Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

Fo	r caler	ndar year 2018 or tax year beginning	, 2	018, and	ending		, 20
Nar	ne of fou	undation			A Employ	er identification numb	ег
JΩ	<u>UR</u> NAL	GAZETTE FOUNDATION INC			}	31-1134237	
Nur	nber and	street (or P O box number if mail is not delivered to street address)	R	oom/suite	B Telepho	ne number (see instruc	tions)
70	1 S CLI	NTON ST		104		260-424-525	7
City	or town	n, state or province, country, and ZIP or foreign postal code			C If exemp	otion application is pend	ling, check here ▶
FO	RT WA	YNE, IN 46802				,	
\overline{G}	Check	k all that apply. Initial return Initial return	n of a former put	olic charit	V D 1 Foreir	ın organizations, check	here 🏲
_		☐ Final return ☐ Amended	•		1	,	_
		Address change Name cha	nae			gn organizations meetin i here and attach comp	
H	Check	k type of organization: Section 501(c)(3) exempt p		t Fine		foundation status was	
\Box		on 4947(a)(1) nonexempt charitable trust Other tax			section	507(b)(1)(A), check here	▶ [
		narket value of all assets at J Accounting method			┥		
•		if year (from Part II, col. (c), Other (specify)	000.1 _	71001441		undation is in a 60-mont ection 507(b)(1)(B), chec	
		6) ► \$ 11,631,328 (Part I, column (d) must be	on cash basis)				
Ð	art I	Analysis of Revenue and Expenses (The total of	1	$\overline{}$	1	7	(d) Disbursements
ш	ai t i	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	1 (0) 146	et investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	books	1	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	154	36	1 200	Callanda and a	
	2	Check ► ☐ If the foundation is not required to attach Sch B	104		11112	1 1P	2 2
		·	317		31745		
	3	Interest on savings and temporary cash investments	1605		160542		3 1 1
	4	Dividends and interest from securities			100342	100342	5 B 1
	5a	Gross rents	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		W. 17 12 1	1 1 - 641 A - ma \$192 har" - m *	* * .5m
•	b	Net rental income or (loss)	6398	02	- Lu	THE SERVER. THE RE	
Revenue	6a	Net gain or (loss) from sale of assets not on line 10			1. + 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	11 24	1 m
en,	_ b	Gross sales price for all assets on line 6a		1.5.4.			1 2 10
ě	7	Capital gain net income (from Part IV, line 2)	" K. 1 " C. 1 2"	1	639802	· · · · · · · · · · · · · · · · · · ·	2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
ш	8	Net short-term capital gain		1 7	14.194	19097), "I S S T S I
	9	Income modifications	1 2 2 2 2	y. e 29	a. 'also (a) (b) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	Miss at a Microsoft	7. The
	10a	Gross sales less returns and allowances	3 5 1 5 *	1 500		m 200 "TE	5 yrs. 12 "
	b	Less Cost of goods sold	The Rule de			S. B. K. G.	प्रि. र में र ^{क्} री
	С	Gross profit or (loss) (attach schedule)		9 2 2 3	19:23		N. 3:
	11	Other income (attach schedule)					2-7 (2) (3)
	12_	Total. Add lines 1 through 11	8475	25	832089	211384	[] [14] · [4]
Ś	13	Compensation of officers, directors, trustees, etc	ļ			 	ļ <u>.</u>
Expenses	14	Other employee salaries and wages	BE SE				
e	15	Pension plans, employee benefits	RECEI	/ED_			
×	16a	Legal fees (attach schedule)			<u>د ا</u> ن		<u> </u>
	b	Accounting fees (attach schedule)	NOV 21	00/40 /	Š		
₹:	С	Other professional fees (attach schedule)	NOV 2 635	23 15	63523	63523	63523
tra	17	Interest			<u> </u>	<u> </u>	
ij	18	Taxes (attach schedule) (see instructions)	OGDEN	. UT			
Ξį	19	Dépreciation (attach schedule) and depletion			<u></u>		Fa: 1 2 1
Ď,	20	Occupancy					
þ	21	Travel, conferences, and meetings	42	74	4274	4274	4274
Operating and Administrative	22	Printing and publications					
ğ	23	Other expenses (attach schedule)	142	54	14254	14254	14254
ıţ;	24	Total operating and administrative expenses.					
ers		Add lines 13 through 23	820		82051	82051	82051
ğ	25	Contributions, gifts, grants paid	8708			STRATE, ST	870875
_	26	Total expenses and disbursements. Add lines 24 and 25	9529	26	82051	82051	952926
	27	Subtract line 26 from line 12		F 10.	大海滨 旅		
	а	Excess of revenue over expenses and disbursements	(10540		an the true	The state of the s	1 17 144 11
	b	Net investment income (if negative, enter -0-)	W Sile Lebit	9 ² 31		型不规则的	
	С	Adjusted net income (if negative, enter -0-) .	Ber with the	C 22 1	AND THE STATE	129333	大学 医外腺性

