1 Gross revenue				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				►
8 Net gaming income summary. Subtract line 7 from line 1, column (d)				►

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records.

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party

Name ► _____

Address ► _____

16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: JOHNSON GROSSNICKLE & ASSOC

(I) ADDRESS OF FUNDRAISER: 29 S. PARK BLVD, GREENWOOD, IN 46143

(I) NAME OF FUNDRAISER: THE CARREON GROUP LLC

(I) ADDRESS OF FUNDRAISER: 7603 STONES RIVER COURT, INDIANAPOLIS, IN 46259

(I) NAME OF FUNDRAISER: VITRUVIAN

Part IV Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER: 5420 CENTRAL AVE., INDIANAPOLIS, IN 46220

(I) ACTIVITY: FUNDRAISING CONSULTANT - GROSS RECEIPTS IN LINE 2B(IV) DO NOT INCLUDE \$2.9M IN REVOCABLE PLANNED GIFT COMMITMENTS

SCHEDULE I
(Form 990)

OMB No 1545-0047
2017

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization

IVY TECH FOUNDATION, INC.

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	1 (b) EIN	1 (c) IRC section (if applicable)	1 (d) Amount of cash grant	1 (e) Amount of non-cash assistance	1 (f) Method of valuation (book, FMV, appraisal, other)	1 (g) Description of noncash assistance	1 (h) Purpose of grant or assistance
VISIT INDY 200 S. CAPITOL AVE., SUITE 300 INDIANAPOLIS, IN 46225	35-0413010	501(c) (6)	5,000.	0.			TO FURTHER THE EDUCATIONAL MISSION OF IVY TECH COMMUNITY COLLEGE OF INDIANA
GREATER KOKOMO ECONOMIC DEVELOPMENT ALLIANCE - 325 N. MAIN STREET - KOKOMO, IN 46901	35-1499686	501(c) (3)	10,000.	0.			TO FURTHER THE EDUCATIONAL MISSION OF IVY TECH COMMUNITY COLLEGE OF INDIANA
BLOOMINGTON ECONOMIC DEVELOPMENT CORP - 1720 N. KINSER PIKE - BLOOMINGTON, IN 47404	35-1534667	501(c) (6)	10,250.				TO FURTHER THE EDUCATIONAL MISSION OF IVY TECH COMMUNITY COLLEGE OF INDIANA

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

► 1.
► 2.

Schedule I (Form 990) (2017)

(a) Type of grant or assistance

(B) Number of (C) Amount of (D) Amount of non- (E) Method of v-

(d) Amount of non-cash assistance

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	3814	3,888,522.	0.		

Part IV **Supplemental Information** Provide the information required in Part I line 2 Part III column (b) and any other additional information

PART T LINE 2:

GRANT ALLOCATIONS ARE DIRECTLY GIVEN TO IVY TECH COMMUNITY COLLEGE. THE COLLEGE AWARDS SCHOLARSHIPS BASED ON PRE-SET CRITERIA AND MONITORS THE USE OF THE GRANT MONEY. THE FOUNDATION ALSO PROVIDES GRANTS TO OTHER ORGANIZATIONS TO FURTHER THE EDUCATION MISSION OF IVY TECH COMMUNITY COLLEGE. THESE GRANTS ARE MONITORED ON A CASE-BY-CASE BASIS.

**SCHEDULE J
(Form 990)**Department of the Treasury
Internal Revenue Service**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017Open to Public
Inspection

Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number

23-7073977**Part I Questions Regarding Compensation**

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (such as, maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2017

732111 10-17-17

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional spaces is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row 11 and from related organizations, described in the instructions, on row 12.

Do not list any individuals that aren't listed on Form 990. Part VI

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information.

PART I, LINE 1A:

ON A PRE-APPROVED BASIS, CERTAIN IVY TECH COMMUNITY COLLEGE EMPLOYEES ARE PROVIDED SOCIAL CLUB MEMBERSHIPS TO ACCOMMODATE BUSINESS NEEDS RELATED TO COLLEGE FUNCTIONS OR COMMUNITY OUTREACH. THE SOCIAL CLUB MEMBERSHIP DUES ARE PAID BY THE IVY TECH FOUNDATION. ANY PERSONAL USE OF SOCIAL CLUB MEMBERSHIPS IS A TAXABLE FRINGE BENEFIT AND IS INCLUDED IN THE TAXABLE WAGES OF EMPLOYEES RECEIVING THE BENEFIT. ADDITIONALLY, PAY IS INCREASED/GROSSED UP TO COMPENSATE EMPLOYEES FOR THE ESTIMATED TAXES OWED AS A RESULT OF ANY DERIVED TAXABLE INCOME.

SCHEDULE K
 (Form 990)
 Department of the Treasury
 Internal Revenue Service

Name of the organization

IVY TECH FOUNDATION, INC.

SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2017
 Open to Public
 Inspection

Employer identification number
23-7073977

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer	
						Yes	No	Yes	No
A OLD NATIONAL BANK	35-1729164	NONE	04/30/10	2,270,118.	PURCHASE REAL ESTATE USED BY IV	X	X	X	X
RIVER VALLEY FINANCIAL BANK (NOW GERMAN AMERICA)	35-0281620	NONE	12/09/11	1,377,520.	PURCHASE REAL ESTATE USED BY IV	X	X	X	X
c OLD NATIONAL BANK	35-1729164	NONE	06/19/12	1,833,253.	PURCHASE REAL ESTATE USED BY IV	X	X	X	X
D									

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired	2,270,118.	1,377,520.	1,833,253.	
2 Amount of bonds legally defeased				
3 Total proceeds of issue				
4 Gross proceeds in reserve funds				
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows				
7 Issuance costs from proceeds				
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds				
10 Capital expenditures from proceeds				
11 Other spent proceeds				
12 Other unspent proceeds				
13 Year of substantial completion	2010	2011	2011	
	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	X	X	X	X
15 Were the bonds issued as part of an advance refunding issue?	X	X	X	X
16 Has the final allocation of proceeds been made?	X	X	X	X
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X	X	X	X

Part III Private Business Use

	A	B	C	D
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No	Yes	No
2 Are there any lease arrangements that may result in private business use of bond-financed property?	X	X	X	X

732121 10-18-17 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 42

Schedule K (Form 990) 2017

	A	B	C	D
	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X	X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?				
c Are there any research agreements that may result in private business use of bond-financed property?	X		X	X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?				
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	▲	%	%	%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	▲	%	%	%
6 Total of lines 4 and 5				
7 Does the bond issue meet the private security or payment test?	X		X	X
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?	X		X	X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of				
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?				
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1 145-2?		X	X	X

Part IV Arbitrage

	A	B	C	D
	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	X		X	X
2 If "No" to line 1, did the following apply?				
a Rebate not due yet?		X		X
b Exception to rebate?		X		X
c No rebate due?		X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed				
3 Is the bond issue a variable rate issue?				
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?				
b Name of provider				OLD NATIONAL BANK
c Term of hedge		X	X	24.000000
d Was the hedge superintegrated?				X
e Was the hedge terminated?				X

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

2017

Open To Public
Inspection

Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number

23-7073977

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		15,486.	FMV
5 Clothing and household goods	X		13,434.	FMV
6 Cars and other vehicles	X	25	64,046.	FMV
7 Boats and planes	X	6	12,958.	APPRAISAL FMV
8 Intellectual property				
9 Securities - Publicly traded	X	19	217,013.	STOCK EXCHANGE PRICE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies	X	101	25,158.	FMV
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (MISCELLANEOUS)	X	361	669,690.	FAIR MARKET VALUE
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

	Yes	No
30a		X
31	X	
32a		X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2017

732141 09-07-17

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.
► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number
23-7073977

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

MAKE EXPENDITURES TO OR FOR THE BENEFIT OF IVY TECH COMMUNITY COLLEGE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

HELPING FUND OTHER PROGRAM EXPENDITURES FOR IVY TECH COMMUNITY COLLEGE

OF INDIANA, INCLUDING FACULTY AND STAFF DEVELOPMENT, EMPLOYEE

RECOGNITION, AND COMMUNITY OUTREACH EXPENDITURES

EXPENSES \$ 2,556,062. INCLUDING GRANTS OF \$ 25,250. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

A DRAFT OF FORM 990 WILL FIRST BE THOROUGHLY REVIEWED BY THE AUDIT AND

ADMINISTRATIVE POLICIES COMMITTEE. ANY APPROPRIATE REVISIONS WILL BE MADE

AND THEN THE UPDATED FORM 990 WILL BE SENT TO ALL BOARD MEMBERS FOR THEIR

REVIEW AND COMMENTS. AGAIN, ANY APPROPRIATE REVISIONS WILL BE MADE BEFORE

FILING. IF SUBSTANTIAL REVISIONS ARE NEEDED, THE FORM 990 WILL BE

CIRCULATED A SECOND TIME TO ALL BOARD MEMBERS BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY INCLUDES A FORM TO BE COMPLETED AND

SUBMITTED ANNUALLY. THE FORM REQUIRES INFORMATION REGARDING EACH

RECIPIENTS FINANCIAL INTERESTS AND EMPLOYMENT. THE CONTENT OF EACH FORM IS

REVIEWED BY THE ASSISTANT TREASURER TO ASSESS ANY POTENTIAL CONFLICTS OF

INTEREST. IF CONFLICTS OF INTEREST EXIST, THE POLICY PROVIDES THE

PROCEDURAL GUIDELINES.

