

Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation****or Section 4947(a)(1) Trust Treated as Private Foundation**

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

2018**Open to Public
Inspection****For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018**

Name of foundation Atlas Foundry Foundation Inc		A Employer identification number 35-6041739
Name and street (or P O box number if mail is not delivered to street address) 601 N Henderson Ave		Room/suite
City or town, state or province, country, and ZIP or foreign postal code Marion, IN 469523348		B Telephone number (see instructions) (765) 662-2525
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input checked="" type="checkbox"/> Final return <input type="checkbox"/> Amended return		C If exemption application is pending, check here ► <input type="checkbox"/> D 1. Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% <input checked="" type="checkbox"/>

9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ►	9	128
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. ►	10	
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ►	Refunded ►	11

Part 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 participate or intervene in any political campaign? <input checked="" type="checkbox"/>	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).	1b	No
<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>			
1c	Did the foundation file Form 1120-POL for this year?	1c	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		

Part II

Balance Sheets

Attached schedules and amounts in the description column

Beginning of year

End of year

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

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 _____ | 1 | 576

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(h)(1)? If "Yes" attach schedule. See instructions.

11

No



Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
JUNIOR ACHIEVEMENT USA ONE EDUCATION WAY COLORADO SPRINGS, CO 80906	NONE	PC	GENERAL	300
FIRST LIGHT CHILD ADVOCACY 904B WEST THIRD STREET MARION, IN 46952	NONE	PC	GENERAL	500
CANCER SERVICES OF GRANT COUNTY 305 S NORTON AVE MARION, IN 46952	NONE	PC	GENERAL	100
Total			► 3a	78,225

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000

(b) Type of service

(c) Compensation

Redacted	Redacted	Redacted
Redacted	Redacted	Redacted
Redacted	Redacted	Redacted

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	805,567
b	Average of monthly cash balances.	1b	63,845
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	869,412

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018

a Enter amount for 2017 only.

b Total for prior years 2016, 2015, 2014

3 Excess distributions carryover, if any, to 2018

a From 2013.

b From 2014. 433,275

c From 2015. 18,783

d From 2016. 27,442

e From 2017. 64,979

f **Total** of lines 3a through e.

4 Qualifying distributions for 2018 from Part XII, line 4 ► \$ 80,365

a Applied to 2017, but not more than line 2a

(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
			42,243
		0	
	0		
	544,479		
		0	

Part XIV **Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient

If recipient is an individual,
~~whether or not related to the organization~~

Foundation

Dissolved organization

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			14	205	
4 Dividends and interest from securities.			14	28,883	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	2,127	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue			01	3,345	
a IRS REFUND					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e).				34,560	
13 Total. Add line 12, columns (b), (d), and (e).					34,560

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See Part XVI-A, line 10.)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

If recipient is an individual:

Foundation

Purpose of grant or

Amount

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
HOSTESS HOUSE 723 West 4th Street Marion, IN 469523901	NONE	PC	GENERAL	2,000
ST PAUL 1009 Kem Road Marion, IN 46952	NONE	PC	GENERAL	30,750
Foundry Educational Foundation 1695 N Penny Lane Schaumburg, IL 60173	NONE	PC	GENERAL	1,500
Total			► 3a	78,225

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

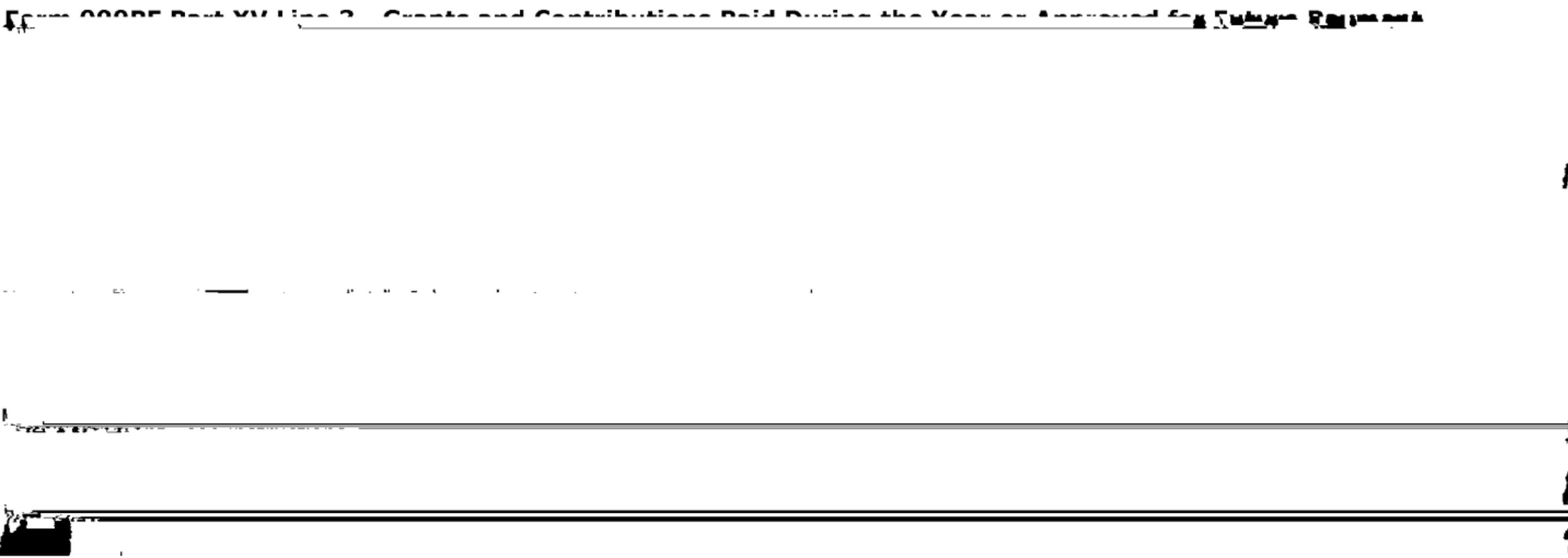
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
MARION PARKSPO BOX 716 MARION, IN 46952	NONE	PC	GENERAL	3,000
INDEPENDENT COLLEGES OF INDIANA	NONE	SO T	GENERAL	500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
MEALS ON WHEELS 624 SOUTH ADAMS STREET MARION, IN 469532041	NONE	PC	GENERAL	250
PAL CLUB555 E NORTON STREET MARION, IN 46952	NONE	PC	GENERAL	500
LIONS CLUB10152 SOUTH 100 EAST FAIRMONT, IN 469289329	NONE	PC	GENERAL	250
Total			► 3a	78,225