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

Pa	irt İl	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	314869	219745	219745
	2	Savings and temporary cash investments	1449072	2158109	2158109
	3	Accounts receivable ▶			
l		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			·
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions) .			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
\$	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
¥	10a	Investments—U.S. and state government obligations (attach schedule)			
ı	b	Investments—corporate stock (attach schedule)	6358261	5311240	7,574,324
- }	С	Investments—corporate bonds (attach schedule)	1236478	1746705	1,679,150
j	11	Investments—land, buildings, and equipment. basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
ľ	12	Investments—mortgage loans			
l	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less. accumulated depreciation (attach schedule) ▶			
- 1	15	Other assets (describe ▶)			
- (16	Total assets (to be completed by all filers-see the			
- 1		ınstructions. Also, see page 1, item l)	9358680	9435799	11,631,328
7	17	Accounts payable and accrued expenses			
S	18	Grants payable	430000	410750	
Ë	19	Deferred revenue			
abilitie	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	430000	410750	
,,		Foundations that follow SFAS 117, check here ▶ □			1
alances		and complete lines 24 through 26, and lines 30 and 31.			Ţ
١ڃ	24	Unrestricted	8928680	9025049	
	25	Temporarily restricted			
ם	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, check here ▶ □			1
-		and complete lines 27 through 31.		ľ	1
	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
וצ	30	Total net assets or fund balances (see instructions)	8928680	9025049	
<u>2</u>	31	Total liabilities and net assets/fund balances (see			ì
		instructions)	9358680	9435799	{
_	t III _	Analysis of Changes in Net Assets or Fund Balances			
1		net assets or fund balances at beginning of year-Part II, colur		1 . 1	
		- ,			8928680
					(105401)
					221020
		lines 1, 2, and 3			1014299
		eases not included in line 2 (itemize) ► DECREASE IN GRANTS PA		5	(19250)
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - F	'art II, column (b), line	e 30 . [6 [9025049