FORM 990, PART VI, SECTION B, LINE 15:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number

23-7073977

THE IVY TECH FOUNDATION HAS NO EMPLOYEES. THE FOUNDATION CONTRACTS WITH IVY TECH COMMUNITY COLLEGE FOR SERVICES PERFORMED BY COLLEGE EMPLOYEES THAT BENEFIT THE FOUNDATION. COLLEGE SALARIES ARE ESTABLISHED BASED UPON COMPARATIVE SALARY ANALYSIS OF COLLEGE EMPLOYEES IN COMPARABLE POSITIONS, CONSIDERATION OF ECONOMIES OF SCALE, INPUT FROM HUMAN RESOURCES AND FINAL APPROVAL OF APPROPRIATE COLLEGE OFFICER.

FORM 990, PART VI, SECTION C, LINE 18:

THE IVY TECH FOUNDATION ONLY FILES FORM 990 AND MAKES IT AVAILABLE TO THE PUBLIC AS FOLLOWS: 1) IVY TECH COMMUNITY COLLEGE'S WEBSITE, 2) IVY TECH FOUNDATION'S CENTRAL OFFICE LOCATION IN INDIANAPOLIS, IN AND 3) UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

THE FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC AS FOLLOWS: 1) IVY TECH COMMUNITY COLLEGE'S WEBSITE, 2) INCLUSION WITHIN IVY TECH COMMUNITY COLLEGE'S ANNUAL FINANCIAL REPORT, WHICH IS AVAILABLE TO THE PUBLIC AND 3) UPON REQUEST.

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

INSTRUCTION SUPPLIES AND EQUIPMENT:

<u>PROGRAM SERVICE EXPENSES</u>	<u>826,324.</u>
<u>MANAGEMENT AND GENERAL EXPENSES</u>	<u>0.</u>
<u>FUNDRAISING EXPENSES</u>	<u>0.</u>
<u>TOTAL EXPENSES</u>	<u>826,324.</u>

ADMINISTRATION EXPENSE PAID TO COLLEGE:

<u>PROGRAM SERVICE EXPENSES</u>	<u>0.</u>
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732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number
23-7073977

MANAGEMENT AND GENERAL EXPENSES	650,000.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	650,000.

FACULTY AND STAFF DEVELOPMENT:

PROGRAM SERVICE EXPENSES	137,753.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	137,753.

OTHER PROGRAMMATIC EXPENSES:

PROGRAM SERVICE EXPENSES	136,252.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	136,252.

AWARDS AND RECOGNITION:

PROGRAM SERVICE EXPENSES	120,103.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	120,103.

OTHER EXPENSES:

PROGRAM SERVICE EXPENSES	55,511.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	35,087.
TOTAL EXPENSES	90,598.

Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number
23-7073977BAD DEBT EXPENSE:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	47,206.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	47,206.

ALUMNI ASSOCIATION:

PROGRAM SERVICE EXPENSES	37,714.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	37,714.

PRINTING:

PROGRAM SERVICE EXPENSES	764.
MANAGEMENT AND GENERAL EXPENSES	177.
FUNDRAISING EXPENSES	11,035.
TOTAL EXPENSES	11,976.

ANNUITY OBLIGATION:

PROGRAM SERVICE EXPENSES	4,258.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,258.

TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A	2,062,184.
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FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

GAIN ON INTEREST RATE SWAP	86,839.
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Name of the organization

IVY TECH FOUNDATION, INC.

Employer identification number
23-7073977

PART XII, LINE 2C

THIS PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

Name of the organization

Employer identification number _____

Part I Identification of Discontinued Entities Complete if the organization answered "Yes" on Form 990 Part IV line 23

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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Classification number

III

Employer ident

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

Part IV Identification of Related Organizations Taxable as a Corporation

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- l Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses
q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)
s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a/s)	(c) Amount involved	(d) Method of determining amount involved
IVY TECH COMMUNITY COLLEGE OF INDIANA - (1) SCHOLARSHIPS	B	3,888,522. CASH	
IVY TECH COMMUNITY COLLEGE OF INDIANA IVY TECH COMMUNITY COLLEGE OF INDIANA - (3) RENT	O	650,000. FMV	
IVY TECH COMMUNITY COLLEGE OF INDIANA (4)	J	1,295,797. FMV	
IVY TECH PROPERTIES, INC. (5)	R	1,682,169. FMV	
IVY TECH PROPERTIES, INC. (6)	D	31,816,162. FMV	
	D	387,866. FMV	
	54		

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a)	Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7)	IVY TECH PROPERTIES, INC. (RENTAL INCOME)	K	589,396. FMV	
(8)	IVY TECH COMMUNITY COLLEGE OF INDIANA - CAPITAL LEASE	D	5,461,870. FMV	
(9)	IVY TECH COMMUNITY COLLEGE OF INDIANA	D	162,051. FMV	
(10)	COMMUNITY ENTERPRISES INC.	D	415. FMV	
(11)	IVY TECH COMMUNITY COLLEGE OF INDIANA	B	1,423,332. CASH	
(12)				
(13)				
(14)				
(15)				
(16)				
(17)				
(18)				
(19)				
(20)				
(21)				
(22)				
(23)				
(24)				

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part VI, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that were not a related organization. See instructions regarding exclusion for certain investment partnerships.

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions