••• 990-**P**F

Return of Private Foundation

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

OMB No 1545-0052

2018

Open to Public Inspection

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.

For	calend	dar year 2018 or tax year beginning $10/01/18$,	and ending $09/3$	0/19			
Na	me of fou	undation			A Empl	oyer identification number	
12	(ADE)	N FOIDING THE			2 5	1557050	
		N FOUNDATION, INC. d street (or P O box number if mail is not delivered to street address)	Re	oom/suite		-1557058 hone number (see instructions	
		BOX 218				5-998-8139	•
		n, state or province, country, and ZIP or foreign postal code				mption application is pending,	check hara
	PLA				l C II dae	приот аррисацот в релину,	CHOCK HEID
G	Check a	all that apply 🔲 Initial return 🔲 Initial retu	rn of a former public cl	narity	D 1 Fc	oreign organizations, check he	
		Final return Amended				oreign organizations meeting t	
		Address change Name cha			85	% test, check here and attach	computation
Н (Check t	type of organization X Section 501(c)(3) exempt private		$\forall L$		ate foundation status was term	ninated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxab	le private foundation	/1	sectio	n 507(b)(1)(A), check here	P []
		rket value of all assets at J Accounting method	X Cash Acc	rual	l .	foundation is in a 60-month te	
		ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	ere 🕨 🔝
	ne 16)		be on cash basis)				/d/ Dah
ין א	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net	(d) Disbursements for charitable
ár -		the amounts in column (a) (see instructions))	books	incoi	ne	income	purposes (cash basis only)
) T	1	Contributions, gifts, grants, etc., received (attach schedule)	1,559,951	,	•		
	2	Check ▶ ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	559,315	5	59 <u>,</u> 315		
	5a	Gross rents					
ē	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	2,137,743				
Š	b	Gross sales price for all assets on line 6a 4,028,996	****				
œ	7	Capital gain net income (from Part IV, line 2)	RECEIVED	2,1	37,743		
	8	Net short-term capital gain	Min	70		0	
	9	Income modifications Gross sales less returns and allowances	M/Y 2 9 7020			· · · · · · · · · · · · · · · · · · ·	
	10a		******	l 🖄			
	b	Less Cost of goods sold	OGDEN LIT	1 144+ 1			
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule) STMT 1	1,042				
	12	Total. Add lines 1 through 11	4,258,051	2.6	97,058	0	
	13	Compensation of officers, directors, trustees, etc	16,375		975		8,775
penses	14	Other employee salaries and wages	24,833		2,483		27,717
eï	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)					
ED LU	Ь	Accounting fees (attach schedule) STMT 2	3,700				3,700
Ę	С	Other professional fees (attach schedule)			662		596
tra	17	Interest					
nis	18	Taxes (attach schedule) (see instructions) STMT 3	11,545		199		1,606
<u>:E</u>	19	Depreciation (attach schedule) and depletion					
Ag G	20	Occupancy					
É	21	Travel, conferences, and meetings					
Zœ	22	Printing and publications	77.000		73 605		4 102
<u>rïa</u>	23	Other expenses (att sch) STMT 4	77,888		73,695		4,193
ďrati	24	Total operating and administrative expenses. Add lines 13 through 23	134,341		78,014	o	46,587
Ped	25	Contributions, gifts, grants paid	944,200		,0,014		944,200
8 ydy Operating and Magainistrative E)	26	Total expenses and disbursements. Add lines 24 and 25	1,078,541		78,014	0	990,787
2	27	Subtract line 26 from line 12	1,0,0,541		. 0, 011		2207.01
	a	Excess of revenue over expenses and disbursements	3,179,510				, c
2021	ь	Net investment income (if negative, enter -0-)	-,,-		19,044		٠, ٠,
	С	Adjusted net income (if negative, enter -0-)				0	,

P:	art l	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
ł	1	Cash – non-interest-bearing	24,538	15,713	15,713
	2	Savings and temporary cash investments			
-	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
- }		Less allowance for doubtful accounts ▶	,		
	5	Grants receivable			
ĺ	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			•
1		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less allowance for doubtful accounts ▶ 0			
र्ध	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹ 1	0a	Investments – U S and state government obligations (attach schedule)			
-	b	Investments – corporate stock (attach schedule) SEE STMT 5	5,990,940	8,062,720	23,096,629
1	С	Investments – corporate bonds (attach schedule)			
1	1	Investments – land, buildings, and equipment basis			
•]		Less accumulated depreciation (attach sch.)			
1	2	Investments – mortgage loans			
1	3	Investments – other (attach schedule)			
1	4	Land, buildings, and equipment basis ▶			
Ì		Less accumulated depreciation (attach sch.) ▶			
1	5	Other assets (describe ▶			
1	6	Total assets (to be completed by all filers – see the	,		
\perp		instructions. Also, see page 1, item l)	6,015,478	8,078,433	23,112,342
1	7	Accounts payable and accrued expenses			
	8	Grants payable			
<u>မ</u> ွို 1	9	Deferred revenue			
Liabilities	0	Loans from officers, directors, trustees, and other disqualified persons			
<u>e</u> 2	1	Mortgages and other notes payable (attach schedule)			
기 2	2	Other liabilities (describe ▶			
_ 2	3	Total liabilities (add lines 17 through 22)	0	0	
Į		Foundations that follow SFAS 117, check here]		
Ses		and complete lines 24 through 26, and lines 30 and 31.			
	4	Unrestricted			
Net Assets or Fund Bala	5	Temporarily restricted			
B 2	6	Permanently restricted			
되		Foundations that do not follow SFAS 117, check here			
힐		and complete lines 27 through 31.			
G 2	7	Capital stock, trust principal, or current funds			
မ္ဟု 2	8	Paid-in or capital surplus, or land, bldg, and equipment fund			
8 Z	λ, é	Retained earnings, accumulated income, endowment, or other funds	6,015,478	8,078,433	
8 3	以	Total net assets or fund balances (see instructions)	6,015,478	8,078,433	
2 3	71	Total liabilities and net assets/fund balances (see			
		instructions)	6,015,478	8,078,433	
	rt II				
		net assets or fund balances at beginning of year – Part II, column (a), line 30 (m	ust agree with	[[
		f-year figure reported on prior year's return)		1	6,015,478
		amount from Part I, line 27a		2	3,179,510
		increases not included in line 2 (itemize) ▶		3	
		nes 1, 2, and 3		4	9,194,988
		eases not included in line 2 (itemize) ► SEE STATEMENT 6		5	1,116,555
6 T	otal	net assets or fund balances at end of year (line 4 minus line 5) – Part II, column	(b), line 30		8,078,433
					Form 990-PF (2018)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

990,787

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

35-1557058

STMT 7

10

Form 990-PF (2018)

Form 990-PF (2018) BOREN FOUNDATION, INC Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 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) Domestic foundations that meet the section 4940(e) requirements in Part V, check 26,190 here ► X and enter 1% of Part I, line 27b 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-) 3 Add lines 1 and 2 3 4 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-5 6 Credits/Payments а 2018 estimated tax payments and 2017 overpayment credited to 2018 9,600 6a Exempt foreign organizations - tax withheld at source b 6b 16,590 С Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6ď Total credits and payments Add lines 6a through 6d 7 7 26.190 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 q Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be Credited to 2019 estimated tax 11 11 Refunded Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it Yes No Х participate or intervene in any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the Х instructions for the definition 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities X Did the foundation file Form 1120-POL for this year? 1c Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers > \$_ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers 🕨 💲 Х Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A4b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 6 X 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 X Enter the states to which the foundation reports or with which it is registered. See instructions IN b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 8b Х Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See instructions for Part XIV If "Yes," 9 complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

names and addresses

_Pa	irt 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		_X
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		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	Х	
	Website address ► N/A					
14	The books are in care of ▶ SALLY J. BRINER Teleph	hone no 🕨	765-9	98-	813	9
	P O BOX 218					
	Located at ▶ UPLAND IN	ZIP+4 ▶	46989	•		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here					▶ []
	and enter the amount of tax-exempt interest received or accrued during the year	> _	15			
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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
	the foreign country ▶			<u> </u>		<u> </u>
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year, did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		C-2-1			
	disqualified person?	Yes	X No			:
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			:
	(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)?	∐ Yes	X No			
	(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	σ				
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulation	ons	3T / 7			Í
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here					į
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		N/A		' f	
_	were not corrected before the first day of the tax year beginning in 2018?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					ĺ
_	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	Yes	X No			ĺ
	6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ▶ 20 , 20 , 20 , 20		<u> </u>			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					ĺ
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					į
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b	' I	
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					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the					
	foundation had excess business holdings in 2018)		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	۶7	•	4a		X
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 20			4b		X
			F	orm 99	0-PF	(2018)

	990-PF (2018) BOREN FOUNDATION, INC.		.557058	atiniic	\d\		P	age 6
	During the year did the foundation pay or incur any amount to	4/20 Iviay be N	equirea (COI	itiriue	:u)		Yes	No
Ja	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4).	4945(6))2		Yes	X No		162	NO
	(2) Influence the outcome of any specific public election (see section 4955), or		لــا	. 03				
	directly or indirectly, any voter registration drive?			Yes	X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes	X No			
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in]			
	section 4945(d)(4)(A)? See instructions			Yes	X No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, o	r educational	_					
	purposes, or for the prevention of cruelty to children or animals?			Yes	X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify und	er the exceptions d	escribed in					
	Regulations section 53 4945 or in a current notice regarding disaster assistance	? See instructions			N/\underline{A}	5b		
	Organizations relying on a current notice regarding disaster assistance, check h				▶ 📋			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax	/-		LJ			
	because it maintained expenditure responsibility for the grant?		N/A	Yes	No			
_	If "Yes," attach the statement required by Regulations section 53 4945–5(d)							
ба	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	ay premiums		V	▼			
h	on a personal benefit contract?	reanal hanafit as	inet?	Yes	X No	e h	1	Х
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	isonai penetit contr	act /			6b		Α.
7a	If "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?		Yes	X No			
b	If "Yes," did the foundation receive any proceeds or have any net income attribu		tion?	163	N/A	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1		,tion ·		14, 11	1.0		
Ŭ	remuneration or excess parachute payment(s) during the year?	,000,000		Yes	X No			
Pa	irt VIII Information About Officers, Directors, Trustees, Fo	undation Mana	agers, Highly	y Paid	d Employ	ees,		
	and Contractors			•		·		
1 L	ist all officers, directors, trustees, and foundation managers and their com	pensation. See ins	structions.					
		(b) Title, and average	(c) Compensation		Contributions to			
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)		nployee benefit ns and deferred		opense a er allowa	
		devoted to position		c	ompensation	↓ —		
SE	E STATEMENT 8					1		
		 	<u> </u>	+-	 	-		
	`							
	<u> </u>	 				+-		
		 	<u> </u>	-		╁┈╌		
				1				
	Compensation of five highest-paid employees (other than those included of	on line 1 – see inst	tructions). If no	ne. en	ter	1		
-	"NONE."			,				
		(b) Title, and average			Contributions to	1		
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation		nployee benefit ins and deferred		kpense a er allowa	
		devoted to position			compensation			
NO	NE					1		
						 		