Part	IV Capital Gains an	d Losses for Tax on Investme	ent Income			
		kind(s) of property sold (for example, real esta use, or common stock, 200 shs MLC Co)	ate,	(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day,	
1a	SEE ATTACHED					
b			_ 			
<u>C</u>						
<u>d</u>						
e	 	(f) Depreciation allowed	(a) Cost or	other basis		(h) Gain or (loss)
	(e) Gross sales price	(or allowable)		nse of sale	((6	e) plus (f) minus (g))
a	 					
<u>b</u>						
d			· - -			
е						
	Complete only for assets sho	owing gain in column (h) and owned by	the foundation	on 12/31/69		ins (Col. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		but not less than -0-) or osses (from col. (h))
<u>a</u>						
b						
c d						
<u>e</u>						
2	Capital gain net income o		so enter in Par enter -0- in Par		2	639,80
3		in or (loss) as defined in sections 1	222(5) and (6):			
	Part I, line 8	 	<u> </u>	<u>.</u>	3	19,09
Part		der Section 4940(e) for Reductivate foundations subject to the se				
Was t	s," the foundation doesn't o	section 4942 tax on the distributa qualify under section 4940(e). Do n	ot complete th	nis part.		
1	Enter the appropriate ame	ount in each column for each year,	see the instru	ctions before ma	king any en	(d)
Cale	Base period years endar year (or tax year beginning in			(c) noncharitable-use ass	(0	Distribution ratio col (b) divided by col (c))
	2017	8046		11914		067536
	2016	7229 6527		12076		062023 054053
	2015 2014	5632		12219		046097
	2013	5478	370	11920		045961
2	Total of line 1, column (d)				. 2	2756
3	Average distribution ratio	for the 5-year base period—divid				05513
	•		-		4	11,891,21
4		charitable-use assets for 2018 from	n Part X, line 5			
5	Multiply line 4 by line 3				. 5	655,61
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			. 6	7,50
7	Add lines 5 and 6				. 7	663,11
8	Enter qualifying distribution	ons from Part XII, line 4			. 8	952,92
		ater than line 7, check the box in F		and complete th	at part usin	g a 1% tax rate. See th
	. 4.6 77 11100100010110.				·	Form 990-PF (201



Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	ns)
_ 1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.			
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		7500	38
	here ► ☐ and enter 1% of Part I, line 27b			[[
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0	_ 00
3	Add lines 1 and 2		7500	38
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	00
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		7500	38
6	Credits/Payments.			
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 1308 00			
b	Exempt foreign organizations—tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c 4000 00			
_d	Backup withholding erroneously withheld		5308	
7			5506	00
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2192	38
9 10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		2192	- 30
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax Refunded 11			
	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	T	Yes	No
ıu	participate or intervene in any political campaign?	1a		1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	10	,,	<u> </u>
	published or distributed by the foundation in connection with the activities	<u> </u>	<u> </u>	لبـ
C	Did the foundation file Form 1120-POL for this year?	1c		 ,
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		ĺ	
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed]	
0	on foundation managers. \$	2		-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	-		Ť
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		÷
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		7
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		} }	`
	By language in the governing instrument, or	}		- 1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	\	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions INDIANA			1
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	V	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or]	<u> </u>
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9	1	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
-	names and addresses	10		✓
			1 DE	

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Par	t VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	√	
44	Website address ► NONE The background is account. HEATHER HEAL CRA.	0-424-	5257	
14	The books are in care of ► HEATHER HEAL, CPA Located at ► 701 S CLINTON ST, STE 104, FORT WAYNE, IN ZIP+4 ►	4680	·	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			
15	and enter the amount of tax-exempt interest received or accrued during the year	•	•	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?.	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes Vo			'
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	ľ		
	disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after		ľ	ĺ
	termination of government service, if terminating within 90 days)		}	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions			لـــــا
	Organizations relying on a current notice regarding disaster assistance, check here	1b		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
_	were not corrected before the first day of the tax year beginning in 2018?	1c		~
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and] [ļ	
	6e, Part XIII) for tax year(s) beginning before 2018?		j	}
	If "Yes," list the years > 20 , 20 , 20 , 20			İ
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		_ <u></u> _
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
•	► 20 , 20 , 20 , 20	`	- 1	ŀ
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			ļ
	at any time during the year?			1
ь	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or	[ĺ	I
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		İ	į
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	\	-	1
	foundation had excess business holdings in 2018.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		