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
TAYLOR FILM FESTIVAL 236 W READE AVE UPLAND, IN 46989	NONE	PC	GENERAL	100
Gilead MinistriesPO Box 134 JONESBORO, IN 46938	NONE	PC	GENERAL	100
LOUISVILLE COMMUNITY FOUNDATION 325 WEST MAIN STREET NO 1110 LOUISVILLE, KY 40202	NONE	PC	GENERAL	225
Total			► 3a	78,225



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CASA OF GRANT COUNTY INC 303 SOUTH NORTON AVENUE MARION, IN 46952	NONE	PC	GENERAL	500
COMMUNITY IMPACT FUND 102 N Lebanon St STE 200 LEBANON, IN 46052	NONE	PC	GENERAL	5,000
Marion High Athletic Endowment PO BOX 1029 MARION, IN 469527429	NONE	PC	GENERAL	1,000
Total			► 3a	78,225

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)		Yes	No
5a	During the year did the foundation pay or incur any amount to		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(4) Provide a grant to an organization other than a charitable, etc. organization described	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
Gas City Park 211 East Main Street Gas City, IN 46933	NONE	PC	GENERAL	250
Indiana Wesleyan 4201 S Washington Street Marion, IN 469534974	NONE	PC	GENERAL	500
Kinwell Academy 2930 S NAPPANEE ELKHART, IN 46517	NONE	PC	GENERAL	2,000
Total			► 3a	78,225

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
M&M Law Enforcement Support 1121 W Deer Creek Dr Brazil, IN 478347950	NONE	PC	GENERAL	150
ALLEN COUNTY SPCA 4914 HANNA STREET FORT WAYNE, IN 46806	NONE	PC	GENERAL	200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
EASTERSEALS CROSSROADS 4740 KINGSWAY DRIVE INDIANAPOLIS, IN 46205	NONE	PC	GENERAL	500
GRANT COUNTY SPORTS HALL OF FAME 123 SUTTER WAY MARION, IN 46952	NONE	PC	GENERAL	250
SANDUSKY CENTRAL CATHOLIC SCHOOLS 410 W JEFFERSON STREET SANDUSKY, OH 44870	NONE	PC	GENERAL	250
Total			► 3a	78,225

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
UNITED WAY 215 S ADAMS STREET MARION, IN 46952	NONE	PC	GENERAL	10,000
MARION CIVIC THEATRE 509 S WASHINGTON STREET MARION, IN 46953	NONE	PC	GENERAL	2,000
MARION PHILHARMONIC ORCHESTRA 236 W READE AVENUE UPLAND, IN 46989	NONE	PC	GENERAL	1,000
Total			► 3a	78,225

Form 990DE Part VIII Line 2 - Grants and Contributions Paid During the Year or Approved for Future Payment . . .

TY 2018 Accounting Fees Schedule

Name: Atlas Foundry Foundation Inc**EIN:** 35-6041739

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREP FEES	4,160	2,080		2,080

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2018 Depreciation Schedule

Name: Atlas Foundry Foundation Inc

EIN: 35-6041739

TY 2018 Investments Corporate Stock Schedule

Name: Atlas Foundry Foundation Inc

EIN: 35-6041739

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
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TY 2018 Investments - Other Schedule

Name: Atlas Foundry Foundation Inc

EIN: 35-6041739

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
LORD ABBETT BOND	AT COST	377,554	358,746

TY 2018 Other Expenses Schedule

Name: Atlas Foundry Foundation Inc

EIN: 35-6041739

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS EXPENSE	60			60

TY 2018 Other Income Schedule

Name: Atlas Foundry Foundation Inc

EIN: 35-6041739

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
IRS Refund	3,345		

TY 2018 Other Professional Fees Schedule

Name: Atlas Foundry Foundation Inc

EIN: 35-6041739

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable

TY 2018 Taxes Schedule

Name: Atlas Foundry Foundation Inc

EIN: 35-6041739

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	31	31		

Schedule B
(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

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

2018**Name of the organization**
Atlas Foundry Foundation Inc**Employer identification number**
35-6041739**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 other property) from any one contributor. Complete Parts I and II. See instructions for determining contributions total.

Name of organization Atlas Foundry Foundation Inc		Employer identification number 35-6041739	
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
1	ATLAS FOUNDRY COMPANY INC 601 N HENDERSON AVE	\$ 15,000	Person <input checked="" type="checkbox"/>
	MARION, IN 46952		Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)

Name of organization

Atlas Foundry Foundation Inc

Employer identification number

35-6041739

Part II**Noncash Property**

		(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		
		\$			
(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		
		\$			

Name of organization Atlas Foundry Foundation Inc	Employer identification number 35-6041739
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Part III *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 the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for*