		ļ				—		
			i	1		1		
				İ				
				ļ				
Tota	number of other employees paid over \$50,000					•		0

Form 990-PF (2	018) BOREN FOUNDATION, INC.	35-1557058	Page 7
Part VIII	Information About Officers, Directors, Trustees, Fo	undation Managers, Highly Paid E	
-	and Contractors (continued)		
3 Five high	est-paid independent contractors for professional services. See i	nstructions. If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
-			
	f		
Total number of	others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct charitable activities during the tax year. Include relevant statistical inform other beneficiaries served, conferences convened, research papers produced, etc.	ation such as the number of	Expenses
1 N/A			
•			
2			
			ļ
			
3			, '
		ì	
4			
	 		<u>L</u>
Part IX-B	Summary of Program-Related Investments (see in		
	orgest program-related investments made by the foundation during the tax year on lines 1 and	12	Amount
1 N/A			
2			
	elated investments. See instructions		
3			

Total. Add lines 1 through 3

Form 990-PF (2018)

990,787

26,190 964,597

3a 3b

4

5

3

5

Amounts set aside for specific charitable projects that satisfy the

Adjusted qualifying distributions. Subtract line 5 from line 4

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

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

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

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

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b See instructions

Cash distribution test (attach the required schedule)

P	art XIII Undistributed Income	(see instructions				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part)	XI,	Corpus	Years prior to 2017	2017	2018
	line 7					1,041,528
2	Undistributed income, if any, as of the en	nd of 2018	i			
а	Enter amount for 2017 only				944,140	
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to	2018				
а	From 2013					
b	From 2014					
С	From 2015		ļ			
d	From 2016]			
е	From 2017					
f	Total of lines 3a through e					
4	Qualifying distributions for 2018 from Par	rt XII,				
	line 4 ▶ \$990,787					
а	Applied to 2017, but not more than line 2	a			944,140	
b	Applied to undistributed income of prior y	rears				
	(Election required – see instructions)					
С	Treated as distributions out of corpus (Ele	ection				
	required - see instructions)	ı				
d	Applied to 2018 distributable amount		······································			46,647
	Remaining amount distributed out of corp	ous				
5	Excess distributions carryover applied to					
	(If an amount appears in column (d), the					
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtrac	et line 5				
	Prior years' undistributed income Subtract					
	line 4b from line 2b					
С	Enter the amount of prior years' undistribi	uted				·····
	income for which a notice of deficiency ha					
	been issued, or on which the section 494					
	tax has been previously assessed	-(-/				
d	Subtract line 6c from line 6b Taxable		· · · · · · · · · · · · · · · · · · ·			
	amount - see instructions					
е	Undistributed income for 2017 Subtract I	ine				
	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2018 Subtract I	ines				
	4d and 5 from line 1. This amount must b					
	distributed in 2019					994,881
7	Amounts treated as distributions out of co	orpus			***************************************	
	to satisfy requirements imposed by section	•	•		Į.	
	170(b)(1)(F) or 4942(g)(3) (Election may t				ŀ	
	required—see instructions)					
8	Excess distributions carryover from 2013	not	<u></u> ,			
_	applied on line 5 or line 7 (see instructions					
9	Excess distributions carryover to 2019	· .				······································
-	Subtract lines 7 and 8 from line 6a	·· ·			į	
10	Analysis of line 9		······································			······································
a	Excess from 2014				Į.	
b	Excess from 2015				ļ	
c	Excess from 2016					
d	Excess from 2017				ŀ	
	Excess from 2018					
				, 1	t t	

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year ARTS PLACE P.O. BOX 804 NONE PUBLIC PORTLAND IN 47371 RENOVATE EXTERIOR OF ARTS CENTER 20,000 BALL STATE UNIVERSITY FND/AUTISM CA DEPT OF SPECEL ED NONE PUBLIC MUNCIE IN 47304. AUTISM CAMP 100,000 BRIDGES TO LIFE/INDIANA P.O. BOX 570895 PUBLIC NONE HOUSTON TX 77257 **PROGRAM** 10,000 CANCER SERVICES OF GRANT CO PUBLIC 305 NORTON AVE NONE MARION IN 46953 BREAST CANCER PROG & FITTING BOUTIQU 20,000 CAREY SERVICES PUBLIC 2724 S. CAREY ST. NONE MARION IN 46952 **PROGRAM** 10,500 CENTER CHAPEL UNITED METHODIST CHUR 8733 E 200 S NONE PUBLIC MARION IN 46953 BUILDING MINISTRY CENTER, ECT 50,000 COLLEGE WESLEYAN CHURCH PUBLIC 200 E. 38TH ST. NONE MARION IN 46953 **PROGRAM** 18,700 DISTINGUISHED YOUNG WOMEN OF IN NONE PUBLIC 789 S. 8TH ST **PROGRAM** UPLAND IN 46989 7,500 EASTBROOK COMMUNITY SCHOOL\$ 560 S 950 E NONE PUBLIC MARION IN 46953 EDUCATIONAL 132,000 EITELJORG MUSEUM PUBLIC 500 W WASHINGTON ST NONE INDIANAPOLIS IN 46952 EDUCATIONAL 25,000 ▶ 3a 944,200 Total b Approved for future payment N/A