_			_
۲a	ıa	е	τ

Par	t VII-B Statements Re	garding Activities	s for V	Which Form	4720	May Be F	Require	ed (conti	nued)			
	During the year, did the four	 						\ _	/-		Yes	No
	(1) Carry on propaganda, o(2) Influence the outcome of							☐ Yes	☑ No	•		
	directly or indirectly, any							, □Yes	√ No	,		
	(3) Provide a grant to an inc	-		other similar	purpos	es?		_	☑ No	- b		
	(4) Provide a grant to an or section 4945(d)(4)(A)? Se	-		arıtable, etc.,	-				☑ No			
	(5) Provide for any purpose purposes, or for the prev	other than religious	, charit	table, scientif	ic, liter	ary, or edu	cationa	_				
b	If any answer is "Yes" to 5a	•						∐Yes	✓ No			`
	in Regulations section 53.49									5b		
	Organizations relying on a c			-					▶□			
С	If the answer is "Yes" to qu	uestion 5a(4), does t	he fou	ndation clain	n exem	ption from	the tax		_		}	
	because it maintained exper	nditure responsibility	for the	e grant? .				Tes	☐ No		.	
	If "Yes," attach the statement											- 1
6a	Did the foundation, during the						emiums	_	_		-	- 1
	on a personal benefit contra						, .	∐ Yes	_ ☑ No	<u> </u>		ـــِــا
	Did the foundation, during the If "Yes" to 6b, file Form 8870	Э.		•				contract	? . _	6b		<u> </u>
	At any time during the tax year								☑ No	<u> </u>		
	If "Yes," did the foundation i								1? .	7b	 -}	
8	Is the foundation subject to remuneration or excess para										-	
Part		ut Officers, Direct									ees.	
	and Contractors	•	,	,,,, .			_3 ,				,	
1	List all officers, directors,	rustees, and found	ation i	managers ar			ation. S	See instru	ctions			
	(a) Name and addres	s	hou	e, and average ers per week ed to position	` (If i	mpensation not paid, nter -0-)	emplo	Contributions byee benefit p erred compe	plans	(e) Exper	nse acc Illowand	
SEE A	TTACHED		0			0			0			
							1		(
												
• • • • • • • • • • • • • • • • • • • •												
2	Compensation of five high "NONE."	nest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1—	see instru	uctions	s). If no	ne, e	nter
	a) Name and address of each employ	see paid more than \$50,000	n	(b) Title, and a		(c) Compe	nsation	(d) Contribu employee l	benefit	(e) Exper		
,	ay reality and address of each employ	oo pala moro man 400,000	•	devoted to p				plans and d compens		otner a	llowand	es
NONE				0			0		o			0
]			
	·		-				ĺ					
				 								
				1			ł		ł			
				 -								
]			
												
									[
Total r	number of other employees p	aid over \$50,000 .							. ▶		0	
				_					F	orm 99 0)-PF (2018)

Part \		, Foundation Managers, Highly Paid En	nployees,
<u> </u>	and Contractors (continued)		
3	Five highest-paid independent contractors for professional se		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
JOURN	AL GAZETTE COMPANY	CONSULTING/ACCOUNTING/	63523
701 S C	LINTON ST, STE 104, FORT WAYNE, IN 46802	INVESTMENT SERVICES	05525
	•••••••••••••••••••••••••••••••••••••••		1
	,		ļ <u> </u>
			
Total n	umber of others receiving over \$50,000 for professional service	s	63523
Part I			
	ne foundation's four largest direct charitable activities during the tax year. Including and other beneficiaries served, conferences convened, research papers p		Expenses
1 N	ONE		
		, -, -, -, -, -, -, -, -, -, -, -, -, -,	
2			
		••••••	
3 —			
٠			1
			l
4			
			<u> </u>
Part I			
	be the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
1 NO	DNE		
2 -			
All oth	er program-related investments. See instructions		
3 NO	DNE		1
	. <u></u>		ļ
otal. A	dd lines 1 through 3		000 PF (0)
			Form 990-PF (2018)

Pari		ign foun	dations,
	see instructions.)	,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	12,072,304
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	10	12,072,304
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	12,072,304
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	181,085
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,891,219
6	Minimum investment return. Enter 5% of line 5	6	594,561
Part		oundatio	ons
	and certain foreign organizations, check here ► □ and do not complete this part.)	,	
1	Minimum investment return from Part X, line 6	1	594,561
2a	Tax on investment income for 2018 from Part VI, line 5	1 (
b	Income tax for 2018. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	7500
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	587,061
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	587,061
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,] _]	507.004
0-4	line 1	7	587,061
	Qualifying Distributions (see instructions)		
1_	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	40	952,926
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	952,926
ь 2	Program-related investments—total from Part IX-B	10	
2	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	-	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	952,926
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	
•	Enter 1% of Part I, line 27b. See instructions	5	7500
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	945,426
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.		
			000 DE

Part	XIII Undistributed Inco	me (see instruction	ons)			
			(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 20 line 7					587,061
2	Undistributed income, if any, as of					307,001
a	Enter amount for 2017 only .				o	
b	Total for prior years: 20,			0		· · · · · · · · · · · · · · · · · · ·
3	Excess distributions carryover					<u> </u>
а	From 2013		,			
b	From 2014					
С	From 2015			,		
d	From 2016	143,902	4			
e	From 2017	213,295	410,381			
f 4	Total of lines 3a through e . Qualifying distributions for 20		410,301	··		
·	line 4: ▶ \$ 952,926	<u>}</u>			0	
a	Applied to 2017, but not more Applied to undistributed incor				-	
b	(Election required—see instruc	ctions)		0		
С	Treated as distributions out of required—see instructions) .		0			
d	Applied to 2018 distributable a					587,061
е	Remaining amount distributed	•	365.865			!
5	Excess distributions carryover (If an amount appears in colu- amount must be shown in colu-	nn (d), the same	0			0
6	Enter the net total of ea indicated below:	ch column as				
а	Corpus. Add lines 3f, 4c, and 4d		776,246			
b	Prior years' undistributed in line 4b from line 2b	come. Subtract		0		
С	Enter the amount of prior year income for which a notice of been issued, or on which the tax has been previously assess	f deficiency has section 4942(a)		0		в
d	Subtract line 6c from line amount—see instructions .	e 6b. Taxable		0		
е	Undistributed income for 201 4a from line 2a. Taxable instructions	e amount-see			0	
f	Undistributed income for 2018 4d and 5 from line 1. This a distributed in 2019	mount must be				0
7	Amounts treated as distribution to satisfy requirements important (a)(1)(F) or 4942(g)(3) (Ei required—see instructions)	sed by section	0			
8	Excess distributions carryove applied on line 5 or line 7 (see		0			
9	Excess distributions carry Subtract lines 7 and 8 from line	over to 2019.	776,246			
10	Analysis of line 9:					
а	Excess from 2014			1		}
b	Excess from 2015	53,184				1
c	Excess from 2016	143,902		}	1	1
d	Excess from 2017	213,295				
е	Excess from 2018	365,865	1	1		l