▶ 3b

Total

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FIRST LIGHT CHILD ADVOCACY CENTER 904B WEST 3RD ST NONE PUBLIC MARION IN 46952 PROGRAM 31,000 FLY-IN CRUISE-IN, INC. 347 S 500 E NONE PUBLIC MARION IN 46953 PROGRAM 5,000 GRANT CO/MISSISSINEWA SCHOOLS PUBLIC 424 E S A ST NONE GAS CTY IN 46933 **PROGRAM** 12,000 GRANT COUNTY RESCUE MISSION PUBLIC P.O. BOX 63 NONE MARION IN 46952 **PROGRAM** 30,000 GRANT COUNTY SHERIFFS DEPT 214 E 4TH ST NONE PUBLIC **PROGRAM** 7,000 MARION IN 46952 HAPPY HOLLOW CHILDRENS CAMP PUBLIC 615 N ALABAMA STE 134 NONE INDIANAPOLIS IN 46204 CAMP FUND 3,500 HONEYWELL FOUNDATION PUBLIC NONE 275 W MARKET ST **PROGRAM** 5,000 WABASH IN 46992 JAY COMMUNITY CENTER 115 E WATER ST NONE PUBLIC YOUTH FOOTBALL PROGRAM & CONF ROOM PORTLAND IN 47371 11,000 JEFFERSON TOWNSHIP BASEBALL & SOFTB PO BOX 312 NONE PUBLIC FIELD RESURFACING AND REPAIRS UPLAND IN 46989 8,000 JUNIOR ACHIEVEMENT 959 E 4TH ST NONE PUBLIC MARION IN 46952 **PROGRAM** 5,000 ▶ 3a Total b Approved for future payment N/A

▶ 3b

Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year LAKEVIEW CHRISTIAN SCHOOL 5318 S WESTERN AVE NONE PURLIC MARION IN 46953 CAMPUS SECURITY PROJECT AND TECH 15,000 LIGHTRIDER MINISTRIES 168 S SECOND ST NONE PUBLIC UPLAND IN 46989 GENERAL 11,000 LITTLE PANTHER PRESCHOOL P.O. BOX 412 PUBLIC NONE VANBUREN IN 46991 EDUCATIONAL 13,000 MARION COMMUNITY SCHOOL OF THE ARTS 305 S ADAMS ST NONE PUBLIC MARION IN 46953 PRESENTATION OF 3 PRODUCTIONS 7,500 MARION PHILHARMONIC ORCHESTRA PUBLIC P.O. BOX 272 NONE MARION IN 46952 **PROGRAM** 30,000 MARION-GRANT CO SENIOR CENTER PUBLIC P.O. BOX 443 NONE MARION IN 46952 **PROGRAM** 10,000 MOUNT TABOR UNITED METHODIST CHURCH PUBLIC 714 S FRANKLIN ST NONE DUNKIRK IN 47336 REPAIRS 23,000 PARK ELEMENTARY SCHOOL PUBLIC 500 S SYCAMORE ST NONE EDUCATIONAL 1,500 FAIRMONT IN 46928 PIERCE UPLAND UNITED METHODIST CHUR PUBLIC P.O. BOX 11 NONE **PROGRAM** UPLAND IN 46989 41,500 RIVER COMMUNITY CHURCH NONE PUBLIC 759 S LENFESTY AVE IN NEED MARION IN 46952 CHRISTMAS MEAL\$ FOR FAMILIE\$ 20,000 За Total b Approved for future payment N/ATotal ▶ 3b

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SALVATION ARMY 359 N BRADNER AVE NONE PUBLIC MARION IN 46952 GENERAL 10,000 SCIENCE CENTRAL INC 1950 N CLINTON ST NONE PUBLIC FORT WAYNE IN 46805 EDUCATIONAL 5,000 SECOND HARVEST FOOD BANK 6621 N OLD SR 3 PUBLIC NONE MUNCIE IN 47303 **PROGRAM** 51,000 SPECIAL OLYMPICS - GRANT COUNTY P.O. BOX 1093 PUBLIC NONE MARION IN 46952 **PROGRAM** 12,000 ST VINCENT HOSPITAL FOUNDATION 8402 HARCOURT RD STE 210 PUBLIC INDIANAPOLIS IN 46260 ST VINCENT HOUSE 10,000 TAYLOR UNIVERSITY PUBLIC 236 W READE AVE NONE UPLAND IN 46989 EDUCATIONAL 100,000 TOWN OF MATTHEWS/MATTHEWS POLICE PUBLIC 816 S WISCONSIN AVE NONE NEW POLICE VEHICLE MATTHEWS IN 46957 40,000 UPLAND COMMUNITY CHURCH PUBLIC 439 W BERRY AVE NONE UPLAND IN 46989 GENERAL 10,000 VANBUREN PUBLIC LIBRARY 115 S 1ST ST NONE PUBLIC VANBUREN IN 46991 SUMMER READING PROGRAM 500 VETERAN STAND DOWN 401 S ADAMS NONE PUBLIC MARION IN 46953 GENERAL 2,000 ▶ 3a Total b Approved for future payment N/A