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1 1 the foundation has received a ruling or determation test that it is a private operating foundation, and the ruling is effective for 2018, after the date of the ruling Direct Vox to indicate whether the foundation is a private operating foundation described in section 49426/f(3) or 49426/f(3) o		90-PF (2018)	· 				Page 10
toundation, and the ruling is effective for 2018, enter the date of the ruling. ► NA Check box to indicate whether the foundation is a private operating foundation described in section ■ 4942(#15) or	Part	XIV Private Operating Founda	itions (see instr	uctions and Par	t VII-A, question	9)	
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(0)(3) or 4942(0)(2) at the lesser of the adjusted net income from Part I or the minimum investment return from Part X for seach year listed 3 85% of the 2a	1a				a private operating		
2a Enter the lesser of the adjusted net income from Part 1 or the minimum investment return from Part X for each year leited b 85% of Ime 2a C Qualifying destributions from Part X II, the 4 for each year listed d Amounts incided in law 2 and used directly for active conduct of exempt activities Subtract line 2d from law 2 and used directly for active conduct of exempt activities Subtract line 2d from law 2d and used a							
income from Part I, or the minimum measurement return from Part X for each year listed. 85% of line 2a Cualifying distributions from Part XI, in the Armonic State of the Control of Part State of the Control of Part State of the Control of Part State of the Control of Part State of the Control of Part State				e operating found		section 49424)	3) or 🔲 4942(j)(5
investment return from Part X for each year listed b 85% of line 2a Coularying distributions from Part XII, line 4 for each year listed d Anounts moded on line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assest' alternative test relied upon: a "Assest' alternative test-enter (1) Value of all assets 12 Value of assets qualifying under section 4942(8)(8)(8)(8) b "Endowment" alternative test-enter of minimum investment return shorn in Part X, line 6 for each year interest, discovering the control of minimum investment portion (interest, discovering the control of the	2a						(e) Total
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unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions complete items 2a, b, c, and d. See instructions. a The name, address, and telephone number or email address of the person to whom applications should be addressed: HEATHER HEAL, 701 S CLINTON ST, STE 104, FORT WAYNE, IN 46802, (260) 424-5257, HHEAL@JOURNALGAZETTE COMCASTBIZ NET b The form in which applications should be submitted and information and materials they should include SEE ATTACHED c Any submission deadlines NO STIPULATED DEADLINES BOARD OF DIRECTORS MEETS QUARTERLY TO REVIEW APPLICATIONS d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other	2					organizations and	does not accent
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HEATHER HEAL, 701 S CLINTON ST, STE 104, FORT WAYNE, IN 46802, (260) 424-5257, HHEAL@JOURNALGAZETTE COMCASTBIZ NET b The form in which applications should be submitted and information and materials they should include SEE ATTACHED c Any submission deadlines NO STIPULATED DEADLINES BOARD OF DIRECTORS MEETS QUARTERLY TO REVIEW APPLICATIONS d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other				dress of the perso	on to whom applica	ations should be ad	dressed:
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	NO ST	IPULATED DEADLINES BOARD OF DIRE					
	d		ards, such as b	y geographical a	ireas, charitable fi	elds, kinds of insti	tutions, or other

SEE ATTACHED

Total

Part XV 'Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of **Amount** any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year SEE ATTACHED 870,875 870,875 3a **b** Approved for future payment JUNIOR ACHIEVEMENT NONE PUBLIC CAPITAL AND OPERATING 80750 FORT WAYNE CHILDREN'S ZOO NONE PUBLIC CAPITAL 75000 ARTS UNITED OF GREATER FORT WAYNE NONE **PUBLIC OPERATING** 15000 **BOYS AND GIRLS CLUB** NONE **PUBLIC** CAPITAL 60000 FORT WAYNE RESCUE MISSION MINISTRIES NONE **PUBLIC** CAPITAL 50000 PURDUE UNIVERSITY FORT WAYNE NONE **PUBLIC** OPERATING 50000 UNITED WAY OF ALLEN COUNTY **PUBLIC OPERATING** 80000 NONE

410750

Form 990-PF (2018)