▶ 3b

Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient . Purpose of grant or show any relationship to any foundation manager status of Amount contribution recipient or substantial contributor Name and address (home or business) a Paid during the year WHITE'S RESIDENTIAL 5233 S 50 E NONE PUBLIC WABASH IN 46992 GROWING TEENS FOR LIFE CAFE 20,000 ▶ 3a Total **b** Approved for future payment N/A **▶** 3b Total

Part XVI-A	Analysis of Income-Producing Act	tivities				
	nounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program s	ervice revenue	ļ		<u> </u>		(See instructions)
a						
ь		ļ		ļ		
°.——		ļ		 		·
a		 	ļ. ————————————————————————————————————	 		
e						
' - <u>-</u>				ļ <u> </u>		
	and contracts from government agencies			 		
	ip dues and assessments	}	 	 	 	
	savings and temporary cash investments	 		111	550 315	
	and interest from securities			14	559,315	
	ncome or (loss) from real estate			 		
	nanced property			-		
	bt-financed property			 -		
7 Other inves	ncome or (loss) from personal property					
				ļ.—.		2,137,743
	ss) from sales of assets other than inventory or (loss) from special events			 -		2,137,743
	it or (loss) from sales of inventory					
11 Other reve	·					
	RATED REFUND	-				89
	OR YEAR ADJUSTMENT	,		 		933
	I IN LIEU					20
e <u>- 01101</u>	- 2.1 2.20					
	dd columns (b), (d), and (e)		0		559,315	2,138,785
	line 12, columns (b), (d), and (e)	<u> </u>			13	2,698,100
	t in line 13 instructions to verify calculations)				_	
Part XVI-E		complishm	ent of Exempt P	urpose	es	
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purport	is reported in c	olumn (e) of Part XVI-	A contrib	outed importantly to the	ons)
N/A	accompliant of the foundation of example parpe	2000 (011101 11101	o providing lands		<u></u>	
						
						•
					<u> </u>	
					·	
				- -		

<u>-oim 99</u>	0-PF (20)	8) BOREN FO	DOMDATT	N_{1}	٠.				T22/028			Pag	<u>ge 1</u> ა
Part		Information Re Organizations	garding Tr	ansfers To	o and	Transac	ctio	ns and Relat	ionships Wi	th Noncha	ritable Ex	emp	t
1 Di		inization directly or i	ndirectly enga-	ge in any of t	he follo	owing with a	anv o	ther organization	described			Yes	No
ın	section 50	01(c) (other than se				_							
	ganization												ĺ
		om the reporting fou	indation to a ne	oncharitable (exemp	t organization	on of					1	
	Cash										1a(1)		X
(2)	Other as	ssets									1a(2)		X
b Ot	her transa	actions											
(1)	Sales of	assets to a noncha	ritable exempt	organization							1b(1)		X
		es of assets from a		-		n					1b(2)		X
(3)	Rental o	of facilities, equipme	nt, or other as	sets							1b(3)		X
		rsement arrangeme									1b(4)		X
		r loan guarantees									1b(5)		X
		ance of services or	mambarahin a	r fundraicina	collect	ations					1b(6)		X
			•	•			_				-		X
		acilities, equipment,									1c	L	
		r to any of the above			_								
		goods, other assets	-	-		_							
		transaction or share	ng arrangeme	nt, show in co	olumn	(d) the value	e of	he goods, other	assets, or servi	ces received			
	ne no	(b) Amount involved	(c) Nam	e of noncharitable	e exemp	organization		(d) Descr	iption of transfers, tra	insactions, and sh	aring arrangeme	ents	
<u>N/A</u>									<u></u> .				
		<u> </u>											
										-			
							\neg						
											-		
												_	
	-												
							-+						
								· · · · · · · · · · · · · · · · · · ·					
			_					· · · · · · · · · · · · · · · · · · ·					
		<u> </u>											
		ation directly or indir section 501(c) (othe					e tax-	exempt organiza	itions		XY	es [] No
b_lf	Yes," con	plete the following	schedule						·				
	(a) Name of organization		(b) Ty	pe of or	ganization			(c) Descrip	tion of relationship)		
LE	LALO	FOUNDATIO	.VV	501 (C)	(3)		COMMON	DIRECTOR	S			
AV	IS FC	UNDATION		501 (C)	(3)		COMMON	DIRECTOR	S			
						<u> </u>							
				1									
	Under pen	alties of perjury, I declare	that I have exami	ned this return, ii	ncluding	accompanying	sche	dules and statements	, and to the best of	ny knowledge an	d belief, it is true		
	correct, ar	d complete Declaration	of preparer (other	than taxpayer) is	based o	on all information	on of w	hich preparer has an	y knowledge	May the	IRS discuss this r	eturn	
Sign		\sim									preparer shown b		_
		()	10	_			_	·Col		See instr	ructions X	Yes	No
lere	L	()alle	-0.460	inal		1	\mathcal{C}	118/2020	MD 17 A	CUPER			
ł	<u> </u>		7: 0001	NAT				1 / 2 200		SURER			
	▼ Signa	ture of officer or trustee) <i>V</i>				Date		Title			Γ	
	Print/Ty	oe preparer's name				Preparer and	gnilture	•			Date	Check	n
Paid						MAL						self-em	
	CYNTI	IIA M. WIRTN	ER, CPA							0	5/12/20	<u> </u>	
repare	l Firm's n	ame ► LEON	NARD J.	ANDORF	ER	& CO.,	, I	LP		PTIN	P00017	7581	
Jse Onl	Firm's a	ddress ▶ 110	W BERRY			STE. 2	220	2		Firm's EIN	35-167	936	1
			WAYNE			2-231			ļ		260-42		

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization **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

2018

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

_BOREN FOUNDAT:	ION, INC.	35-1557058
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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501(c)(7) instructions	covered by the General Rule or a Special Rule .), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ıle See
General Rule		
_	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling sproperty) from any one contributor. Complete Parts I and II. See instructions for determinations.	
Special Rules		
regulations under sect 13, 16a, or 16b, and the	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support testions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Phat received from any one contributor, during the year, total contributions of the greated amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Part	Part II, line r of (1)
contributor, during the literary, or educational	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a year, total contributions of more than \$1,000 exclusively for religious, charitable, scient purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entitle the contributor name and address), II, and III	ntific,
contributor, during the contributions totaled n during the year for an	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a year, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were received religious, charitable, etc., purpose. Don't complete any of the parts unless to this organization because it received nonexclusively religious, charitable, etc., contributions that were received nonexclusively religious, charitable,	ceived the
990-EZ, or 990-PF), but it mus	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fost answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or	m 990-EZ or on its

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

PAGE 1 OF 1

Name of organization BOREN FOUNDATION, INC.

Employer identification number 35-1557058

Part I Cor	ntributors (see instructions)	Use duplicate copies of Part I	ıf addıtional space ıs needed
------------	-------------------------------	--------------------------------	-------------------------------

Parti	Contributors (see instructions) Use duplicate copies of	Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LELAND BOREN CHARITABLE REMAINDER UNITRUST - FIRST MERCHANTS BANK 10333 N. MERIDIAN ST., STE. 350 INDIANAPOLIS IN 46290	\$ ['] 1,559,951	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
		Schedule B	(Form 990, 990-EZ, or 990-PF) (2018)

PAGE 1 OF 1

Page 3

Name of organization
BOREN FOUNDATION, INC.

Employer identification number

35-1557058

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
1	CRT FINAL DISTRIBUTION						
		\$ 1,555,930	05/13/19				
(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				
		\$					

- 000	· · · · · · · · · · · · · · · · · · ·	Capital Gains and Losses	for Tax on Investment	Income	2040			
Form 990)-PF	10/01/18 , and endin	g 09/30/19	2018				
Name	For caler	ndar year 2018, or tax year beginning	10/01/18 , and endin	*	ntification Number			
BOREN F	'OUNDATION	, INC.		<u>35-155</u>	7058			
	(a) List and descri 2-story brick w	be the kind(s) of property sold, e g , real estate, arehouse, or common stock, 200 shs MLC Co	(b) How acquire P-Purchase D-Donation		(d) Date sold (mo , day, yr)			
1) 86 SH	PRAXAIR	INC	P	VARIOUS	VARIOUS			
2) 1180	SH EATON	VANCE	P	VARIOUS	VARIOUS			
) US TS	Y NOTE 1.	750	P	VARIOUS	VARIOUS			
<u>) 273 S</u>	H BOSTON	PTN	P	VARIOUS	VARIOUS			
) 37 SH	KOONTOR	BRANDS	P	VARIOUS	VARIOUS			
3437	SH PRINC	SMALL-MID CAP DIV	P	VARIOUS	VARIOUS			
		N ASSET HIGH INC	P	VARIOUS	VARIOUS			
<u>) 1121 </u>	SH CBRE C	LARION GLOBAL	P	VARIOUS	VARIOUS			
	SH PRINC	VARIOUS	VARIOUS					
	SH VECTRE	VARIOUS	VARIOUS					
1) .2 SH		VARIOUS	VARIOUS					
	H PRAXAIR	VARIOUS	VARIOUS					
3) 1500	SH JP MOR		P	VARIOUS	VARIOUS			
<u>14) 23969</u>			P	VARIOUS	VARIOUS			
5) 2500	SH JP MOR	GAN	P	VARIOUS	VARIOUS VARIOUS			
		T	<u> </u>					
(e) Gross	s sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gair (e) plus (i	n or (loss)) minus (g)			
)	14,057		13,406		651			
Σ	10,329		10,358		-29			
)2	200,000		199,742		258			
)	2,900		2,917		-17			
)	1,250		1,319		-69_			
)	47,016		50,822		-3,806			
)	9,022		8,795		227			
)	7,995	<u> </u>	7,717		<u> 278</u>			
)	85,605		90,080		-4,475			
0)	57,600		2,280		55,320_			
1)	10		2		8			
	126,024		91,011		35,013			
	162,462		15,039		47,423			
	209,327		21,042		188,285			
5) 2	283,628		25,065	2	58,563_			
Complete on	nly for assets show	ng gain in column (h) and owned by the f	oundation on 12/31/69					
(I) FMV a		(j) Adjusted basis as of 12/31/69	(k) Excess of col (i)	(I) Gains (Co col (k), but not le	ol (h) gain minus ss than -0-) Or			
		as of 12/31/69	over col (j), if any	Losses (fron	651			
)		 	 		-29			
))					258			
)		<u> </u>	<u> </u>		-17			
)		 	 		-69			
)					-3,806			
/)					227			
)					278			
)		<u> </u>			-4,475			
0)		,			55,320			
1)		<u>'</u>			8			
2)		<u> </u>			35,013			
3)		 	 	1	47,423			
3) 4)		 			88,285			
4) 5)		<u> </u>			58,563			
"		1	L		50,503			