Pa	irt X'	VI-A Analysis of Income-Producing A	ctivities	- · · · · ·			
Ente	er girc	oss amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income
1	Pro	gram service revenue:					(See instructions)
	а						
	b				ļ.,		
	С				ļ <u> </u>		
	d				ļ		
	e		ļ		<u> </u>	ļ	ļ
	f				<u></u>		
_		Fees and contracts from government agencies		 			
2		mbership dues and assessments		 	 		 -
3 4		rest on savings and temporary cash investments dends and interest from securities	<u> </u>				
5		rental income or (loss) from real estate	<u> </u>			 	
•		Debt-financed property			 		
		Not debt-financed property	 		 		
6		rental income or (loss) from personal property					
7		er investment income				-	
8		or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory			 		
11		er revenue. a					
	b						
	С						
	ď						
	е						
12	Sub	total. Add columns (b), (d), and (e)					
13	Sub	al. Add line 12, columns (b), (d), and (e)				13	N/A
13 (See	Sub Tota work	al. Add line 12, columns (b), (d), and (e)	s.)	· · · · ·	· · · ·	13	N/A
13 (See Par	Sub Tota work	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes		
13 (See Par Line	Sub Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes		
13 (See Par Line	Sub Tota work	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes		
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Part	XVII		matio	_	ırding	Trans	sfers t	o and	Tran	saction	ons and	Relations	hips \	With	Nonch	arital	ole Ex	empt
1 a	in s orga	ection 50 nizations?	1(c) (o	ther tha	an sec	ction (501(c)(3) orga	ınızatıd	ons) c		ny other org tion 527,					Yes	No
_	(1) C	ash		_												1a(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
b	Othe)ther asse r transacti	ions:		•	•			•				•			1a(2)	
		ales of as urchases								 tion .						1b(1
	(3) F	lental of fa	icilities,	equipm	nent, or	other	assets	·								1b(1
	(4) F	leimbursei	ment ar	rrangem	ients .											1b(4)	V
		oans or lo	-										,			1b(5)	1
		erformand							-							1b(6)	<u> </u>
C		-				_										10		
d	value	of the go	ods, ot	ther asson or sha	ets, or aring ai	servic rrange	es give ment, s	n by th	e repo	orting t nn (d)	foundation	Column (b n. If the fou of the good	ndatio	n rece	eived le	ss tha	n fair i	narket
(a) Line	no	(b) Amount in	volved	(c)	Name of	fnoncha	aritable ex	empt org	ganizatio	on	(d) Desc	ription of tran	sfers, tra	nsactio	ons, and s	haring a	irranger	nents
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		(a) Name			19 30110	- Taulo.		(b) Type	of orga	nization			(c) De	scriptio	on of relat	ionship		
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Sign Here	灶	Peat	Hes	110	au (or	mer man	taxpayer	11/14 Date	119	L	CRETARY	oarer has any ki			with the	IRS dis preparei ructions	shown	oelow?
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		Firm's addre	555										1 1 11011			Form 9	90-PF	(2018)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

JOURNAL GAZETTE FOUNDATION INC

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2019

Employer identification number

31-1134237

Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions · · · · · ▶ \$_____ totaling \$5,000 or more during the year

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 31-1134237

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
	JULIE INSKEEP SIMPSON 4701 COVINGTON RD #15 FORT WAYNE, IN 46804	\$ 15436 06	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$ \$	Person Payroll Occash Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies	s of Part II if addıtional spa	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	150 SHARES OF TEXAS INSTRUMENTS		
(a) No. from Part I	(b) Description of noncash property given	\$ 15,436 06 (c) FMV (or estimate) (See instructions)	08/14/2018 (d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
		1	

Part III

Employer identification number

	the following line entry. For organic contributions of \$1,000 or less for Use duplicate copies of Part III if a	the year. (Enter this i	nformation once.	tal of exclusively religious, charitable, etc., See instructions.) > \$			
(a) No. from Part I	(b) Purpose of gift			(d) Description of how gift is held			
	Transferee's name, address		fer of gift Relation	onship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	Transferee's name, address,		sfer of gift Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
}	Transferee's name, address,		sfer of gift Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
-							
				Schedule B (Form 990, 990-EZ, or 990-PF) (2019)			

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and

Journal Gazette Foundation, Inc. 2018 Form 990-PF EIN. 31-1134237

Part I	, Line	16c
--------	--------	-----

Part I, Line 16c Consulting/investing/accounting services	63.523 00
	55,025 55
Line 23 - Other Expenses	
Account Fees	160 00
Office/Misc	9,022 00
Investment Fees	4,929 00
Meals	143 00
	14 254 00

Part II - Balance Sheets	Book Value	Book Value	FMV
	2017	2018	2018
Investments - Common Stocks & Funds	6,358,261 00	5,311,240 00	7,574,324 00
	6,358,261 00	5,311,240 00	7,574,324 00
Investments - Corporate Bonds	1,236,478.00	1,746,705,00	1,679,150.00