(15)

Form 99	90-PF	come	2018						
		For calen	dar year 2018, or tax year beginning	10/01/1	8 , and ending	09/30/19			
lame						Employer Ide	ntification Numbe		
BOREN	FOUNI	ATION	, INC.			35-1557058			
	(a)	List and describ 2-story brick wa	pe the kind(s) of property sold, e.g., real estate, arehouse, or common stock, 200 shs. MLC Co		(b) How acquired P-Purchase D-Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1) 412	SH TE	LEFON	ICA		P	VARIOUS	VARIOUS		
2) CBRI			LOBAL		P	VARIOUS VARIO			
3) 42 5		N VANO	CE LTD		P	VARIOUS	VARIOUS		
4) 640	SH FA	RMERS	& MERC		P	VARIOUS	VARIOUS		
5) 500	SH F	IRST N	MERCH CORP		P	VARIOUS	VARIOUS		
6) <u>501</u> 4	4 SH J	OHNSO	N CTLS INL		P	VARIOUS	VARIOUS		
<u>7) 500(</u>		P MORO	GAN		P	VARIOUS	VARIOUS		
8) 5000			rional		P	VARIOUS	VARIOUS		
9) 120			ASSET		P	VARIOUS	VARIOUS		
10) 4928		OODWAI BOSTON			P	VARIOUS	VARIOUS		
11) 143		P	VARIOUS	VARIOUS					
	SH CAB		<u>P</u>	VARIOUS	VARIOUS				
13) 133		RS.COM		P	VARIOUS	VARIOUS			
14) 375		EBOLD	NIXDORF		P	VARIOUS VARIO			
15) 200	SH GA	NNETT_	CO INC		P	VARIOUS	VARIOUS		
(e) G	(e) Gross sales price (f) Depreciation allowed (g) Cost or other batter (or allowable) (g) Cost or other batter ba					(h) Gair (e) plus (f	or (loss)) minus (g)		
1)	3,:	350			3,486	-136			
2)		596			714	-18			
3)		528			562	-34			
4)	18,	793			8,400	10,393			
5)	176,0	001			82,911	93,090			
6)	194,	503		14	48,655	45,848			
7)	<u>552,2</u>				50,130	502,166			
8)	82,				77,590	5,177			
9)		305			814	-9			
10)	544,4				87,439	357,022			
11)	152,5				48,996_	 	3,548		
12)					10,792	 	56,512		
13)					2,860	-49 2 592			
14)					934 1,706	2,592			
15)		508	<u> </u>		1,700		-196		
Complete	only for as	sets showing	ng gain in column (h) and owned by th			(I) Gains (Co	il (h) gain minus		
(i) FM	V as of 12/31/	69 	(j) Adjusted basis as of 12/31/69	(k) Excess over cot (j)	of col (i) , if any	(I) Gains (Co col (k), but not les Losses (from	ss than -0-) Or i col (h))		
1)							-136		
2)			<u> </u>			 	<u>-18</u>		
3)							-34 10,393		
4)						 	93,090		
5) 6)						 	45,848		
7)							02,166		
/) 8)						 	5,177		
9)	-,,,,						-9		
10)						7	57,022		
11)						 	3,548		
12)					···		56,512		
13)							-49		
14)							2,592		
15)									

-198

<u>(15)</u>

	5/12/2020 3 15 PM									
Form	990-PF		Capital Gains and Losses	for Tax on Inv		o9/30/19	2018			
Name		_ For calend	dar year 2018, or tax year beginning	10/01/18	s , and ending		Identification Number			
BO	REN FOUNI	DATION	, INC.	· · · · · · · · · · · · · · · · · · ·		35-15	57058			
	(a)	List and describ 2-story brick wa	the the kind(s) of property sold, e.g., real estate, rehouse, or common stock, 200 shs. MLC Co		(b) How acquired P-Purchase D-Donation	(C) Date acquire (mo , day, yr)				
			HLDGS CO		P	VARIOUS	+			
		ERSHEY			P	VARIOUS				
		JP MORO			P	VARIOUS				
			BRANDS		<u>Р</u> Р	VARIOUS				
			PAL SMALL-MIDCAP BLDG PRODUCTS		<u>Р</u> Р	VARIOUS VARIOUS				
	400 SH T	VARIOUS								
	3999 SH 7	VARIOUS								
	542 SH V	VARIOUS								
	15524 SH	VARIOUS								
	405 SH W	VARIOUS								
			VARIOUS							
		2628 SH CBRE CLARION GLOBAL REAL P 896 SH PRINCIPAL GLOBAL P					VARIOUS			
		CAPITAL GAIN DISTRIBTIONS								
15)										
	(e) Gross sales prid	ce	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense o	r basis f sale	(h) (e) pl	Gain or (loss) us (f) minus (g)			
1)	66,	66,945 64,058					2,887			
2)		30,941 25,723					5,218			
3)		302,525 28,073					274,452			
4)		,547 3,160				3,387				
5)	131,	890					-13,942			
6)	3,	593			3,058		535			
7)	6,	169			4,348		1,821			
8)	<u>155,</u>				0,191		124,911			
9)		037			7,713		-12,676			
10)	101,				3,137		7,967			
(11)		142			8,853		289			
12)		406			0,526		-45,120			
13)		120,000 110,997				9,003 25,477				
(14) (15)	25,477					25,477				
						T				
	inplete only for a		g gain in column (h) and owned by the fo	(k) Excess of	col (ı)	col (k), but n	s (Col. (h) gain minus ot less than -0-) OF			
`		-	as of 12/31/69	over col (j),	f any	Losses	(from col (h)) 2,887			
1) 2)						+	5,218			
<u>-</u>) 3)							274,452			
4)							3,387			
<u>.)</u> 5)	····						-13,942			
6)							535			
7)							1,821			
8)							124,911			
9)							-12,676			
10)							7,967			
11)							289			
12)							-45,120			
13)							9,003			
(14)							25,477			
						I				

150812 BOREN FOUNDATION, INC. 35-1557058 FYE: 9/30/2019	Federal	Federal Statements		5/12/2020 3:15 PM
Statem	Statement 1 - Form 990-PF	rm 990-PF, Part I, Line 11 - Other Income	her Income	,
Description		Revenue per Books	Net Investment Income	Adjusted Net Income
PRORATED REFUND PRIOR YEAR ADJUSTMENT CASH IN LIEU		\$ 89 933 20	₩.	₩
		\$ 1,042	w	w
Statemer	Statement 2 - Form 990-PF, F	990-PF, Part I, Line 16b - Accounting Fees	ounting Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
TAX PREPARATION TOTAL	\$ 3,700	ν ·ν	\$ \$ \$	\$ 3,700
St	Statement 3 - Form 990	Form 990-PF, Part I, Line 18	- Taxes	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
PAYROLL TAX FOREIGN TAX FEDERAL EXCISE TAX	\$ 1,785 20 20 9,740	\$ 179	w	\$ 1,606
TOTAL	-1 -1	\$.	\ \ \ \ \	\$ 1,606
	•			
				1-3

_
->
_
<u>S</u>
3:15
$\overline{}$
٠,
S
$\overline{}$
\sim
20
\Box
/12/202
Ñ
$\overline{}$
_
Ś

150812 BOREN FOUNDATION, INC. 35-1557058 FYE: 9/30/2019

ıts	
Jer	
ten	
Sta	
<u></u>	
der	
Ā	

	Charitable Purpose	\$	•		409	2.514	219	1,051	\$ 4,193
Expenses	Adjusted Net	৵						;	w.
Part I, Line 23 - Other	Net Investment	৵		73,392		279	24		\$ 73,695
Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses	Total	w		73,392	409	2,793	243	1,051	\$ 77,888
	Description		EXPENSES	INVESTMENT FEES	MISC EXPENSE	PAYROLL EXPENSE	SUPPLIES	INSURANCE	TOTAL

	Fair Market Value	\$ 279,181	15,130,605	494,750	1,019,950	153,491	602,153	593,308	618,089	107,292	139,538	128,860	707	3,824,925	3,780	\$ 23,096,629
Investments	Basis of Valuation	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	
0b - Corporate Stock	End of Year	\$ 279,181	3,696,119	500,000	986,408	150,000	600,155	579,590	619,043	103,855	100,017	121,800	707	325,845		\$ 8,062,720
990-PF, Part II, Line 10b - Corporate Stock Investments	Beginning of Year	\$ 137,655	1,186,644		89,837	172,288		169,686	520,041	335,868	89,673	223,304	27,754	3,038,190		\$ 5,990,940
Statement 5 - Form	Description	UBS STRATEGIC - CASH FUNDS	UBS STRATEGIC - EQUITY - COMMON STOC					STRATEGIC		STRATEGIC -	UBS STRATEGIC - NON TRAD - CLOSED	UBS STRATEGIC - OTHER	UBS BUSINESS - CASH FUNDS	UBS BUSINESS - EQUITY - COMMON STOCK	ACCRUED INCOME	TOTAL

-150812 BOREN FOUNDATION, INC.

35-1557058

*FYE: 9/30/2019

Federal Statements

Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount
CRT GAIN VS CARRYOVER BASIS	\$ 1,116,555
TOTAL	\$ 1,116,555

5/12/2020 3:15 PM

0 5/12/2020 3:15 PM 0 0 0 0 0 Expenses 7-8 0 0 0 Statement 8 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. Benefits City, State, Zip Statement 7 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors 2,375 750 3,000 3,000 4,250 Compensation 3,000 UPLAND IN 46989 Federal Statements Average 1.00 1.00 1.00 2.00 1.00 1.00 Hours PRESIDENT/DI VICE PRES.DI TREASURER SECRETARY Title DIRECTOR DIRECTOR Address P.O. BOX 218 LELAND BOREN CHARITABLE REMAINDER 150812 BOREN FOUNDATION, INC. Name and Address Name MARTHA R. SONGER P O BOX 218 JAY M. ROSS P O BOX 218 UPLAND IN 46989 P O BOX 218 UPLAND IN 46989 UPLAND IN 46989 UPLAND IN 46989 SALLY J. BRINER UPLAND IN 46989 UPLAND IN 46989 BETH HENRICKS FYE: 9/30/2019 LAEL E. BOREN AMY E. SICKS P O BOX 218 P O BOX 218 P O BOX 218 35-1557058

-150812 BOREN FOUNDATION, INC.

35-1557058

Federal Statements

→ FYE: 9/30/2019

Statement 9 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

TYPED REQUEST DETAILING THE INTENDED USE OF THE FUNDS REQUESTED.

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

PRIMARILY EDUCATIONAL PURSUITS IN CENTRAL INDIANA.

5/12/2020 3:15 PM