Part IV - Capital Gains and Losses for T.	ax on Investment Income					
A) Property Sold	B) How Aquired	C) Date Acquired	D) Date Sold	E) Sales Price	G) Cost or Basis	H) Gain or Loss
JP Morgan Chase and Co Call	Purchase	8/29/2017	2/1/2018	25,000 00	25,262 14	(262 14) ST
New York Cmnty Bk Westbury	Purchase	8/30/2017	2/28/2018	100,000 00	100,000 00	- ST
Anheuser Busch Inbev	Purchase	8/29/2017	4/23/2018	25,000 00	25,152 69	(152 69) ST
Goldman Sachs Bk	Purchase	8/30/2017	8/30/2018	125,000 00	125,000 00	- ST
T Rowe Price New Horizons	Purchase	12/15/2017	3/26/2018	79,464 02	73,404 37	6,059 65 ST
CYS/Blackrock	Purchase	Various	12/31/2018	-	10 22	(10 22) ST
T Rowe Price International Discovery	Purchase	Various	12/31/2018	671 54	-	671 54 ST
T Rowe Price New Horizons	Purchase	Various	12/31/2018	12,200 12	•	12,200 12 ST
T Rowe Price International Discovery	Purchase	Various	12/31/2018	590 62	•	590 62 ST
Welltower	Purchase	Various	1/9/2018	155,648 40	37,539 95	118,108 45 LT
Vanguard Index 500	Purchase	Various	3/26/2018	99,999 99	69,158 94	30,841 05 LT
Vanguard Bond Index	Purchase	Various	12/31/2018	174 23	•	174 23 LT
T Rowe Price New Horizons	Purchase	Various	3/26/2018	120,535 98	93,613 06	26,922 92 LT
Intel	Purchase	10/19/2006	6/15/2008	38,936 28	14,631 40	24,304 88 LT
CYS/Blackrock	Purchase	Various	12/31/2018	144,531 69	176,756 25	(32,224 56) LT
Texas Instruments	Donated	Various	12/31/2018	16,219 29	6,445 50	9,773 79 LT
Shares MSCI EAFE ETF	Purchase	4/16/2015	9/20/2018	54,007 29	53,154 82	852 47 LT
Vanguard Index 500	Purchase	Various	9/18/2018	300,000 03	81,790 27	218,209 76 LT
T Rowe Price New Horizons	Purchase	2/4/1997	9/18/2018	150,000 01	131,704 01	18,296 00 LT
Artisan	Purchase	Various	12/31/2018	7,639 59	•	7,639 59 LT
T Rowe Price New Horizons	Purchase	Various	12/31/2018	72,329 26	•	72,329 26 LT
T Rowe Price International Discovery	Purchase	Various	12/31/2018	4,829 18	•	4,829 18 LT
Virtus	Purchase	Various	12/31/2018	2,686 44	-	2,686 44 LT
Yacktman	Purchase	Various	12/31/2018	84,913 79	-	84,913 79 LT
T Rowe Price International Discovery	Purchase	Various	12/31/2018	5,490 84	•	5,490 84 LT
Cendana	Purchase	Vanous	12/31/2018	5,138 00	-	5,138 00 LT
JHL	Purchase	Various	12/31/2018	22,419 00		22,419 00 LT
				1,653,425 59	1,013,623 62	639,801 97

Part VIII, #1 - Officers & Directors	Title	Compensation	Expenses	
Harriett J. Inskeep	President-Director	None	None	
Julie Inskeep Simpson	Vice President-Director	None	None	
Thomas R Inskeep	Director	None	None	
Stephen S Inskeep	Vice President-Director	None	None	
Devon Haynie	Director	None	None	
Heather Heal	Secretary & Treasurer	None	None	

Part XV - Supplementary Information (Item 2b)

Written application should include information regarding the need for financial assistance and the period of time that such financial assistance is required. A formal application may be required that requests information that is pertinent to the applicant's tax-exempt organization. All applicants must satisfy the Internal Revenue Code Section 501 (c) (3) requirements at the time of application.

Part XV · Supplementary Information (Item 2d)

Recipient organization must be in the general geographical area of Northeast Indiana or Northwest Ohio The funds must be used for the purpose of the organization, and the organization must meet all Internal Revenue Code requirements under Section 501 (C) (3)